

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00041208	<b>2</b> Total pages filed:  23		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Julie H.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 01/06/2025	
	NICKNAME	LAST Kocurek	SUFFIX		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 509 W. 11th Street 7th Floor, 390th District Court Austin, TX 78701		Date Hand-delivered or Date Postmarked		
			Receipt #	Amount	
			Date Processed		
			Date Imaged		
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Boone	MI		
	NICKNAME	LAST Almanza	SUFFIX		
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2301 S. Capital of Texas Hwy Austin, TX 78746				
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 474-9486	EXTENSION		
<b>8</b> REPORT TYPE	<input checked="" 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 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)				
<b>9</b> PERIOD COVERED	Month    Day    Year 07/01/2024		THROUGH	Month    Day    Year 12/31/2024	
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
	<b>11</b> OFFICE OFFICE HELD (if any) District Judge District 390 Travis		<b>12</b> OFFICE SOUGHT (if known)		

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 23

<b>13 C / OH NAME</b> Kocurek, Julie H. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00041208
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	
	<input type="checkbox"/> SPECIFIC		
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	19,212.56
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	64,559.68
<b>OUTSTANDING LOAN TOTALS</b>	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 Julie H. Kocurek  
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****FORM JC/OH  
COVER SHEET PG 3**

3 of 23

<b>18 FILER NAME</b> Kocurek, Julie H. (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00041208
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>	
<b>NAME OF SCHEDULE</b>			
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	\$	10,433.81
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	\$	8,778.75
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 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	\$	

# PLEGGED CONTRIBUTIONS (JUDICIAL)

## SCHEDULE B(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule B(J): Sch: 1/1 Rpt: 4/23	
<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00041208	
<b>4</b> TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
<b>5</b> Date	<b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>8</b> Amount of pledge (\$)	<b>9</b> In-kind description (If applicable)
	<b>7</b> Pledgor Address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Pledgor's principal occupation		<b>11</b> Pledgor's job title	
<b>12</b> Pledgor's employer/law firm		<b>13</b> Law firm of pledgor's spouse (if any)	
<b>14</b> If pledgor is a child, law firm of parent(s) (if any)			

# LOANS (JUDICIAL)

# SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/1 Rpt: 5/23
<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00041208
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Lender's Principal Occupation		<b>13</b> Lender's Job Title
<b>14</b> Lender's Employer/Law Firm		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION <input type="checkbox"/> not applicable	<b>20</b> Name of guarantor	<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is 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.

<b>1</b> Total pages Schedule F1: Sch: 1/9 Rpt: 6/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
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<b>4</b> Date 11/13/2024	<b>5</b> Payee name AFL-CIO
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</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 Day Event Ad
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2024	Payee name Ascension Seton Foundation
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1345 Philomena St. Ste 400  Austin, TX 78723-9912
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship for Spring Event.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2024	Payee name Chase Credit Card
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Amount (\$) \$224.95	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment to credit card for coffee to Amazon - Coffee for the office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 2/9 Rpt: 7/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
<b>4</b> Date 09/18/2024	<b>5</b> Payee name Chase Credit Card	
<b>6</b> Amount (\$) \$68.35	<b>7</b> Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water for Office from Ready Refresh
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Chase Credit Card	
Amount (\$) \$93.62	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judges' Business lunch from Local Foods
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Chase Credit Card	
Amount (\$) \$21.15	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber Ride for Downtown Red Mass Work Related Event
Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 8/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
<b>4</b> Date 10/03/2024	<b>5</b> Payee name Chase Credit Card	
<b>6</b> Amount (\$) \$24.03	<b>7</b> Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ride for work related Red Mass Downtown Event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2024	Payee name Chase Credit Card	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship for Rehnquist Award Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Chase Credit Card	
Amount (\$) \$66.17	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber Driver to Airport for National Center for State Court Event
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.

<b>1</b>	Total pages Schedule F1: Sch: 4/9 Rpt: 9/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	Date 11/20/2024	<b>5</b>	Payee name Chase Credit Card		
<b>6</b>	Amount (\$) \$46.89	<b>7</b>	Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber Transportation for NCSC trip to receive Rehnquist Award		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/20/2024		Payee name Chase Credit Card		
	Amount (\$) \$29.88		Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transportation for NCSC Rehnquist Award Event		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/19/2024		Payee name Chase Credit Card		
	Amount (\$) \$163.97		Payee address; City; State; Zip Code P.O. Box 6294  Carol Stream, IL 60197-6294		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday Lunch from Via 313 Pizza for Court		
		Complete <u>ONLY</u> 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.

<b>1</b>	Total pages Schedule F1: Sch: 5/9 Rpt: 10/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	Date 09/12/2024	<b>5</b>	Payee name CitiBank Credit Card		
<b>6</b>	Amount (\$) \$2,500.00	<b>7</b>	Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travis County Democratic Ralph Yarborough Dinner Sponsorship		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/18/2024		Payee name CitiBank Credit Card		
	Amount (\$) \$32.00		Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airport parking for Roundtable on Judicial Security		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/18/2024		Payee name CitiBank Credit Card		
	Amount (\$) \$15.63		Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee with NCSC re: judicial security		
		Complete <u>ONLY</u> 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.

<b>1</b>	Total pages Schedule F1: Sch: 6/9 Rpt: 11/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	Date 11/24/2024	<b>5</b>	Payee name CitiBank Credit Card		
<b>6</b>	Amount (\$) \$23.69	<b>7</b>	Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Airport Transportation for receipt of Rehnquist Award		
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/30/2024		Payee name CitiBank Credit Card		
	Amount (\$) \$147.18		Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Water holders for staff and self		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 12/17/2024		Payee name CitiBank Credit Card		
	Amount (\$) \$40.00		Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for retirement party for County elected officials from Travis County Democratic Party		
	Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1: Sch: 7/9 Rpt: 12/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
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<b>4</b> Date 12/17/2024	<b>5</b> Payee name CitiBank Credit Card
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<b>6</b> Amount (\$) \$263.27	<b>7</b> Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday lunch for staff from Le Barbeque
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2024	Payee name CitiBank Credit Card
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Amount (\$) \$17.97	Payee address; City; State; Zip Code PO Box 9001037  Louisville, KY 40290
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Judges meeting holiday potluck
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/07/2024	Payee name HEB
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Amount (\$) \$26.91	Payee address; City; State; Zip Code 2652 Lake Austin Blvd  Austin, TX 78703
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Birthday cake for staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 8/9 Rpt: 13/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
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<b>4</b> Date 11/14/2024	<b>5</b> Payee name HEB
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<b>6</b> Amount (\$) \$16.98	<b>7</b> Payee address; City; State; Zip Code 12021 US 290  Austin, TX 78737
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cake for clerk departure
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/05/2024	Payee name Maudie's
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Amount (\$) \$111.00	Payee address; City; State; Zip Code 2608 W 7th St  Austin, TX 78703
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watching and celebration
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/07/2024	Payee name Randall's
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Amount (\$) \$21.62	Payee address; City; State; Zip Code 2725 Exposition  Austin, TX 78703
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff lunch and birthday supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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.

<b>1</b> Total pages Schedule F1: Sch: 9/9 Rpt: 14/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00041208
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<b>4</b> Date 10/02/2024	<b>5</b> Payee name Taco Shack
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<b>6</b> Amount (\$) \$146.06	<b>7</b> Payee address; City; State; Zip Code 4002 N Lamar  Austin, TX 78756
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast tacos for court participants
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/07/2024	Payee name Tumble 22
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Amount (\$) \$82.49	Payee address; City; State; Zip Code 7211 Burnet Road  Austin, TX 78757
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Birthday lunch for staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 1/6 Rpt: 15/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution Chase Credit Cards		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b>	PAYMENT	(a) Amount Charged \$163.97	(b) Date of Charge 12/19/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Via 313		(b) Payee address; City, State, Zip Code 3016 Guadalupe Austin, TX 78705	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Court Holiday Pizza Lunch from Via 313	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$93.62	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuer Paid 10/03/2024	
<b>7</b>	PAYEE	(a) Payee name Uber Eats		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Judges' Business Lunch from Local Foods	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$21.15	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Uber Driver		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Ride for Downton Work Related Red Mass Event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/6 Rpt: 16/23	<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00041208
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b> PAYMENT	(a) Amount Charged \$24.03	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Uber Driver		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Ride for Work Related Red Mass Downtown Event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
<b>PAYMENT</b>	(a) Amount Charged \$5,000.00	(b) Date of Charge 10/24/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name National Center for State Courts		(b) Payee address; City, State, Zip Code 300 Newport Ave. Williamsburg, VA 23185
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description sponsorship for rehnquist award event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
<b>PAYMENT</b>	(a) Amount Charged \$66.17	(b) Date of Charge 11/24/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Uber Driver		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Transportaion for National Center of State court event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held



# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 3/6 Rpt: 17/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b>	PAYMENT	(a) Amount Charged \$46.89	(b) Date of Charge 11/20/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Uber Driver		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Transportation for National Center for State Courts Event	
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$29.88	(b) Date of Charge 11/20/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Uber Driver		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Travel for National Center for State Courts Reward Recipient	
		(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$224.95	(b) Date of Charge 08/28/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Avenue North Seattle, WA 98109	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Coffee supply for office	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 4/6 Rpt: 18/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution Citibank Credit Cards		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b>	PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 12/10/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Travis County Democratic Party		(b) Payee address; City, State, Zip Code P.O. Box 684263 Austin, TX 78768	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Ticket for Retirement event for elected officials	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 09/12/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Travis County Democratic Party		(b) Payee address; City, State, Zip Code P.O. Box 684263 Austin, TX 78768	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Ralph Yarborough Dinner Sponsorship	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$68.35	(b) Date of Charge 09/18/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Ready Refresh		(b) Payee address; City, State, Zip Code PO Box 856680 Louisville, KY 40285-6680	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for office	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 5/6 Rpt: 19/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b>	PAYMENT	(a) Amount Charged \$263.27	(b) Date of Charge 12/17/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Le Barbeque		(b) Payee address; City, State, Zip Code 204 E Cesar Chavez Austin, TX 78702	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Holiday Lunch for staff	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$17.97	(b) Date of Charge 12/24/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Randall's		(b) Payee address; City, State, Zip Code 2725 Exposition Austin, TX 78703	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for holiday lunch with judges meeting	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$23.69	(b) Date of Charge 11/23/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Curb Mobility		(b) Payee address; City, State, Zip Code 1111 34th Ave Astoria, NY 11106	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Cab to Airport	
(c) <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 6/6 Rpt: 20/23	<b>2</b>	FILER NAME Kocurek, Julie H. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00041208
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 0.00
<b>6</b>	PAYMENT	(a) Amount Charged \$15.63	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Angelita's Casa de Cafe		(b) Payee address; City, State, Zip Code 2200 Boca Chica Blvd Ste. 116 Brownsville, TX 78521	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Coffee with NCSC re: Judicial Security	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$32.00	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Austin Bergstrom Int Airport		(b) Payee address; City, State, Zip Code 3600 Presidential Blvd Austin, TX 78719	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Parking for Judicial Security roundtable	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$147.18	(b) Date of Charge 11/30/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Hydroflask		(b) Payee address; City, State, Zip Code 14135 NE Airport Way Portland , OR 97230	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Water Holders for staff and self	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule T: Sch: 1/3 Rpt: 21/23
<b>2</b> FILER NAME Kocurek, Julie H. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00041208
<b>4</b> Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Chase Credit Card		
<b>5</b> Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
<b>6</b> Dates of Travel  11/20/2024  11/23/2024	<b>7</b> Name of person(s) traveling Kocurek, Juie (Judge)	
	<b>8</b> Departure city or name of departure location Austin TX	
	<b>9</b> Destination city or name of destination location Washington DC	
<b>10</b> Means of transportation Private Automobile	<b>11</b> Purpose of travel (including name of conference, seminar, or other event) Airport Transportation for NCSC Event in DC to Receive Rehnquist Award	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Chase Credit Card		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel  11/20/2024  11/23/2024	Name of person(s) traveling Kocurek, Julie (Judge)	
	Departure city or name of departure location Austin TX	
	Destination city or name of destination location Washington DC	
Means of transportation Private Automobile	Purpose of travel (including name of conference, seminar, or other event) Transportation in DC for NCSC Rehnquist Award	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Chase Credit Card		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel  11/20/2024  11/23/2024	Name of person(s) traveling Kocurek, Julie (Judge)	
	Departure city or name of departure location Austin, TX	
	Destination city or name of destination location Washington DC	
Means of transportation Private Automobile	Purpose of travel (including name of conference, seminar, or other event) Travel to Receive Rehnquist Award from the National Center for State Courts	

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee  
CitiBank Credit Card

5 Contribution / Expenditure reported on:  
 Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC

6 Dates of Travel  11/20/2024  11/23/2024	7 Name of person(s) traveling Kocurek, Julie (Judge)
	8 Departure city or name of departure location Austin, TX
	9 Destination city or name of destination location Washington DC

10 Means of transportation Private Automobile	11 Purpose of travel (including name of conference, seminar, or other event) Receipt of Rehnquist Award from National Center for State Courts
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee  
Curb Mobility

Contribution / Expenditure reported on:  
 Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC

Dates of Travel  11/20/2024  11/23/2024	Name of person(s) traveling Kocurek, Julie (Judge)
	Departure city or name of departure location Austin, TX
	Destination city or name of destination location Washington DC

Means of transportation Private Automobile	Purpose of travel (including name of conference, seminar, or other event) For Receipt of Rehnquist Award from National Center for State Courts
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee  
Uber Driver

Contribution / Expenditure reported on:  
 Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC

Dates of Travel  11/20/2024  11/20/2024	Name of person(s) traveling Kocurek, Julie (Judge)
	Departure city or name of departure location Austin, TX
	Destination city or name of destination location Washington DC

Means of transportation Private Automobile	Purpose of travel (including name of conference, seminar, or other event) National Center for State Courts Rehnquist Award Recipient
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# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee  
Uber Driver

5 Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
 Schedule F4   
 Schedule G   
 Schedule H   
 Schedule COH-UC

6 Dates of Travel

11/20/2024

11/20/2024

7 Name of person(s) traveling

Kocurek, Julie (Judge)

8 Departure city or name of departure location

Washington DC

9 Destination city or name of destination location

Washington DC

10 Means of transportation

Private Automobile

11 Purpose of travel (including name of conference, seminar, or other event)

National Center for State Courts Rehnquist Award

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

Uber Driver

Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
 Schedule F4   
 Schedule G   
 Schedule H   
 Schedule COH-UC

Dates of Travel

11/20/2024

11/23/2024

Name of person(s) traveling

Kocurek, Julie (Judge)

Departure city or name of departure location

Austin TX

Destination city or name of destination location

Washington DC

Means of transportation

Private Automobile

Purpose of travel (including name of conference, seminar, or other event)

National State Courts Rehnquist Award Recipient