

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00038111	2 Total pages filed: 16		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Gina G.	MI 	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/09/2025	
	NICKNAME	LAST Parker	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 5015 Fort Ave Waco, TX 76710		ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	MS / MRS / MR Mrs.		FIRST Shelli L.	MI 	
	NICKNAME	LAST Rosenkranz	SUFFIX		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5015 Fort Avenue Waco, TX 76710 (Residence or Business)				
7 CAMPAIGN TREASURER PHONE	AREA CODE (254)	PHONE NUMBER 722-2334	EXTENSION		
8 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)				
9 PERIOD COVERED	Month Day Year 10/27/2024		THROUGH	Month Day Year 12/31/2024	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Court Of Criminal Appeals, Judge Place Place 7		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 16

13 C / OH NAME Parker, Gina G. (Ms.) **14 Filer ID** (Ethics Commission Filers)
00038111

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

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	Patriot Mobile Action
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS 401 N Carroll Ave, Suite 425 Southlake, TX 76092
	COMMITTEE CAMPAIGN TREASURER NAME Martin, Steven
	COMMITTEE CAMPAIGN TREASURER ADDRESS 401 N Carroll Ave, Suite 425 Southlake, TX 76092

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,475.65
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,810.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	51,966.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

Ms. Gina G. Parker

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Parker, Gina G. (Ms.)		19 Filer ID 00038111	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	2,060.73
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	1,414.92
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,810.59
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	6.60

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/2 Rpt: 4/16
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bachus, Sheron (Ms.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Temple, TX 76502		
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamness, Rodney (Mr.)	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Waco, TX 76712		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Pakis, Giotes, Page, & Burseson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Citrano, Sammy (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Woodway, TX 76712		
Contributor's Principal Occupation Businessman		Contributor's Job Title Businessman
Contributor's employer/law firm George's Restaurant		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/16
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasheen, David (Mr.)	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code Lubbock, TX 79410		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Glasheen, Valles & Inderman		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Donnell, Mike (Mr.)	Amount of Contribution (\$) \$10.73
Contributor address; City; State; Zip Code San Antonio, TX 78250		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tetens, Josh (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Waco, TX 76712		
Contributor's Principal Occupation District Attorney		Contributor's Job Title District Attorney
Contributor's employer/law firm McLennan County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/5 Rpt: 6/16	
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Lauren Nicole (Ms.)	8 Amount of contribution (\$) \$68.00	9 In-kind contribution description Food for General Election Watch Party
	7 Contributor address; City; State; Zip Code Waxahachie, TX 75165		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Podcast Host		13 Contributor's job title (FOR JUDICIAL) (See instructions) Podcast Host	
14 Contributor's employer/law firm (FOR JUDICIAL) God Links		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)			
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coonrod, Heather (Mrs.)	Amount of contribution (\$) \$35.00	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Hewitt, TX 76643		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Advocate		Contributor's job title (FOR JUDICIAL) (See instructions) Advocate	
Contributor's employer/law firm (FOR JUDICIAL) Out of the Box		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Sharon (Mrs.)	Amount of contribution (\$) \$26.00	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Waco, TX 76712		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Retired		Contributor's job title (FOR JUDICIAL) (See instructions) Retired	
Contributor's employer/law firm (FOR JUDICIAL) Retired		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/5 Rpt: 7/16	
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/29/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Brittney (Miss)	8 Amount of contribution (\$) \$25.71	9 In-kind contribution description Food for General Election Watch Party
	7 Contributor address; City; State; Zip Code Waco, TX 76708	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Manager		13 Contributor's job title (FOR JUDICIAL) (See instructions) Manager	
14 Contributor's employer/law firm (FOR JUDICIAL) Dental Creations, Ltd		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)			
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Brittney (Miss)	Amount of contribution (\$) \$17.00	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Waco, TX 76708	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Manager		Contributor's job title (FOR JUDICIAL) (See instructions) Manager	
Contributor's employer/law firm (FOR JUDICIAL) Dental Creations, Ltd		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, David (Mr.)	Amount of contribution (\$) \$25.00	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Waco, TX 76708	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Production		Contributor's job title (FOR JUDICIAL) (See instructions) Production	
Contributor's employer/law firm (FOR JUDICIAL) Dental Creations, Ltd		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/5 Rpt: 8/16	
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Kevin (Mr.)	8 Amount of contribution (\$) \$4.10	9 In-kind contribution description Food for General Election Watch Party
	7 Contributor address; City; State; Zip Code Waco, TX 76708	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Manager		13 Contributor's job title (FOR JUDICIAL) (See instructions) Manager	
14 Contributor's employer/law firm (FOR JUDICIAL) Dental Creations, Ltd		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)			
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarmon, Kay (Mrs.)	Amount of contribution (\$) \$11.00	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Salado, TX 76571	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Retired		Contributor's job title (FOR JUDICIAL) (See instructions) Retired	
Contributor's employer/law firm (FOR JUDICIAL) Retired		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattlage, Darlene (Mrs.)	Amount of contribution (\$) \$24.11	In-kind contribution description Food for General Election Watch Party
	Contributor address; City; State; Zip Code Belton, TX 76513	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Retired		Contributor's job title (FOR JUDICIAL) (See instructions) Retired	
Contributor's employer/law firm (FOR JUDICIAL) Retired		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 4/5 Rpt: 9/16	
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nobles, Darlene (Mrs.)	8 Amount of contribution (\$) \$18.00	9 In-kind contribution description Food for General Election Watch Party
	7 Contributor address; City; State; Zip Code Waco, TX 76708		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Businesswoman		13 Contributor's job title (FOR JUDICIAL) (See instructions) Businesswoman	
14 Contributor's employer/law firm (FOR JUDICIAL) Sign of the Times		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)			
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Gina (Mrs.)	Amount of contribution (\$) \$500.00	In-kind contribution description Rent for the month of November
	Contributor address; City; State; Zip Code Waco, TX 76712		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Attorney		Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
Contributor's employer/law firm (FOR JUDICIAL) Gina Parker, Attorney at Law		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Gina (Mrs.)	Amount of contribution (\$) \$500.00	In-kind contribution description Rent for the month of December
	Contributor address; City; State; Zip Code Waco, TX 76712		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Attorney		Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
Contributor's employer/law firm (FOR JUDICIAL) Gina Parker, Attorney at Law		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 5/5 Rpt: 10/16	
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenkranz, Shelli (Mrs.)	8 Amount of contribution (\$) \$161.00	9 In-kind contribution description Food for General Election Watch Party
	7 Contributor address; City; State; Zip Code Waco, TX 76708	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Admin Assistant		13 Contributor's job title (FOR JUDICIAL) (See instructions) Admin Assistant	
14 Contributor's employer/law firm (FOR JUDICIAL) Dental Creations, Ltd		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
Credit Card Payment

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 11/16	2 FILER NAME Parker, Gina G. (Ms.)	3 Filer ID (Ethics Commission Filers) 00038111
4 Date 11/15/2024	5 Payee name Anedot	
6 Amount (\$) \$5.03	7 Payee address; City; State; Zip Code 1920 McKinney Ave, 7th Fl Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution online fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Cansino, Jane (Ms.)	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 7008-61st St. Lubbock, TX 79407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Capital One - Venture	
Amount (\$) \$61.52	Payee address; City; State; Zip Code PO Box 71087 Charlotte, NC 28272	
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 Election Night Watch Party
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 12/16	2 FILER NAME Parker, Gina G. (Ms.)	3 Filer ID (Ethics Commission Filers) 00038111
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4 Date 12/05/2024	5 Payee name Davidson, Donna Garcia (Mrs.)
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6 Amount (\$) \$360.00	7 Payee address; City; State; Zip Code P.O. Box 12131 Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Consulting Fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/30/2024	Payee name FedEx
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Amount (\$) \$12.57	Payee address; City; State; Zip Code P.O. Box 371741 Pittsburgh, PA 15250
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Shipping for Candidate push cards to volunteer.
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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 10/28/2024	Payee name H.E.B. Gas
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Amount (\$) \$22.47	Payee address; City; State; Zip Code 9100 Woodway Dr Waco, TX 76712
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TFRW Tribute to Women
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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.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 13/16	2 FILER NAME Parker, Gina G. (Ms.)	3 Filer ID (Ethics Commission Filers) 00038111
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4 Date 10/29/2024	5 Payee name Kingwood TEA Party
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2261 Northpark Dr. #109 Kingwood, TX 77327
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate advertising expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/25/2024	Payee name McLennan County Republican Women PAC
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Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 7291 Waco, TX 76710
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense McLennan County 2025 Patron Dues
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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 11/20/2024	Payee name Rosenkranz, Shelli (Mrs.)
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Amount (\$) \$320.00	Payee address; City; State; Zip Code 213 Gail Dr Waco, TX 76708
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Contract Labor
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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.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 14/16	2 FILER NAME Parker, Gina G. (Ms.)	3 Filer ID (Ethics Commission Filers) 00038111
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4 Date 12/05/2024	5 Payee name Rosenkranz, Shelli (Mrs.)
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6 Amount (\$) \$440.00	7 Payee address; City; State; Zip Code 213 Gail Dr Waco, TX 76708
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Contract Labor
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/31/2024	Payee name Rosenkranz, Shelli (Mrs.)
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Amount (\$) \$460.00	Payee address; City; State; Zip Code 213 Gail Dr Waco, TX 76708
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Contract Labor
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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 12/19/2024	Payee name Rosenkranz, Shelli (Mrs.)
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Amount (\$) \$660.00	Payee address; City; State; Zip Code 213 Gail Dr Waco, TX 76708
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Contract Labor
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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.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 15/16	2 FILER NAME Parker, Gina G. (Ms.)	3 Filer ID (Ethics Commission Filers) 00038111
4 Date 12/05/2024	5 Payee name United States Postal Service	
6 Amount (\$) \$219.00	7 Payee address; City; State; Zip Code 430 W State Highway 6 Waco, TX 76702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Stamps for Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 16/16
2 FILER NAME Parker, Gina G. (Ms.)		3 Filer ID (Ethics Commission Filers) 00038111
4 Date 10/31/2024	5 Name of person from whom amount is received Independent Financial	8 Amount (\$) \$2.14
6 Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070		
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest Earned on Checking Account		
Date 12/31/2024	Name of person from whom amount is received Independent Financial	Amount (\$) \$2.26
Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070		
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest Earned on Checking Account		
Date 11/30/2024	Name of person from whom amount is received Independent Financial	Amount (\$) \$2.20
Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75070		
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest Earned on Checking Account		