#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082014 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Robbie S. NAME Date Received **ELECTRONICALLY FILED** 01/07/2025 NICKNAME LAST **SUFFIX** Partida-Kipness CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 4435 Mill Run Rd. MAILING Amount Receipt # **ADDRESS** Dallas, TX 75244 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Robbie S. NAME NICKNAME LAST **SUFFIX** Partida-Kipness STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 4435 Mill Run Rd **ADDRESS** (Residence or Business) Dallas, TX 75244 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 405-6480 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 10/27/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

**GO TO PAGE 2** 

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 25

13 C / OH NAME	Partida-Kipness, Rob	bie S. (The Honorable)	<b>14</b> Filer ID 00082014	(Ethics Commission File		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. These expenditures may have been made without the candidate's or office consent. Candidates and officeholders are required to report this information only if they receive not					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASUL	RER NAME			
		COMMITTEE CAMPAIGN TREASU	RER ADDRESS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS( ES OF LOANS, OR CONTRIBUTION		<b>\$</b> 0		
		CAL CONTRIBUTIONS		<b>\$</b> 100		
EXPENDITURE	,	PLEDGES, LOANS, OR GUARANTE ZED POLITICAL EXPENDITURES	ES OF LOANS)	<b>.</b>		
TOTALS				\$ 0		
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 23,356		
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED A RIOD	AS OF THE LAST DAY OF THE	<b>\$</b> 49,526		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING PERIOD	G LOANS AS OF THE LAST DAY	\$ 0		
17 AFFIDAVIT		l swear, or affirm,	under penalty of perjury, that the ac	ccompanying report is		
		true and correct a under Title 15, Ele	and includes all information required	to be reported by me		
		Thi	e Honorable Robbie S. Partida-	Kinness		
			Signature of Candidate or Officeho			
AFFIX NOT	TARY STAMP / SEAL ABO	DVE				
Sworn to and subso	cribed before me, by the s	aid	, this the	day		
of	, 20, to ce	ertify which, witness my hand and sea	I of office.			
Signature of office	cer administering oath	Printed name of officer administ	tering oath Title of office	er administering oath		
g 5 5. 61116		5. 5. 5 3 3	3. 5. 6. 1000	g out.		

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

### FORM JC/OH COVER SHEET PG 3

			C	OVER SH	3 of 25
	_ER NAI artida-K	(Ethics Com	mission Filers)		
		E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	100.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	23,356.37
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	114.71

	MONET	SCHEDULE A(J)1			
	The Instru	Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/25			
2	FILER NAME			1	Filer ID (Ethics Commission Filers)
_		ess, Robbie S. (The Honorable)			00082014
4	Date 11/02/2024	5 Full name of contributor out-of-state PAC (ID#:_ Willis, Eric	)	' '	Amount of Contribution (\$) \$100.00
	11/02/2024	<u> </u>			\$100.00
		6 Contributor address; City; State; Zip Code			
		Austin, TX 78723			
	Contributorio		9 Contributor's Job Title		
ŏ	Engineer	Principal Occupation	9 Contributor's Job Title Engineer		
10		omalo, or/low firm		201100	(it only)
10	Linde PLC	employer/law firm	11 Law firm of contributor's sp	Jouse	e (ii ariy)
10		a abild law firm of respect(a) (if any)			
12	ii contributor i	s a child, law firm of parent(s) (if any)			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1: Sch: 1/20 Rpt: 5/25	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082014
4	Date	5 Payee name
Ī	12/09/2024	Alto Trip
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.39	3326 W Mockingbird Ln
		Dallas, TX 75235
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Travel in district
		Traver in district
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experioration benefit C/Oi	
	Date	Payee name
	12/02/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.46	1625 Hutton Dr
	Ψ32.40	1023 Hullott Di
		Carrollton, TX 75006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		iPad pro case
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/05/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	` ,	
	\$82.25	1625 Hutton Dr
		Carrollton, TX 75006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		iPad pro case
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/20 Rpt: 6/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/09/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.98	1625 Hutton Dr
		Carrollton, TX 75006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Packing tape
		i dening tape
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	12/26/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	1625 Hutton Dr
	Ψ13.00	1023 Hullon Di
		Correllton TV 75006
	5,155,055	Carrollton, TX 75006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Cift/Awards/Memorials Expanse  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gift card for staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/29/2024	Balloonish LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$370.82	2807 Allen St
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Decorations for election night watch party
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

### SCHEDULE F1

Advertising Expense Event Exp
Accounting/Banking Fees
Consulting Expense Food/Bev
Contributions/ Donations Made By - Gift/Award
Candidate/Officeholder/Political Committee Legal Ser

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 3/20 Rpt: 7/25	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082014
4	Date 11/05/2024	5 Payee name Balloonish LLC
6	Amount (\$) \$370.81	7 Payee address; City; State; Zip Code 2807 Allen St  Dallas, TX 75204
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Decorations for election night watch party
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/31/2024	Payee name Bank of Texas
	Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 28775  Dallas, TX 75229
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Bank service charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/29/2024	Payee name Bank of Texas
	Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 28775
		Dallas, TX 75229
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Bank Service charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	$\dashv$
	Sch: 4/20 Rpt: 8/25	Partida-Kipness, Robbie S. (The Honorable)  00082014	
4	Date	5 Payee name	
	12/19/2024	Bank of Texas	
6	Amount (\$)	7 Payee address; City; State; Zip Code	٦
	\$3.30	PO Box 28775	
		Dallas, TX 75229	
8	PURPOSE	(a) O-1	4
	OF	Fees (See Categories listed at the top of this schedule)  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Bank service charge	
L			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	٦
	12/31/2024	Bank of Texas	
	Amount (\$)	Payee address; City; State; Zip Code	╛
	\$2.00	PO Box 28775	
		dallas, TX 75229	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the poly outside of Taylor Complete Schedule T	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Bank service charge	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	$\dashv$
	expenditure to benefit C/OI	1	
	Date	Payee name	╡
	11/04/2024	Blanco Caf	
	Amount (\$)	Payee address; City; State; Zip Code	$\dashv$
	\$82.36	1720 Blanco Rd	
		San Antonio, TX 78212	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Meal during trip to San Antonio for Distinguished	
		Alumni Award event	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	$\dashv$
	expenditure to benefit C/OI		
			$\dashv$

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/20 Rpt: 9/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/18/2024	Bob's Steak & Chop House
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$281.66	555 S Lamar
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Meal with colleague
		Wied With Colleague
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	12/05/2024	Brown, Eric
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	2211 E Division St
		Arlington, TX 76011
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office moving expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/30/2024	Burke, Kyle
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1321 Coastal Dr
	Ψ200.00	
		Garland, TX 75043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Christmas bonus for chambers staff attorney
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to belieff C/Of	·

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┢	Total manage Calcadala 54	
1	Total pages Schedule F1: Sch: 6/20 Rpt: 10/25	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00082014
4	Date	5 Payee name
	12/31/2024	Cantrell, Denice
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	915 Desco Lane #6113
		Grand Prairie, TX 75051
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Christmas bonus for court clerk
_	Operation Children	Overfildsty/Office helder space
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/27/2024	Central Market
	Amount (\$)	Payee address; City; State; Zip Code
	\$177.92	4349 NW Hwy
		Dallas, TX 75220
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Holiday treats for court
		Floriday troats for court
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- CAPOTICITO TO BOTTOTIC GAOT	
	Date	Payee name
	11/01/2024	Clementine Neighborhood Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$215.70	2195 NW Military Hwy
		San Antonio, TX 78213
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Meal during trip to San Antonio for Distinguished
		Alumni Award event
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment		The Instruction Guide explains how to c	ompl	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 7/20 Rpt: 11/25		Partida-Kipness, Robbie S. (The Honorable)		00082014
4	Date	5	Payee name		-
	12/02/2024		DL Mack's		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$54.38		10720 Preston Rd		
			Dallas, TX 75230		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE		Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense  Meal with constituent
					Medi With Constituent
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	uaht	Office held
	expenditure to benefit C/O		Candidate/Officeriolder flame	ugiit	Office field
	Date	_	Davies name		
	12/30/2024		Payee name Dallas Bar Association		
	Amount (\$)	┝	Payee address; City; State; Zip C	odo	
	\$435.00		2101 Ross Avenue	oue	
	Ψ+33.00		ZIOI NOSS AVEITUE		
			Dallas, TX 75201		
	PURPOSE	(0)	10.	(h)	A Description
	OF	الم	Category (See Categories listed at the top of this schedule)	(6)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		rees		Check if Austin, TX, officeholder living expense
					Membership dues
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/Ol	П			
	Date		Payee name		
	11/05/2024		Dallas LGBTQ Bar Association		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$514.95		1717 Main St Ste 4200		
			Dallas, TX 75201		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE				Check if Austin, TX, officeholder living expense
					Advertising sponsorship of event
	Complete ONLY if direct	Ц	Candidate/Officeholder name Office so	liapt	Office held
	expenditure to benefit C/O		Candidate/Officeriolider name Office St	ugnt	Onice field

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/20 Rpt: 12/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	10/28/2024	Democracy Toolbox
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	PO Box 6250
		McKinney, TX 75071
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign communications
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/14/2024	Democracy Toolbox
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	PO Box 6250
		McKinney, TX 75071
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign communications
		Campaigh Communications
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	12/31/2024	DonorBox
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.95	1520 Belle View Blvd #4106
		Alexandria, VA 22307
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fee for online donation during the reporting period
		ree for offilline doffation during the reporting period
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Fees Consulting Expense

Candidate/Officeholder/Political Committee

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/20 Rpt: 13/25 Partida-Kipness, Robbie S. (The Honorable) 00082014 4 Date Payee name 11/12/2024 Dr Delphinium 6 Amount (\$) Payee address; State; Zip Code \$183.97 5806 W Lovers Ln Dallas, TX 75225 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift for colleague Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/08/2024 Edwards & Patterson Signs Amount (\$) Payee address; City; State; Zip Code \$607.41 203 SBeltline Rd Dallas, TX 75060 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign yard signs Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/02/2024 Extra Space Storage Amount (\$) Payee address: City; State; Zip Code \$2,786.64 12190 Inwood Rd Dallas, TX 75244 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage facility rent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/20 Rpt: 14/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/06/2024	Hudson House
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$105.97	11700 Preston Rd #880
		dallas, TX 75230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meal with constituent
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/05/2024	Lewis, Jermain
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	2211 E Division St
		Arlington, TX 76011
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Office moving expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	12/02/2024	Lowe's Home Centers
	Amount (\$)	Payee address; City; State; Zip Code
	\$330.86	11920 Inwood Rd
		Dallas, TX 75244
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Moving and cleaning supplies
		Moving and dealing supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Loan Services Salaries/Waces/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:								
	Sch: 11/20 Rpt: 15/25								
4	Date	5 Payee name							
	11/01/2024	Lucid Private Offices							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$150.47	6060 N Central Expwy Ste500							
		Dallas, TX 75206							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense							
		Check if Austin, TX, officeholder living expense  Virtual campaign office rent							
		Virtual campaign office rent							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
9	expenditure to benefit C/OI								
	Data								
	Date	Payee name							
	11/29/2024	Lucid Private Offices							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$150.47	6060 N Central Expwy Ste500							
		Dallas, TX 75206							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense  Virtual campaign office rent								
		Viitaai sainpaigii siiise tett							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Payee name							
	12/31/2024	McCoy, Claudia							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$500.00	141 Caroline Lane							
	Ψ500.00	141 Caronic Lanc							
		Wayahashia TV 75167							
		Waxahachie, TX 75167							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense							
		Christmas bonus for deputy court clerk							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								

#### SCHEDULE F1

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

Event Expense Loan Reg Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing E Legal Sayings Salaries/

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 12/20 Rpt: 16/25	Partida-Kipness, Robbie S. (The Honorable) 00082014			
4	Date	5 Payee name			
	11/12/2024	Minted LLC			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$786.27	747 Front Street Ste 200			
		San Francisco, TX 94111			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Holiday greeting cards for campaign			
		Transaction of the second seco			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
	Date	Payee name			
	12/24/2024	Mrs Field's Gifts			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$73.83	1717 S 4800 W			
		Salt Lake City, UT 84104			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Gift/Awards/Memorials Expense			
Check if Austin, TX, officeholder living expense					
		Holiday gifts for constituents			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	<b>y</b>			
	Date	Payee name			
	12/26/2024	Nava, Celeste			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$200.00	1919 Jackson St Apt #1512			
	¥-20000				
		Dallas, TX 75201			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Social media graphics			
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held			

### 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/20 Rpt: 17/25	Partida-Kipness, Robbie S. (The Honorable)	00082014
4	Date	5 Payee name	
	12/31/2024	Nunn, Rebecca	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	434 Sorrel Lane	
		Red Oak, TX 75154	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	elit/ Wards/Wellionals Expense	avel outside of Texas. Complete Schedule T.
			istin, TX, officeholder living expense bonus for court clerk
		Cilistinas	bolius for court cierk
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		C66 N.S.6
_	Date	Payee name	
	12/30/2024	Ocean Prime	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$286.79	2101 Cedar Springs Rd	
	,		
		Dallas, TX 75201	
	PURPOSE		
	OF		evel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Au	ıstin, TX, officeholder living expense
		Meal with	colleagues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit Gree	·	
	Date	Payee name	
	12/30/2024	Parking	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.50	2101 Cedar Springs Rd	
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		ivel outside of Texas. Complete Schedule T. istin, TX, officeholder living expense
			pense during meal with colleagues
			period daring med mar concagace
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
1			

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/20 Rpt: 18/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/09/2024	Professional Services & Education
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	12222 Merit Drive 1200
		Dallas, TX 75251
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Mediation training
		and the same of th
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/08/2024	Seabourn Fabrication
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	1945 N Broadway Street
		Carrollton, TX 75006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Furniture repair
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Dove nome
	11/06/2024	Payee name Sherman, Bryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	133 N Riverfront Blvd #31
		Dallas, TX 75207
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Election night watch party security
		Election riight water party security
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 15/20 Rpt: 19/25	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082014
4	Date 12/19/2024	5 Payee name ShopKlix LTD
6	Amount (\$) \$109.99	7 Payee address; City; State; Zip Code 3051 Research Dr Richardson, TX 75082
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 11/04/2024	Payee name Southwest Airlines
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 2702 Love Field Drive  Dallas, TX 75235
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Airfare for travel to Distinguished Alumni Award event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/12/2024	Payee name Spa Habitat
	Amount (\$) \$319.20	Payee address; City; State; Zip Code 7300 Lone Star Dr C110
		Plano, TX 75024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gift for colleague
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/20 Rpt: 20/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/20/2024	Spec's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$138.96	15055 Inwood Rd
		Dallas, TX 75244
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Holiday gifts for constituents
		Floriday girls for constituents
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
$\vdash$	Date	Dougo nama
	12/31/2024	Payee name State of TV Fifth Court of Appeals
		State of TX Fifth Court of Appeals
	Amount (\$)	Payee address; City; State; Zip Code
	\$283.00	600 Commerce Ste 200
		Dallas, TX 75206
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Purchase of used iPad
		Fulctiase of used if ad
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Douge name
	12/31/2024	Payee name State of TX Fifth Court of Appeals
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	600 Commerce Ste 200
		Dallas, TX 75206
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Purchase of used furniture
		Taronaco or acca farmaro
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/20 Rpt: 21/25	Partida-Kipness, Robbie S. (The Honorable) 00082014
4	Date	5 Payee name
	12/31/2024	Swanson, Tami
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	11340 Lanewood Circle
		Dallas, TX 75218
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Christmas bonus for court clerk
		Chilisanas sonas for court cicix
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Dete	
	Date	Payee name
	12/16/2024	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$550.00	8335 Westchester Drive Ste 200
		Dallas, TX 75225
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Thank you giftcards
		Thank you gilloards
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	_	
	Date	Payee name
	12/30/2024	Texas Bar Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	515 Congress Avenue Ste 1755
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Sustaining Life Fellow membership fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 18/20 Rpt: 22/25	2 FILER NAME Partida-Kipness, Robbie S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082014
4	Date 11/12/2024	5 Payee name Texas Center for the Judiciary
6	Amount (\$) \$65.00	7 Payee address; City; State; Zip Code 1210 San Antonio St Ste 800
8	PURPOSE OF EXPENDITURE	Austin, TX 78701  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2025 Bench Book
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/04/2024	Payee name The Standard
	Amount (\$) \$303.23	Payee address; City; State; Zip Code 2900 McKinney Ave  Dallas, TX 75204
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meal with constituents
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/19/2024	Payee name Thomson Reuters West Publishing Corp
	Amount (\$) \$370.22	Payee address; City; State; Zip Code 610 Opperman Drive
		Eagan, MN 55123
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Law books
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 19/20 Rpt: 23/25	Partida-Kipness, Robbie S. (The Honorable) 00082014	
4	Date	5 Payee name	
	12/09/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$45.91	1515 3rd St	
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Travel in district	
_	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold	_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			=
	Date	Payee name	
	12/09/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.18	1515 3rd St	
		San Francisco, CA 94158	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Travel in district	
		Traver in district	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
	Date	Payee name	=
	11/21/2024	United States Postal Service	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$146.00	5959 Royal Lane #539	
	Ψ1-10.00	5555 Noyal Earle #555	
		Dallas, TX 75230	
	DUDDOOF	1	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Postage for holiday cards	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
			_

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services  The Instruction Guide explai		ages/Contra			OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 20/20 Rpt: 24/25							00082014	
4	Date	<b>5</b> Payee name							
	11/18/2024	WH Hostess Stationery							
	Amount (\$) \$110.95	7 Payee addres 518 Princeto Deerfield, IL	on Ln	ate; Zip Cod					
8	PURPOSE OF EXPENDITURE	Office Overhead/Pental Evanage							
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offic	ceholder name	Office soug	ht			Office he	eld
	Date	Payee name							
	11/04/2024		Antonio North						
	Amount (\$)	Payee addres	s; City; Sta	ate; Zip Cod	le				
	\$415.62	9821 Colonr	nade Boulevard						
		San Antonio							
	PURPOSE OF		e Categories listed at the top of this	s schedule)	b) Desc				
	EXPENDITURE	Travel Out o	f District					le of Texas. Comp	
								officeholder living	d Alumn Award event
					Loug	jing dunin	ıy D	/istiriguisriet	a Alumin Award event
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Offic	ceholder name	Office soug	ht			Office he	eld

### INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 25/25 2 FILER NAME Filer ID (Ethics Commission Filers) Partida-Kipness, Robbie S. (The Honorable) 00082014 8 Amount (\$) 5 Name of person from whom amount is received 12/03/2024 Amazon.com \$32.46 6 Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98109 Purpose for which amount is received Check if political contribution returned to filer Refund for returned item Amount (\$) Name of person from whom amount is received Date 12/09/2024 \$82.25 Amazon.com Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98109 Purpose for which amount is received Check if political contribution returned to filer Refund for returned item