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) 00081906 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Joshua T. NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Burgess CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 101931 MAILING Amount Receipt # **ADDRESS** Change of Address Fort Worth, TX 76185 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Ralph H NAME NICKNAME LAST **SUFFIX** Duggins **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 4209 Ridgehaven Ct. **ADDRESS** (Residence or Business) Fort Worth, TX 76116 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (303) 656-6869 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 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** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 352 District Judge District 352

GO TO PAGE 2 www.ethics.state.tx.us

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Burgess, Joshua T.	(The Honorable)		14 Filer ID 00081906	(Ethics Comn	nission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures ma	cepted or political expenditu y have been made without to ired to report this information	he candidate's or offic	eholder's kno	wledge or				
Additional Pages	COMMITTEE TYPE									
—	GENERAL									
		COMMITTEE ADDRES	SS							
	SPECIFIC									
		COMMITTEE CAMPA	IGN TREASURER NAME							
		COMMITTEE CAMPA	IGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS			FRIBUTIONS(OTHER THAN NTRIBUTIONS MADE ELEC		\$	0.00				
		ICAL CONTRIBUTION PLEDGES, LOANS, OF	DNS R GUARANTEES OF LOANS	6)	\$	250.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPE	NDITURES		\$	0.00				
	4. TOTAL POLIT	ICAL EXPENDITURI	ES		\$	2,750.76				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE LA	AST DAY OF THE	\$	23,283.42				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		DUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT										
		true	vear, or affirm, under penalty e and correct and includes al ler Title 15, Election Code.							
			The Honora	able Joshua T. Burç	gess					
			Signature of	Candidate or Officeho	older					
AFFIX NO	TARY STAMP / SEAL AB	OVE								
Sworn to and subso	cribed before me, by the s	aid		, this the		_ day				
of	, 20, to co	ertify which, witness my	hand and seal of office.							
Signature of office	er administering oath	Printed name of o	officer administering oath	Title of office	er administerin	g oath				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 11
l	ER NAN		19 Filer ID	(Ethics Commission Filers)
		Joshua T. (The Honorable) E SUBTOTALS	00081906	1
	ME OF	SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 250.00
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 CONTRIBUTION	S	\$ 1,473.03
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.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,277.73
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONETARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A(J)1
	The Instruction Guide explains how to complete	1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/11	
2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Burgess, Joshua T. (The Honorable)		00081906
4	Date 5 Full name of contributor out-of-state PAG	.C (ID#:)	7 Amount of Contribution (\$)
	10/24/2024 Queenan, M. Kevin		\$250.00
	6 Contributor address; City; State; Zip Code		
	Arlington, TX 76015		
8	Contributor's Principal Occupation	9 Contributor's Job Title	
	Attorney	Attorney	
10	Contributor's employer/law firm	spouse (if any)	
	Queenan Law		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/4 Rpt: 5/11	Burgess, Joshua T. (The Honorable) 00081906
4	Date	5 Payee name
	10/24/2024	Anedot, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.30	1340 Poydras St., Ste. 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Merchant Fee
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/06/2024	Burgess, Josh (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$390.00	PO Box 101931
		Fort Worth, TX 76185
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Reimbursement for Schedule G Expenses
		Reinbursement for Schedule & Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Daniel and a second
	Date 08/27/2024	Payee name Purgoss, Josh (The Henerable)
		Burgess, Josh (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.56	PO Box 101931
		Fort Worth, TX 76185
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for Schedule G Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

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)

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 6/11	Burgess, Joshua T. (The Honorable)	00081906
4	Date	Payee name	•
	09/13/2024	Burgess, Josh (The Honorable)	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$46.97	PO Box 101931	
		Fort Worth, TX 76185	
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) D	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense Reimbursement for Schedule G Expenses
		· · ·	terribureement for Confedence C Expenses
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	10/02/2024	Burgess, Josh (The Honorable)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	PO Box 101931	
		Fort Worth, TX 76185	
	PURPOSE		Description
	OF EXPENDITURE	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	[Check if Austin, TX, officeholder living expense
		K	Reimbursement for Schedule G Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Outraidate/Officeriolaer Harrie Office Sought	Onide field
	Date	Payee name	
	10/31/2024	Burgess, Josh (The Honorable)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$65.13	PO Box 101931	
		Fort Worth, TX 76185	
	PURPOSE		Description
	OF	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		R	Reimbursement for Schedule G Expenses
			-
	Complete ONLY if direct expenditure to benefit C/Ol	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 Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica			Gitt/Awards/Memor Legal Services	iais Expense	Salaries/\		se s/Contract Labor		OTHER (enter	a category not listed ab	ove)
	Credit Card Payment			The Instruction	Guide expl	lains how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 3/4 Rpt: 7/11		Burgess, Jos	shua T. (The	Honorab	ole)				00081906		
4	Date	5	Payee name						_			
	12/09/2024		Burgess, Jos	sh (The Hond	orable)							
6	Amount (\$)	7	Payee addres	s; City;	5	State; Zip Co	ode					
	\$134.93		PO Box 101	931								
			Fort Worth,	TX 76185								
8	PURPOSE	(a)	Category (Se	o Catogorios listod	at the ten of th	ais schodulo)	(b)	Description				
	OF			ment/Reimbi		iis scriedule)	\ `´		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		. ,					_		officeholder livir		
								Reimburseme	ent	for Schedu	ile G Expenses	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name		Office sou	ıght			Office h	neld	
		_										
	Date		Payee name									
	12/09/2024		Burgess, Jo	sh (The Hond	orable)							
	Amount (\$)	l	Payee addres	. , , ,	5	State; Zip Co	ode					
	\$292.01		PO Box 101	931								
			Fort Worth,	TX 76185								
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of th	nis schedule)	(b)	Description				
	OF EXPENDITURE		Loan Repay	ment/Reimbu	ursement					de of Texas. Co officeholder livir	mplete Schedule T.	
								ш			ile G Expenses	
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	<u>I</u> ıght			Office h	neld	
	expenditure to benefit C/OI	Н					_					
_	Date		Payee name									
	12/12/2024		•	sh (The Hono	orable)							
	Amount (\$)		Payee addres			State; Zip Co	ode					
	\$107.13	ı	PO Box 101	-		, ,						
			Fort Worth,	TX 76185								
	PURPOSE	. .	Category (Se		at the top of th	sio oabadula)	(b)	Description				
	OF		•	ment/Reimbi	-	iis scriedule)	(~)		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE									officeholder livir		
								Reimburseme	ent	for Schedu	ıle G Expenses	
							<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name		Office sou	ıght			Office h	neld	
	poa.taro to boriont 0/01											

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committe	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	ense Print Sala	ng Expense ing Expense ries/Wages/Co o complete		Travel	in District Out of Dis R (enter a	trict category not listed above)
1	Total pages Schedule F1:	l					3 Filer		(Ethics Commission Filers)
L	Sch: 4/4 Rpt: 8/11		gess, Joshua T. (The Hon	orable)			3000	31906	
4	Date		ee name						
L	11/14/2024		ce Lebanese Grill						
6	Amount (\$)		ee address; City;	State; Zip	Code				
	\$185.00	502	W Randol Mill Rd						
		Arliı	ngton, TX 76011						
8	PURPOSE	(a) Cate	egory (See Categories listed at the to	p of this schedule)	(b) D	escription			
	OF EXPENDITURE	Foo	d/Beverage Expense			Check if travel of Check if Austin,			plete Schedule T.
					C	ourthouse C			
9	Complete ONLY if direct expenditure to benefit C/O		date/Officeholder name	Office	sought		(Office he	eld

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries The Instruction Guide explains how to c	Wages/Contract Labor omplete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 9/11	Burgess, Joshua T. (The Honorable)		00081906
4	Date	5 Payee name		
	08/27/2024	Gloria's		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$41.56	2600 W 7th St #175		
	Reimbursement from			
	X political contributions intended	Fort Worth, TX 76107		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Lunch Meeting	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	09/13/2024	Gloria's		
-	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$46.97	2600 W 7th St #175		
	Reimbursement from			
	political contributions intended	Fort Worth, TX 76107		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Lunch Meeting	
	2			255
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	10/31/2024	Gloria's		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$65.13	2600 W 7th St #175		
	Reimbursement from			
	X political contributions intended	Fort Worth, TX 76107		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
			Office Lunch	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E		Tı Tı	ravel in District ravel Out of District THER (enter a category not	•		
	Credit Card Payment		The Instruction Guide explain	ns how to co	omplete this form.					
1	Total pages Schedule G: Sch: 2/3 Rpt: 10/11	2 FILER NAMI Burgess, Jo	E oshua T. (The Honorable)			iler ID (Ethics Con 0081906	nmission Filers)		
4	Date	5 Payee name		,		1				
-	12/09/2024	Harry & Da								
6	Amount (\$)	7 Payee addre	ess; City; Sta	te; Zip Co	ode					
	\$134.93	Two Jerich	o Plaza, Floor 2							
	Reimbursement from political contributions intended	Jericho, N\	′ 11753							
8	PURPOSE	(a) Category (s	see Categories listed at the top of this s	schedule)	(b) Description	Chec	k if travel outside of Texas.	Complete Schedule T.		
	OF EXPENDITURE	Gift/Awards	s/Memorials Expense			Chec	k if Austin, TX, officeholder	living expense		
	EXPENDITORE				Staff Gifts					
9		L Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH									
	Date	Payee name	:							
	12/09/2024	Pappasitos	Cantina							
	Amount (\$)	Payee address; City; State; Zip Code								
	\$292.01	2704 West	Fwy							
	Reimbursement from									
	X political contributions intended	Fort Worth,	TX 76105							
	PURPOSE	Category (s	see Categories listed at the top of this s	schedule)	Description	Chec	k if travel outside of Texas.	Complete Schedule T.		
	OF EXPENDITURE	Food/Beve	rage Expense		[Chec	k if Austin, TX, officeholder	living expense		
	EXI ENDITORE				Judicial Lunch					
		Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH									
	Date	Dove nome								
	08/06/2024	Payee name	Compliance, LLC							
	Amount (\$)	Payee addre	· ·	te; Zip Co	nde					
	\$390.00	PO Box 34		to, 2.p ot	340					
	Reimbursement from									
	political contributions intended	Austin, TX	78734							
	PURPOSE	Category (S	see Categories listed at the top of this s	schedule)	Description	=	k if travel outside of Texas.	•		
	OF EXPENDITURE	Consulting	Expense		L	_	k if Austin, TX, officeholder	living expense		
					Compliance Con	isultin	g			
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held			
	expenditure to benefit C/OH	Canadato/Onloc			Omoc Sought		Since field			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 3/3 Rpt: 11/11 Burgess, Joshua T. (The Honorable) 00081906 Date Payee name 10/02/2024 **SMU** 6 Amount (\$) Payee address; City; State; Zip Code P.O. Box 750402 \$200.00 Reimbursement from political contributions intended Х Dallas, TX 75275 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE Dinner Ticket** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/12/2024 Sam's Club Amount (\$) Payee address; City; State; Zip Code \$107.13 4400 Bryant Irvin Rd. Reimbursement from political contributions Χ Fort Worth, TX 76132 intended PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Gift/Awards/Memorials Expense **EXPENDITURE** Gifts for Judges Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH