#### 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) 00051444 20 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Michael G. NAME Date Received **ELECTRONICALLY FILED** 01/10/2025 NICKNAME LAST **SUFFIX** Mike Lee CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 4441 Norris St. MAILING Amount Receipt # **ADDRESS** Change of Address Dallas, TX 75214 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael G. NAME NICKNAME LAST **SUFFIX** Mike Lee **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 4441 Norris St. **ADDRESS** (Residence or Business) Dallas, TX 75214 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 725-5401 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit

Month

Month

Day

Day

11/05/2024

OFFICE HELD (if any)

**ELECTION DATE** 

10/27/2024

Year

Year

Court Of Appeals, Justice Place 12 District 5 Dallas

PERIOD

10 ELECTION

11 OFFICE

**COVERED** 

**THROUGH** 

Primary

χ General

Month

**ELECTION TYPE** 

Runoff

Special

Day

12/31/2024

12 OFFICE SOUGHT (if known)

Year

Other

Court Of Appeals, Justice Place 12 District 5

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 20

13 C / OH NAME	Lee, Michael G. (Mr.)		<b>14</b> Filer ID 00051444	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political of these expenditures may have been made officeholders are required to report this in	e without the candidate's or offic	eholder's knowledge or			
X Additional Pages	COMMITTEE TYPE						
	X GENERAL	Dallas Police Officers PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	1412 Griffin Street East					
		Dallas, TX 75215					
		COMMITTEE CAMPAIGN TREASURER	NAME				
		Janse, Kevin					
		COMMITTEE CAMPAIGN TREASURER	ADDRESS				
		1412 Griffin Street East					
		Dallas, TX 75215					
16 CONTRIBUTION TOTALS	•	ZED POLITICAL CONTRIBUTIONS(OTH ES OF LOANS, OR CONTRIBUTIONS MA		\$ 0.00			
		CAL CONTRIBUTIONS		<b>\$</b> 8,250.00			
EXPENDITURE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  XPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES						
TOTALS				\$ 0.00			
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 5,216.55			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS C RIOD	OF THE LAST DAY OF THE	<b>\$</b> 11,244.56			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LO TING PERIOD	DANS AS OF THE LAST DAY	\$ 0.00			
<b>17</b> AFFIDAVIT			er penalty of perjury, that the ac ncludes all information required n Code.				
			Mr. Michael G. Lee				
		Sig	nature of Candidate or Officeho	lder			
AFFIX NO	TARY STAMP / SEAL ABO	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to ce	rtify which, witness my hand and seal of c	office.				
Signature of office	oor administering oath	Drinted name of officer administration	z ooth Title of office	ur administoring oath			
Signature of office	cer administering oath	Printed name of officer administering	g vairi I itie of office	er administering oath			

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

## FORM JC/OH ADDENDUM

Page 3 of 20

				Page 3 01 20
C / OH NAME	Lee, Michael G. (Mr.)		Filer ID 00051444	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL	expenditures may have I	of political expenditures by political committees to s been made without the candidate's or officeholder's d to report this information only if they receive notice	L support the candi s knowledge or c	onsent. Candidates and
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	l	Judicial Fairness PAC		
	X GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	919 Congress Ave.		
	SPECIFIC SPECIFIC	Ste. 455		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Parsley, E. Lee		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		919 Congress Ave.		
		Ste. 455		
		Austin, TX 78701		

## **SUBTOTALS - JC/OH**

# FORM JC/OH COVER SHEET PG 3

			4	l of 20
18 FILER N		<b>19</b> Filer ID	(Ethics Commission Fi	ilers)
	chael G. (Mr.)	00051444	_	
	JLE SUBTOTALS OF SCHEDULE		SUBTOTAL AMO	UNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 8	3,250.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			3,464.99
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 2	2,738.19
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	<b>\$</b> 1	L,060.25
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 1/2 Rpt: 5/20
2	FILER NAME Lee, Michae	l G. (Mr.)		3 Filer ID (Ethics Commission Filers) 00051444
4	Date 11/05/2024			7 Amount of Contribution (\$) \$500.00
Ļ		Dallas, TX 75231	In a contract to	
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	
10	Contributor's e	employer/law firm	spouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  out-of-state PAC (IE	D#: )	Amount of Contribution (\$)
	12/16/2024 Baker Botts Amicus Fund  Contributor address; City; State; Zip Code			\$5,000.00
		Houston, TX 77002		
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Contributor's e	employer/law firm	Law firm of contributor's sp	spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor  ut-of-state PAC (IE	D#:)	Amount of Contribution (\$)
	11/15/2024	Jackson Walker LLP Political Action Committ		\$2,500.00
		Contributor address; City; State; Zip Code  Dallas, TX 75201-2725		
_	Cantuila utaula I		Contributorio Job Titlo	
	Contributors	Principal Occupation	Contributor's Job Title	
	Contributor's 6	employer/law firm	Law firm of contributor's s	spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ection Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 6/20	
2 FILER NAME Lee, Michae			3 Filer ID (Ethics Commission Filers) 00051444
4 Date 11/13/2024			7 Amount of Contribution (\$) \$250.00
	Rockwall, TX 75087-1354		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)	<u> </u>	

## SCHEDULE F1

Advertising Expense Eve Accounting/Banking Fee Consulting Expense Foo Contributions/ Donations Made By - Gift Candidate/Officeholder/Political Committee Leg

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 Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	,
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 7/20	Lee, Michael G. (Mr.)	00051444
4	Date	5 Payee name	•
	11/13/2024	American Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,269.41	P.O. Box 650448	
		Dallas, TX 75265-0448	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Payment of charges for political expenditures
_	Complete ONLY if direct	Condidate/Officeholder name	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/18/2024	American Express	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$463.51	P.O. Box 650448	
		Dallas, TX 75265-0448	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Credit Card Payment	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Payment of charges reflected in report
			r dyment of charges reflected in report
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	10/29/2024	Collin County Republican Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	2963 West 15th St.	
	Ψ200.00	Suite 2961	
		Plano, TX 75075	
	DUDDOCE		
	PURPOSE OF	·	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
			Election watch party sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
_			

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

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 8/20	Lee, Michael G. (Mr.) 00051444
4	Date	5 Payee name
	12/03/2024	Dallas County Council of Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	11617 N. Central Expwy Suite 240
		Dallas, TX 75243
8	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  DCCRW Christmas party registration
		DCCRW Chinstillas party registration
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
۱	expenditure to benefit C/OI	and the second of the second o
F	Date	Payee name
	11/08/2024	Dallas County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$363.95	11617 N. Central Expwy
		Suite 240
		Dallas, TX 75243
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Check if Austin, TX, officeholder living expense
		County party Christmas Party sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	11/25/2024	Republican Party of Rockwall County
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	112 Kenway
		Rockwall, TX 75087-0863
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Sponsorship of county party Christmas party.
		Sponsorship of county party christinas party.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		

## 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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/3 Rpt: 9/20	Lee, Michael G. (Mr.) 00051444
4	Date	5 Payee name
	12/31/2024	Republican Party of Rockwall County
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$259.07	112 Kenway
		Rockwall, TX 75087-0863
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reagan Day dinner sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	11/01/2024	Sheraton McKinney
	Amount (\$)	Payee address; City; State; Zip Code
	\$498.98	1900 Gateway Blvd
		McKinney, TX 75070
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Suite for election watch party
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/20/2024	The Old Iron Post
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.07	101 North Travis St.
		Sherman, TX 75090
	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  Lunch with supporter
		Lunch with Supporter
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4: 2 FILER NAME 3				3 Filer ID (E	3 Filer ID (Ethics Commission Filers)			
	Sch: 1/7 Rpt: 10/20	Lee, Michael G. (M	r.)			00051444		
4	CREDIT CARD ISSUER		ncial institution n Express	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 10/29/2024	(c) Date(s) 11/13/20	Credit Card Issue 24	er Paid		
7	PAYEE	(a) Payee name (b) Payee address; 2963 West 15th St. Suite 2961 Plano, TX 75075		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descrip	otion watch party spor	nsorship		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living e	expense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$498.98	(b) Date of Charge 11/01/2024	(c) Date(s)	Credit Card Issue 24	er Paid		
	PAYEE (a) Payee name  Sheraton McKinney			address; eway Blvd y, TX 75070	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Suite for election watch party				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$275.00	(b) Date of Charge 11/08/2024	(c) Date(s)	Credit Card Issue 24	er Paid		
	PAYEE	(a) Payee name State Bar of Texas		(b) Payee 1414 Col Austin, T	orado St.	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  Political  Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholds	ns Made By er/Political Committee	(b) Descrip Texas Ba	ar College Dues			
_	X Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	o cought	Check if Austin, TX	, officeholder living e	expense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	паше ОПСС	e sought		Office held		
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### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 2/7 Rpt: 11/20	Lee, Michael G. (M	r.)			00051444		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$6.48	(b) Date of Charge 11/09/2024	(c) Date(s) 12/18/20	Credit Card Issuei 24	r Paid		
7	PAYEE	(a) Payee name  JoAnn Fabric and C	Gifts	(b) Payee 6330 Eas Dallas, T	st Mockingbird Ln	City, 1.	State,	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Zipper for judicial robo		(b) Descrip		pair judicial rob	e	
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$24.35	(b) Date of Charge 12/12/2024	(c) Date(s)	Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name 2020 Market Scrato	ch Kitchen &	(b) Payee 1500 Riv Georgeto		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Unreimbursed portion of meal during College for New Judges				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$45.07	(b) Date of Charge 12/20/2024	(c) Date(s)	Credit Card Issuer	r Paid		
	PAYEE	(a) Payee name  The Old Iron Post			address; n Travis St. , TX 75090	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	nse	(b) Descrip Meal with	supporter			
L	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
1								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 3/7 Rpt: 12/20	Lee, Michael G. (M	r.)		00051444				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$75.00	11/07/2024	12/18/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Texas Center for th	ne Judiciary,	1210 San Antonio Suite 800 Austin, TX 78701					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE Political	(See Categories listed at the top Fees	of this schedule)	College for New Judges					
X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$24.81	12/11/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
	Wildfire		812 South Austin Ave.					
	() 2 :		Georgetown, TX 78626					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Unreimbursed portion of meal during College for New					
Political	Food/Beverage Expe	nse	Judges					
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought Office held					
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$259.07	12/31/2024						
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	Damuhliaan Damba	f Danis vall	112 Kenway					
	Republican Party of	T ROCKWAII						
			Rockwall, TX 75087-0863					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Event Expense	or tris scriedule)	Reagan Day Dinner spon	isorship				
X Political								
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought Office held					

### SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

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

	Candidate/Officeholder/Politica	-	ruction Guide explains how	to complete 1		THER (enter a categor	y not listed at	oove)
1	Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	•		3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 4/7 Rpt: 13/20	Lee, Michael G. (Mi	r.)			00051444		•
4	CREDIT CARD ISSUER	Name of finar	ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$15.00	12/03/2024					
7	PAYEE	(a) Payee name  Dallas County Cour	ncil of	(b) Payee 11617 N. Dallas, T.	Central Expwy S	City, Suite 240	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	DCCRW	Christmas party			
	x Political	Event Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	l	Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$23.01	12/04/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Belo Mansion		2101 Ros	ss Ave.			
				Dallas, T	X 75201			
	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	*	Meal duri	ing CLE seminar			
	Political							
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$23.01	12/05/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
l		Role Manaion		2101 Ros	ss Ave.			
		Belo Mansion						
L				Dallas, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
		Food/Beverage Exper	•	Meal duri	ing CLE seminar			
1	Political							
L	X Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Le	xpenditure to benefit C/OH							

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Reimbursement
Rental 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 F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			sion Filers)	
	Sch: 5/7 Rpt: 14/20	Lee, Michael G. (M	r.)			00051444		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	) Credit Card Issue	r Paid		
		\$22.62	12/10/2024					
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Blue Corn Harvest	Bar and Grill	Suite 204	t Whitestone Blvd 4 ark, TX 78613	l.		
8	PURPOSE OF	(a) Category		(b) Descri	ption			
	EXPENDITURE  Political	(See Categories listed at the top Food/Beverage Expe		Unreimb Judges	ursed portion of r	neal during Co	llege for	New
	X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
ε	expenditure to benefit C/OH			_				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	) Credit Card Issue	r Paid		
		\$83.00	12/11/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Texas Center for th	o Judiciany	1210 Sa	n Antonio			
		Texas center for th	c dulcialy,	Suite 800				
L		(-) O-t		Austin, T				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	puon office memorabilia	a from College	for New	2anhul
	Political	Gift/Awards/Memorial	s Expense	Judiciai		a nom conege	IOI INCW	Judges
	X Non-Political	() <b>[</b>						
⊢		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
l e	Complete ONLY if direct expenditure to benefit C/OH	Carialdate/Officeriolaer	That Office	c 30ugiii		Office field		
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	) Credit Card Issue	r Paid		
		\$150.00	12/28/2024		,			
		Ψ130.00	12/20/2024					
⊢	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				5800 PA	378			
		Catholic Bar Associ	iation					
L				Center V	'alley, PA 18034			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•			
	EXPENDITURE	Fees	of this scriedule)	Bar asso	ciation dues			
	Political							
L	X Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder name Office sought				Office held				
L	expenditure to benefit C/OH							
ı								

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 6/7 Rpt: 15/20	Lee, Michael G. (M	r.)			00051444		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	\$363.95	11/08/2024	11/13/202	4			
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Dallas County Repu	ublican Party	11617 N. ( Suite 240 Dallas, TX	Central Expwy			
8 PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE  X Political	(See Categories listed at the top Event Expense	of this schedule)	County pa	rty Christmas pa	arty sponsorshi	p	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$75.00	11/09/2024	12/18/202	4			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Texas Center for th	e Judiciary,	1210 San Suite 800 Austin, TX				
PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE	(See Categories listed at the top Fees	of this schedule)	Criminal J	ustice seminar			
Political							
X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$300.00	11/25/2024	12/18/202	4			
PAYEE	(a) Payee name	<u>I</u>	(b) Payee a	ddress;	City,	State,	Zip Code
			112 Kenw				
	Republican Party of	f Rockwall					
			Rockwall,	TX 75087-0863			
PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE	(See Categories listed at the top <b>Event Expense</b>	of this schedule)	County pa	rty Christmas pa	arty sponsorshi	р	
X Political	Lvent Expense						
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							

## SCHEDULE F4

### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 7/7 Rpt: 16/20	Lee, Michael G. (Mi	r.)		00051444		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$19.49	12/07/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Frisco Valet		11 Cowboys Way			
			Frisco, TX 75034			
8 PURPOSE OF	(a) Category	of this schodulo)	(b) Description			
EXPENDITURE	(See Categories listed at the top <b>Event Expense</b>	of this scriedule)	Parking for Collin County	Bar Association holiday party		
X Political	'					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$24.35	12/09/2024				
PAYEE	(a) Payee name	L	(b) Payee address;	City, State, Zip Code		
	2020 Market Scratc	ch Kitchen &	1500 Rivery Blvd.			
			Georgetown, TX 78628			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe			neal during College for New		
Political	T ood/Beverage Exper	1130	Judges			
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder name Office sought			Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid		
	\$180.00	12/28/2024				
PAYEE	(a) Payee name	I	(b) Payee address;	City, State, Zip Code		
			2101 Ross Ave.			
	Dallas Bar Associat	tion				
			Dallas, TX 75201			
PURPOSE OF	(a) Category	of this cabadula)	(b) Description			
EXPENDITURE	(See Categories listed at the top	or this schedule)	Bar association dues			
Political						
X Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						

Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt:	Lee, Michael G. (Mr.)	00051444
Date	5 Payee name	
12/09/2024	2020 Market Scratch Kitchen & Bar	
Amount (\$)	7 Payee Address; City; State; Zip	
24.35	1500 Rivery Blvd.	
	Coorgatown TV 79629	
DUDDOGE	Georgetown, TX 78628  (a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
PURPOSE OF	Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Unreimbursed portion of meal during College for
EXPENDITURE	, , , , , , , , , , , , , , , , , , ,	New Judges
Date	Payee name	
12/12/2024	2020 Market Scratch Kitchen & Bar	
Amount (\$)	Payee Address; City; State; Zip	
24.35	1500 Rivery Blvd.	
	Georgetown, TX 78628	
PURPOSE		(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Food/Beverage Expense	Unreimbursed portion of meal during College for New Judges
Date	Payee name	I
12/04/2024	Belo Mansion	
Amount (\$)	Payee Address; City; State; Zip	
23.01	2101 Ross Ave.	
	Dollar TV 75201	
DUDDOCE	Dallas, TX 75201  (a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
PURPOSE OF	Food/Beverage Expense	(b) Description (See instructions regarding type of information required.)  Meal during CLE seminar
EXPENDITURE	- γ · · · · · · · · · · · · · · · · · ·	modi danng oʻziz oonima
Date	Payee name	
12/05/2024	Belo Mansion	
Amount (\$)	Payee Address; City; State; Zip	
23.01	2101 Ross Ave.	
	Dallas, TX 75201	
PURPOSE		(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Food/Beverage Expense	Meal during CLE seminar

The Instruction Guide explains how to complete this form.						
Total pages Schedule I: Sch: 2/4 Rpt:	2 FILER NAME Lee, Michael G. (Mr.)	3 Filer ID (Ethics Commission Filers) 00051444				
Date 12/10/2024	5 Payee name Blue Corn Harvest Bar and Grill					
Amount (\$) 22.62	7 Payee Address; City; State; Zip 700 East Whitestone Blvd. Suite 204 Cedar Park, TX 78613					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Unreimbursed portion of meal during College for New Judges				
Date	Payee name					
12/28/2024	Catholic Bar Association					
Amount (\$) 150.00	Payee Address; City; State; Zip 5800 PA 378					
PURPOSE OF EXPENDITURE	Center Valley, PA 18034  (a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.  Bar association dues				
Date 12/28/2024	Payee name  Dallas Bar Association					
Amount (\$) 180.00	Payee Address; City; State; Zip 2101 Ross Ave.  Dallas, TX 75201					
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.)  Bar association dues				
Date 12/07/2024	Payee name Frisco Valet	L				
Amount (\$) 19.49	Payee Address; City; State; Zip 11 Cowboys Way  Frisco, TX 75034					
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required: Parking for Collin County Bar Association holiday party				

	The Instruction Guide explains how to	complete this form.				
Total pages Schedule I: Sch: 3/4 Rpt:	2 FILER NAME Lee, Michael G. (Mr.) 3 Filer ID (Ethics Commiss 00051444					
Date 11/09/2024	5 Payee name JoAnn Fabric and Gifts					
Amount (\$) 6.48	7 Payee Address; City; State; Zip 6330 East Mockingbird Ln.  Dallas, TX 75214					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Zipper for judicial robe	(b) Description (See instructions regarding type of information required.)  Replacement zipper to repair judicial robe				
Date	Payee name					
11/08/2024	State Bar of Texas					
Amount (\$) 275.00	Payee Address; City; State; Zip 1414 Colorado St.  Austin, TX 78701					
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.  Texas Bar College Dues and Endowment Fund				
Date 11/07/2024	Payee name Texas Center for the Judiciary, Inc.					
Amount (\$) 75.00	Payee Address; City; State; Zip 1210 San Antonio Suite 800 Austin, TX 78701					
PURPOSE OF EXPENDITURE		(b) Description (See instructions regarding type of information required.  Fee for College for New Judges				
Date 11/09/2024	Payee name Texas Center for the Judiciary, Inc.					
Amount (\$) 75.00	Payee Address; City; State; Zip 1210 San Antonio Suite 800 Austin, TX 78701					
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Fees	(b) Description (See instructions regarding type of information required.  Criminal Justice seminar				

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule I: Sch: 4/4 Rpt:	2 FILER NAME Lee, Michael G. (Mr.) 3 Filer ID (Ethics Commission File) 00051444				
4	Date 12/11/2024	5 Payee name Texas Center for the Judiciary, Inc.				
6	Amount (\$) 83.00	7 Payee Address; City; State; Zip 1210 San Antonio Suite 800 Austin, TX 78701				
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense  (b) Description (See instructions regarding type of information required.) Judicial office memorabilia from College for New Judges				
	Date	Payee name				
12/11/2024 Wildfire						
Amount (\$) Payee Address; City; State; Zip						
	24.81	812 South Austin Ave.				
L		Georgetown, TX 78626				
PURPOSE OF EXPENDITURE  Date		(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense  (b) Description (See instructions regarding type of information required.) Unreimbursed portion of meal during College for New Judges				
		Payee name				
12/09/2024 Yelladawg Creative						
	Amount (\$) 54.13	Payee Address; City; State; Zip 6181 Saratoga Cir.  Dallas, TX 75214				
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense  (b) Description (See instructions regarding type of information required.) Repair and tailoring of judicial robe				