CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00087899		2 Total pages	filed: 13
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	Mrs.	Denise V.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	01/13/2025	
		Wilkerson				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	TY;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	1808 Winewood Lane				Receipt #	Amount
Change of Address	Arlington, TX 76013					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u>-</u>	
TREASURER NAME	Mr.	Gabriel				
	NICKNAME	LAST Rivas		SUFFIX IV		
		Rivas		IV		
6 CAMPAIGN	STREET ADDRESS (NO P		ΔΡ'	T / SUITE #; CITY;		TATE; ZIP CODE
TREASURER	2024 Mill Creek Dr	J BOX FELASE),	AF	1730ITL#, CITT,	5	TATE, ZIF CODE
ADDRESS	2024 Will Creek Di					
(Residence or Business)						
	Arlington, TX 76010					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(817) 899-4622					
PHONE	(),					
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff		campaign treasurer
	July 15	8th day before		Exceeded modified	_	fficeholder only) .ttach C/OH-FR)
		Sui day belore		reporting limit	Final Report (A	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	Tł	HROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
				State Represent		as District 94
	1			1		
		60 1	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	S	Vers	sion V4.1.0.5dd2ace2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 13

13 C / OH NAME	Wilkerson, Denise V.	(Mrs.)	14 Filer ID 00087899	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without to I officeholders are required to report this information	he candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,368.15
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 9,350.54
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 5,748.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$ 14,938.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.		
		Mrs. De	enise V. Wilkerson	
		Signature of	Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offic	er administering	Printed name of officer administering	Title of office	r administering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

S	UBT		ORM C/OH CHEET PG 3 3 of 13		
-	ER NAN Ikerson	//E , Denise V. (Mrs.)	19 Filer ID 00087899	(Ethics C	ommission Filers)
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE				TOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,252.89
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,115.26
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	9,350.54
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.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	666.00

SCHEDULE A1

The Ing	struction Guide explains how to complete this f	form.	1 Total pages Schedule A1:
	· ·		Sch: 1/5 Rpt: 4/13
2 FILER NA			3 Filer ID (Ethics Commission Filers)
	on, Denise V. (Mrs.)		00087899
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/30/20			\$10.00
	6 Contributor address; City; State; Zip Code		
	Silver Spring, MD 20910		
Princinal	occupation / Job title (See Instructions)	9 Employer (See Instructions)	
Not Emp		Not Employed)
	·		
Date	Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)
11/01/20			\$25.00
	Contributor address; City; State; Zip Code		
	Arlington, TX 76013		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions)	ð
-	blic Defender	Dallas County)
Date			Amount of Contribution (\$)
Date 11/05/20			Amount of Contribution (\$) \$9.87
11/00/20	Contributor address; City; State; Zip Code		÷0.0.
	CUNTIDUTOR address, City, State, Zip Code		
	Santa Cruz, CA 95062		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions)))
Not Emp	ployed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/06/20			\$10.00
I	Contributor address; City; State; Zip Code		
I			
	Hot Springs, NC 28743		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions))
Merchan	ıt	Earth Guild	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
11/05/20	Dooley, Winifred		\$11.37
	Contributor address; City; State; Zip Code		
l			
L	Burbank, CA 91515		
-	occupation / Job title (See Instructions)	Employer (See Instructions))
writer		self	
1			

SCHEDULE A1

						_		
	The Instru	ction Guide explains how	I to complete this f	form	n.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/13	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
		Denise V. (Mrs.)					00087899	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/19/2024							\$100.00
		6 Contributor address; City; St	tate; Zip Code			1		
		Arlington, TX 76015						
8	Principal occu Retired	pation / Job title (See Instructions	;)		Employer (See Instructions No Employer	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>)	Γ	Amount of Contribution (\$)	
	12/19/2024	Duke, Suzanne	_					\$100.00
		Contributor address; City; St				1		
		Arlington, TX 76013						
	Principal occl	upation / Job title (See Instructions	s)	\square	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Retired	•	Ϋ́ Ι		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:			Π	Amount of Contribution (\$)	
	10/30/2024	Gay, Wayne			/			\$50.00
	10/30/232 .		tata: Zin Cada			ł		ψυυ.υυ
		Contributor address; City; St	.ate; Zip Coue					
		Arlington, TX 76012						
<u> </u>	Dringinal occi	Ipation / Job title (See Instructions	<u></u>	—	Employer (See Instructions	$\overline{\Gamma}$		
	Instructor	pallon / נווופ נשבר וושווטנוטוש	<i>"</i>)		Employer (See Instructions UTA	5)		
╘		T	!			—		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/30/2024	Gayden, Crystal]		\$94.00
		Contributor address; City; St		••••				
		Fort Morth TV 76120						
⊢	D i sizal sesi	Fort Worth, TX 76120	<u></u>		(0 tractmustions	ŕ		
		upation / Job title (See Instructions	s)		Employer (See Instructions	;)		
L	Attorney			;	Self	_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/27/2024	Green Wave PAC						\$100.00
		Contributor address; City; St	tate; Zip Code			1		
		Taylor, TX 76574						
	Principal occu	upation / Job title (See Instructions	3)		Employer (See Instructions	3)		
			!					
				<u> </u>				

SCHEDULE A1

The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/13	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Denise V. (Mrs.)		00087899	,
4 Date	5 Full name of contributor out-of-state PAC (ID)#:)	7 Amount of Contribution (\$)	
11/03/2024	Haney, William			\$227.28
	6 Contributor address; City; State; Zip Code			
	Wayland, MA 01778			
-	ipation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
CEO		Dragonfly		
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of Contribution (\$)	
12/19/2024	Harris, Cheryl			\$100.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76012			
	pation / Job title (See Instructions)	Employer (See Instructions	.;)	
Piano Teach		Self		
Date	Full name of contributor out-of-state PAC (ID	u#:)	Amount of Contribution (\$)	
12/19/2024	Henderson, Nina			\$100.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76016		-	
-	ipation / Job title (See Instructions)	Employer (See Instructions	6)	
Realtor		Self		
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of Contribution (\$)	
12/19/2024	Logan, Rae			\$20.00
	Contributor address; City; State; Zip Code			
	Arlington TV 76010			
Dringing occu	Arlington, TX 76012	Employer (See Instructions		
Retired	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	;)	
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)	* 22.00
12/19/2024	Lyons, Franceen			\$23.00
	Contributor address; City; State; Zip Code			
	Arlington, TX 76012			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
Not employe		Not employed	·)	
Not employ a	;u			

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/13	
2 FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
Wilkerson, D	Denise V. (Mrs.)			00087899	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
11/05/2024	Poston, Dan				\$11.37
	6 Contributor address; City; State; Zip Code				
- · · ·	Cincinnati , OH 45248		Ļ		
	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Not Employe		Not Employed	—		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/19/2024	Progressive Women of Arlington				\$71.00
	Contributor address; City; State; Zip Code				
	Arlington, TX 76012				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
			,		
Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
12/19/2024	Reed, Linda				\$20.00
	Contributor address; City; State; Zip Code				
	Arlington, TX 76012	<u>.</u>	L		
	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Retired		Not Employed	_		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
10/30/2024	Stelljes, Laurie				\$20.00
	Contributor address; City; State; Zip Code				
	Fort Worth, TX 76109				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Not employe		Not employed	,		
Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
12/19/2024	Underkofler, Christy			, uncont of contraction (,	\$25.00
	Contributor address; City; State; Zip Code				-
	Arlington, TX 76010				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Contract Rec	cruiter	Pridestaff			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/5 Rpt: 8/13 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Wilkerson, Denise V. (Mrs.) 00087899 4 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 10/30/2024 \$25.00 Wickham, Kate 6 Contributor address; City; State; Zip Code Arlington, TX 76011 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Not employed Not employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/30/2024 \$100.00 Wilhelm, Franya Contributor address; City; State; Zip Code Arlington, TX 76012 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/13		
2 FILER NAME Wilkerson, Denise V. (Mrs.)			3 Filer ID (Ethics Commission Filers) 00087899		
4	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 10/30/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$150.10 I Two Rolls of Stamps		
	Arlington, TX 76016		Check if travel outside of Texas. Complete Schedule T.		
10 Principal occu Realtor	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON Self	I-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 10/28/2024	Full name of contributor out-of-state PAC (ID#: Progressive Women of Arlington Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$965.16 I Stamps		
	Arlington, TX 76012		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 1/3 Rpt: 10/13	Wilkerson, Denise V. (Mrs.)	00087899			
4	Date 11/06/2024	Payee name Facebook				
6	Amount (\$) \$1,550.45	' Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense S			
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/02/2024	Google				
	Amount (\$) \$102.85	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense SPACE			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/29/2024	Micropix Union Printing				
	Amount (\$) \$162.28	Payee address; City; State; Zip Code 4003 Jasmine Fox Lane				
		Arlington, TX 76005				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	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/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemer Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	t Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 2/3 Rpt: 11/13	Wilkerson, Denise V. (Mrs.)	00087899			
4	Date 11/05/2024	Payee name Old School Pizza				
6	Amount (\$) \$416.84	Payee address; City; State; Zip Code 603 W. Abram Arlington, TX 76010				
8	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense /ent			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/28/2024	The Tyson Organization				
	Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 1351 Mistletoe Dr. Fort Worth, TX 76110				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description Advertising Expense Check if tra	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense t Banking Service			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/05/2024	Urgency Public Relations				
	Amount (\$) \$435.00	Payee address; City; State; Zip Code 2442 S. Collins St Ste 108 #2201				
		Arlington, TX 76011				
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense ttions support			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Lowne Control factors watch by control of the control											
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 00087899 10/28/2024 5 Payee name 00087899 6 Amount (\$) 7 Payee address; City; State; Zip Code 8 PURPOSE OF Artington, TX 76012 (b) Description Description 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held 9 Complete ONLY if direct Payee address; City; State; Zip Code 10/28/2024 YT Ad Service Amount (\$) Payee name Office sought Office held 004 payee name Office address; City; State; Zip Code 2340 E Trinity Mills Rd Suite 300 Carrollton, TX 75006 Payee address; City; State; Zip Code 2340 E Trinity Mills Rd suite 300 Carrollton, TX 75006 Payee address; City; State; Zip Code 2340 E Trinity Mills Rd suite at the top of this schedule) Office bidde of Texas. C		Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)								
Sch: 3/3 Rpt: 12/13 Wilkerson, Denise V. (Mrs.) 00087899 4 Date 10/28/2024 5 Payee name Wesstrom, Jill 7 Payee address; City; State; Zip Code 1714 Park Ridge Ct Arlington, TX 76012 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Repayment for her buying stamps for postcards 9 Complete DNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 10/28/2024 Payee name YT Ad Service Amount (\$) Payee name YT Ad Service Office Sought Office held Amount (\$) Payee name YT Ad Service Catrollton, TX 75006 Catrollton, TX 75006 Catrollton, TX 75006 PURPOSE EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Catrollton, TX 75006 Catrollton, TX, officeholder inong expense You Tube Advertising	The Instruction Guide explains how to complete this form.										
4 Date 5 Payee name 10/28/2024 5 Payee address; City; State; Zip Code 6 Amount (\$) 7 Payee address; City; State; Zip Code \$1714 Park Ridge Ct Arlington, TX 76012 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if austin, TX, officeholder living expense Check if austin, TX, officeholder living expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date Payee name YT Ad Service Amount (\$) Payee address; City; State; Zip Code 2340 E Trinity Mills Rd Suite 300 Carrollton, TX 75006 (a) Category (see Categories listed at the top of this schedule) (b) Description Check if austin, TX, officeholder Time outside of Texas. Complete Schedule T. OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) (b) Description OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) (b) Description OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) (b) Description OF Carrollton, TX 75006 (b)	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
10/28/2024 Wesstrom, Jill 6 Amount (\$) 7 Payee address; City; State; Zip Code \$183.12 714 Park Ridge Ct Arlington, TX 76012 Arlington, TX 76012 8 PURPOSE EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. 9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 10/28/2024 Payee name YT Ad Service Payee address; City; State; Zip Code State; Zip Code Amount (\$) Payee address; City; State; Zip Code Carrollton, TX 75006 Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outsid		Sch: 3/3 Rpt: 12/13	Wilkerson, Denise V. (Mrs.)00087899								
10/28/2024 Wesstrom, Jill 6 Amount (\$) 7 Payee address; City; State; Zip Code \$183.12 7 Int Park Ridge Ct Arlington, TX 76012 Arlington, TX 76012 8 PURPOSE of EXPENDITURE (a) Category (see categories listed at the top of this schedule) (b) Description Get expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 10/28/2024 Payee name YT Ad Service Payee address; City; State; Zip Code 2340 E Trinity Mills Rd Suite 300 S500.00 Category (see categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE (a) Category (see categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office PONLY if direct (a) Category (see categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office PONLY if direct (a) Category (see categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Revender	4	Date	5 Payee name								
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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form					ages Schedule K: /1 Rpt: 13/13	
2	FILER NAME Wilkerson, Denise V. (Mrs.)			Filer ID 00087	e (Ethics Commission	Filers)
4	Date 11/26/2024	Date 5 Name of person from whom amount is received			8 Amount (\$)	\$333.00
			oolitic	al contr	l ibution returned to filer	
	Date 12/10/2024	Name of person from whom amount is received Marquez, Natalie Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$333.00
		Dallas, TX 75224 Purpose for which amount is received Check if p Refund of overpayment	oolitic	al contr	ibution returned to file	