#### 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) 00053593 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Alicia NAME Date Received **ELECTRONICALLY FILED** 01/10/2025 NICKNAME LAST **SUFFIX** Key CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 1760 FM 967 MAILING Receipt # Amount **ADDRESS** Suite A Change of Address Buda, TX 78610 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Lawrence NAME NICKNAME LAST **SUFFIX** Gonzales **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 1760 FM 967 **ADDRESS** Suite A (Residence or Business) Buda, TX 78610 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 796-3986 **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** 10/27/2024 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 483rd Hays

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Key, Alicia (Ms.)		<b>14</b> Filer ID 00053593	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or politic These expenditures may have been m officeholders are required to report th	ade without the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASUR	ER NAME	
		COMMITTEE CAMPAIGN TREASUR	ER ADDRESS	
<b>16</b> CONTRIBUTION	1 TOTAL LINUTEM	ZED POLITICAL CONTRIBUTIONS(C	THED THAN DIEDGES LOANS	
TOTALS	I .	ES OF LOANS, OR CONTRIBUTIONS	·	\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	S OF LOANS)	<b>\$</b> 1,392.25
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 5,185.31
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A RIOD	S OF THE LAST DAY OF THE	\$ 22,866.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 43,000.00
17 AFFIDAVIT			under penalty of perjury, that the ac nd includes all information required ction Code.	
			Ms. Alicia Key	
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	DVE	·	
		aid		day
of	, 20, to co	rtify which, witness my hand and seal	of office.	
Signature of office	cer administering oath	Printed name of officer administe	ering oath Title of office	er administering oath

#### SUBTOTALS - JC/OH

#### FORM JC/OH COVER SHEET PG 3

					3 of 7				
18 FILER NAME Key, Alicia (Ms.)  19 Filer ID (Ethics Commission Filers) 00053593									
20 SCH NAM	HEDULE ME OF S	SUBTOTA	L AMOUNT						
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	1,392.25				
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	\$	5,185.31				
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.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 1/2 Rpt: 4/7		
2	FILER NAME Key, Alicia (I	Ms.)			3	Filer ID (Ethics Commission Filers) 00053593
4	Date 11/26/2024	<ul><li>5 Full name of contributor Chavez, Deborah (Ms.)</li><li>6 Contributor address; City; \$</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$15.00
		Buda, TX 78610				
8		Principal Occupation		9 Contributor's Job Title		
	retired			retired		
10	Contributor's e retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	1	Т	Amount of Contribution (\$)
	10/31/2024	Fowler , Laura  Contributor address; City; \$	<u> </u>			\$1,200.00
		Austin, TX 78731				
		ontributor's Principal Occupation Contributor's Job				
	attorney					
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Fowler I			The Fowler Law Firm		
	ii contributor i	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	10/31/2024	Gonzales, Lawrence (Mr	·.)			\$50.00
		Contributor address; City; S  Austin, TX 78750	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Human Res			HR professional		
	Contributor's employer/law firm Law firm				oous	se (if any)
State of Texas						
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDULE /	A(J)1
The Instru	ction Guide explains how	1				
				3 Fi	ler ID (Ethics Commission	n Filers)
Date 12/04/2024	5 Full name of contributor Gonzales, Lawrence (Mr.)	)		<b>7</b> Ai	mount of Contribution (\$)	\$50.00
	Austin, TX 78750					
Contributor's F	Principal Occupation		9 Contributor's Job Title			
			11 Law firm of contributor's s	pouse (	(if any)	
		A				
if contributor is	s a chiid, iaw firm of parent(s) (if a	any)				
Data	Tull name of contributor			Τ	mount of Contribution (f)	
		out-of-state PAC (ID#:_	)	AI	mount of Contribution (\$)	\$77.25
10/31/2024	L	toto: 7in Codo				Φ11.23
	Contributor address; City, St	iale; Zip Code				
	Wimborlov TV 70676					
Caratrila stanla I			Canadrilla standa Jala Tida			
				nouso /	(if any)	
			Law IIIII of Contributor 5 5	pouse (	(ii dily)	
		anv)				
ii continuator i.	s a criliu, law lifth of pareril(s) (ii a	arry)				
	The Instru FILER NAME Key, Alicia (I Date 12/04/2024  Contributor's I Human Rese Contributor i  Date 10/31/2024  Contributor's I furniture mai Contributor's G Gary Weeks	The Instruction Guide explains how files Name Key, Alicia (Ms.)  Date 12/04/2024  5 Full name of contributor Gonzales, Lawrence (Mr.) 6 Contributor address; City; Si Austin, TX 78750  Contributor's Principal Occupation Human Resources  Contributor's employer/law firm State of Texas  If contributor is a child, law firm of parent(s) (if a second contributor weeks, Gary (Mr.)  Contributor address; City; Si Wimberley, TX 78676  Contributor's Principal Occupation furniture maker  Contributor's employer/law firm Gary Weeks and Co.	The Instruction Guide explains how to complete this f  FILER NAME  Key, Alicia (Ms.)  Date 12/04/2024  5 Full name of contributor out-of-state PAC (ID#:_ Gonzales, Lawrence (Mr.)  6 Contributor address; City; State; Zip Code  Austin, TX 78750  Contributor's Principal Occupation  Human Resources  Contributor's employer/law firm  State of Texas  If contributor is a child, law firm of parent(s) (if any)  Date 10/31/2024  Full name of contributor out-of-state PAC (ID#:_ Weeks, Gary (Mr.)  Contributor address; City; State; Zip Code  Wimberley, TX 78676  Contributor's Principal Occupation  furniture maker  Contributor's employer/law firm	Example   S	The Instruction Guide explains how to complete this form.    The Instruction Guide explains how to complete this form.   1 To S	The Instruction Guide explains how to complete this form.    Total pages Schedule A(3)1: Sch: 2/2 Rpt: 5/7

### 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 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		mmittee	Legal Services	Expense	Salaries/M		e /Contract Labor		OTHER (enter	a category not liste	d above)
	Credit Card Fayment	_		The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 1/2 Rpt: 6/7		Key, Alicia (	Ms.)						00053593		
4	Date	5	Payee name									
	11/12/2024		Constant Co	ontact								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$79.95		1601 Trape	lo Road								
			Suite 325									
			Waltham, M	A 02451								
8	PURPOSE	(a)	Category (se	ee Categories listed at t	he ton of this sche	dule)	(b)	Description				
	OF	<u> </u> `	Advertising		ine top of this series	uuic)	,	`	outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE			·				ш.		officeholder livir	ig expense	
								Communication	ons	s tool		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Of	ffice sou	ght			Office h	ield	
	Date		Payee name									
	12/27/2024		Giving Fuel	Donation Proce	essing							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$6.78		1200 2nd S	St 2								
			Sacramento	, CA 95814								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Fees			·		<u></u>			nplete Schedule T.	
	EX. ENDITORE							<b>—</b>		officeholder livir		
								online donation	ן ווכ	processing	iees	
	Complete ONLY if direct	<u> </u>	Candidato/Offic	ceholder name	Of	ffice sou	aht			Office h	vold	
	expenditure to benefit C/OI		Januluale/Oni	centituer name	Oi	ilice sou	gnt			Office i	ieiu	
	Date		Payee name									
	11/05/2024		HEB									
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$81.71		6900 Brodie	e Lane								
			Austin, TX 7	'8745 ————————————————————————————————————								
	PURPOSE OF	(a)		ee Categories listed at t	the top of this sche	dule)	(b)	Description				
	EXPENDITURE		Food/Bever	age Expense				므		de of Texas. Cor officeholder livir	nplete Schedule T.	
								food for camp			ig experise	
										,		
	Complete ONLY if direct	Ц (	Candidate/Offic	ceholder name	Of	ffice sou	ght			Office h	ield	
	expenditure to benefit C/OI						<b>J</b>					

### 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 C

Event Expense Fees Food/Beverage Expense Gift/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

	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: 2/2 Rpt: 7/7	Key, Alicia (Ms.) 00053593
4	Date	5 Payee name
	11/04/2024	Y Strategy LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	3110 Manor Rd
		Suite H
		Austin, TX 78732
8	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
		Consulting services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/04/2024	Y Strategy LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,266.87	3110 Manor Rd
		Suite H
		Austin, TX 78732
	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.
		Check if Austin, TX, officeholder living expense  Texting campaign to voters
		Toxing dampaign to votors
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1