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) 00082242 16 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Kimberly NAME Date Received **ELECTRONICALLY FILED** 01/14/2025 NICKNAME LAST **SUFFIX** Newcomer-Fitzpatrick CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 6512 Ponderosa Lane MAILING Receipt # Amount **ADDRESS** Colleyville, TX 76034 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David NAME NICKNAME LAST **SUFFIX** Cook STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 309 East Broad **ADDRESS** (Residence or Business) Mansfield, TX 76063 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 832-8434 **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** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

GO TO PAGE 2

District Judge District 342 Tarrant

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 16

13 C / OH NAME	Newcomer-Fitzpatrick	x, Kimberly (The Honorable)	14 Filer ID 00082242	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political ex These expenditures may have been made to officeholders are required to report this info	without the candidate's or office	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER N	NAME		
		COMMITTEE CAMPAIGN TREASURER A	ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHE ES OF LOANS, OR CONTRIBUTIONS MAD		\$	0.00
		CAL CONTRIBUTIONS		\$	5,750.00
EXPENDITURE	,	PLEDGES, LOANS, OR GUARANTEES OF ZED POLITICAL EXPENDITURES	- LOANS)		0.00
TOTALS				\$	0.00
		CAL EXPENDITURES		\$	7,417.41
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$	22,611.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOATING PERIOD	ANS AS OF THE LAST DAY	\$	33,037.22
17 AFFIDAVIT			r penalty of perjury, that the a cludes all information required Code.		
		The Honor	rable Kimberly Newcomer-	-Fitzpatrick	
		Sign	ature of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
		aid			day
of	, 20, to ca	ertify which, witness my hand and seal of off	fice.		
Signature of office	er administering oath	Printed name of officer administering	oath Title of offic	er administer	ng oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					7 V L	3 of 16
18		R NAM	19 Filer ID 00082242	(Ethi	cs Commission Filers)	
20		EDULE E OF S		SUBTOTAL AMOUNT		
	1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	5,750.00
	2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
	3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
	4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
	5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	6,358.38
	6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
	8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
	9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,059.03
	10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
	11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CON	TRIBUTIC	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to co	mplete this f	orm.	ı	Total pages Schedule A(J). Sch: 1/2 Rpt: 4/16	1:
2	FILER NAME Newcomer-F	- itzpatrick, Kimberly (The Honorable			ı	Filer ID (Ethics Commiss 00082242	ion Filers)
4	Date 11/25/2024 5 Full name of contributor out-of-state PAC (ID#:) Bennett, Montgomery 6 Contributor address; City; State; Zip Code Dallas, TX 75254		7	Amount of Contribution (\$)	\$1,000.00		
8	Contributor's Principal Occupation Occupation Occupation Occupation						
	chief executi	ive officer		chief executive officer			
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	ouse	e (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 (ID#:_)	Π.	Amount of Contribution (\$)	
	10/31/2024	Kiralp, Selim Contributor address; City; State; Zip Lewisville, TX 75056					\$2,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	manager	molpai occupation		manager			
		employer/law firm		Law firm of contributor's sp	nuse	(if any)	
	Selim Kiralp					(
		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out	of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2024	Law Office of David Williams Contributor address; City; State; Zip Arlington , TX 76012	Code				\$2,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse	e (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	SCHEDULE A(J)1			
	The Instru	Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/16			
2	FILER NAME				Filer ID (Ethics Commission Filers) 00082242
4	Newcomer-Fitzpatrick, Kimberly (The Honorable) Date 5 Full name of contributor out-of-state PAC (ID#:) Queenan, Kevin 6 Contributor address; City; State; Zip Code		↓	Amount of Contribution (\$) \$250.0	
		Arlington, TX 76015			
8	Contributor's I	Principal Occupation	9 Contributor's Job Title		
	Attorney		Attorney		
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oous	se (if any)
		of Kevin Quuenan			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials E Legal Services The Instruction Gui	Sa	-	s/Contract Labor	Travel Out of D OTHER (enter	istrict a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM					3 Filer ID	(Ethics Commission Filers	 s)
	Sch: 1/8 Rpt: 6/16		r-Fitzpatrick, Kimb	erly (The Hor	norable)		00082242	•	•
4	Date	5 Payee name	е						
	10/29/2024	Anedot							
6	Amount (\$)	7 Payee addr	ess; City;	State; Z	ip Code				
	\$10.30	10821 Ros	sebud Court						
		Baton Rou	ge, LA 70815						
8	PURPOSE	(a) Category (s	See Categories listed at the	top of this schedul	e) (b)	Description			
	OF EXPENDITURE	Fees	-	·			outside of Texas. Cor		
	LAFENDITORE					_	n, TX, officeholder livin		
						Credit card a	nedot expense	9	
9	Complete ONLY if direct		ficeholder name	Offic	ce sought		Office h	neld	
	expenditure to benefit C/O	7							
	Date	Payee name							
	10/30/2024	Anedot							
	Amount (\$)	Payee addr	ess; City;	State; Z	ip Code				
	\$80.30	10821 Ros	sebud Court						
		Raton Rou	ge, LA 70815						
	DUDDOCE		90, 17, 70013		(6)				
	PURPOSE OF	,	See Categories listed at the	e top of this schedul	e) (b)	Description	outside of Texas. Cor	mploto Schodulo T	
	EXPENDITURE	Fees					n, TX, officeholder livin		
							nedot expense		
							•		
	Complete ONLY if direct	Candidate/Of	ficeholder name	Offic	ce sought		Office h	neld	_
	expenditure to benefit C/O	1			· ·				
H	Date	Payee name							_
	12/09/2024	1	Republican Club						
			·	Ctata: 7	'in Code				
	Amount (\$)	Payee addr	· ·	State; Z	.ip Code				
	\$250.00	P.O. Box 1	.4095						
		Arlington, ⁻	TX 76012						
	PURPOSE	(a) Category (See Categories listed at the	top of this schedul	e) (b)	Description			
	OF EXPENDITURE	Event Exp	ense				outside of Texas. Cor		
							n, TX, officeholder livin		
						ARC CHIISIIII	nas Party Spon	isuisiiip	
	Complete ONLY if direct	Condidata	finahaldar na ====	Ott.	20.001155		O#:as !-	aold	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Offic	ce sought		Office h	leiu	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Frinting Expense
Salaries/Wangs/Contract Labor

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 7/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	10/11/2024	Clifford Davis
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	PO Box 894
		Fort Worth, TX 76102
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 Icdla 44th-annual-scholarship awards banquet
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/03/2024	Fitzpatrick, Kimberly
	Amount (\$)	Payee address; City; State; Zip Code
	\$67.22	6512 Ponderosa Lane
		Colleyville, TX 76034
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Reimbursement - Constant Contact
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	09/26/2024	Fitzpatrick, Kimberly
	Amount (\$)	Payee address; City; State; Zip Code
	\$147.17	6512 Ponderosa Lane
		
		Colleyville, TX 76034
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Constant Contact Fees
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: Sch: 3/8 Rpt: 8/16	2 FILER NAME Newcomer-Fitzpatrick, Kimberly (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082242
4	Date 09/26/2024	5 Payee name Fitzpatrick, Kimberly
6	Amount (\$) \$280.35	7 Payee address; City; State; Zip Code 6512 Ponderosa Lane
		Colleyville, TX 76034
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for high tea table expenses
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 09/26/2024	Payee name Fitzpatrick, Kimberly
	Amount (\$) \$321.79	Payee address; City; State; Zip Code 6512 Ponderosa Lane
		Colleyville, TX 76034
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EZ Cater - judges luncheon
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/04/2024	Payee name Fitzpatrick, Kimberly
	Amount (\$) \$242.00	Payee address; City; State; Zip Code 6512 Ponderosa Lane
		Colleyville, TX 76034
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fort Worth Republican Women Christmas Ticket and BFF fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/8 Rpt: 9/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	08/08/2024	HDNP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3100 W Arkansas Ln
_		Arlington, TX 76016
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		HDNP International Fundraiser Gala
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	10/15/2024	Jessicas Flowers
	Amount (\$)	Payee address; City; State; Zip Code
	\$349.25	612 Cedar Street
		ander bill TV 75104
	PURPOSE	cedar hill, TX 75104
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Flowers for memorial service
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/19/2024	Jessicas Flowers
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	612 Cedar Street
		cedar hill, TX 75104
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Centerpieces for high tea event for Republican Women of Arlington event
	Operation Chilly 2.11	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/8 Rpt: 10/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	09/27/2024	Metroplex Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	147 E Hurst Blvd
		Hurst, TX 76053
8	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
		Hole sponsor - Golf Tournament
		The Species Community
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/12/2024	Metroplex Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.00	147 E Hurst Blvd
		Hurst, TX 76053
	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 Christmas Party Ticket
		Cinistinus Faity Floret
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
F	Date	Payee name
	11/30/2024	Prince Lebanese Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$335.00	502 West Randol Mill
		Arlington, TX 76011
	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.
	EX. ENDITORE	Check if Austin, TX, officeholder living expense Thanksgiving Court Luncheon
		Thanksgiving Court Euricheon
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

	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: 6/8 Rpt: 11/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	09/20/2024	Republican Women of Arlington
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 14317
		Arlington, TX 76094
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
		High Tea Sponsorship
		g : sa spensorep
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/01/2024	Tarrant County Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1315 Calhoun St,
	Ψ±30.00	1313 Camburt St,
		Fort Worth, TX 76102
	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 Boo Bash Sponsorship
		Boo Bush Sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davida nama
	12/12/2024	Payee name Tarrant County Bar Association
_	,,	·
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1315 Calhoun St,
		Fort Worth, TX 76102
	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.
	EXPENDITORL	Check if Austin, TX, officeholder living expense
		Silver Sponsor and Ticket Christmas Event
	0 1 0 0 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/8 Rpt: 12/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	08/08/2024	Texas A&M
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1515 Commerce ST
		FW, TX 76102
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 Gig Em Table Sponsorship of Event
		Sig Em Table Sponsorship of Event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/05/2024	Texas A&M
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1515 Commerce ST
		FW, TX 76102
	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 Practice in Law Event for students
		Tradice in Law Event for students
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	09/06/2024	Whatley, Erica
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	1370 Scarboro Hills Lane
		Rockwall, TX 75087
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign Graphics
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
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SCHEDULE F1

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

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

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:	
	Sch: 8/8 Rpt: 13/16	Newcomer-Fitzpatrick, Kimberly (The Honorable) 00082242
4	Date	5 Payee name
	09/26/2024	Whatley, Erica
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	1370 Scarboro Hills Lane
		Rockwall, TX 75087
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Graphics
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/28/2024	Whatley, Erica
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	1370 Scarboro Hills Lane
		Rockwall, TX 75087
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		graphic design
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	11/15/2024	Whatley, Erica
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1370 Scarboro Hills Lane
		Rockwall, TX 75087
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Graphics
		Grapines
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	o

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Ow to complete this form. 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 G: 2	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 1/2 Rpt: 14/16	Newcomer-Fitzpatrick, Kimberly (The Ho	onorable) 00082242				
	5 Payee name					
09/03/2024	Constant Contact					
``'	, , , , , , , , , , , , , , , , , , , ,	Zip Code				
\$67.72	1601 Trapelo Road					
Reimbursement from political contributions intended	Waltham , ME 02451					
8 PURPOSE ((a) Category (See Categories listed at the top of this sched					
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense				
		Email fees				
O Complete CNII V if direct C	Candidate /Office holder name	Office sought Office held				
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
09/26/2024	Constant Contact					
Amount (\$)	Payee address; City; State;	Zip Code				
\$147.17	1601 Trapelo Road					
Reimbursement from political contributions intended	Waltham , ME 02451					
PURPOSE	Category (See Categories listed at the top of this sched					
OF EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense				
		Email Fees				
Complete ONLY if direct C	candidate/Officeholder name	Office sought Office held				
expenditure to benefit C/OH	andidate/officeriolaer name	Office Sought Office field				
Date	Payee name					
09/24/2024	EZ Cater					
Amount (\$)	Payee address; City; State;	Zip Code				
\$321.79	\$321.79 40 Water Street, 5th Floor					
Reimbursement from political contributions intended	Boston, MA 02109					
PURPOSE	Category (See Categories listed at the top of this sched					
OF EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense				
		Judges Luncheon expenses				
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		xpense Vages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 2/2 Rpt: 15/16	2 FILER NAM Newcome	E -Fitzpatrick, Kimberly (The	Honorab	le)	1	Filer ID (Ethics Commission Filers) 00082242
4	Date	5 Payee name				<u> </u>	
	09/21/2024	Five Below					
6	Amount (\$)	7 Payee addr	ess; City; State	e; Zip Co	ode		
	\$10.83	2901 Rio (Grande Blvd				
	Reimbursement from political contributions intended	Euless, TX					
8	PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Exp	ense			_	eck if Austin, TX, officeholder living expense
					Supplies for high	ı tea	bags
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held
	Date	Payee name	9				
	12/04/2024	Fort Worth	Republican Women				
	Amount (\$)	Payee addr	ess; City; State	; Zip Co	ode		
	\$242.00	P.O. Box 1	.01613				
	X Reimbursement from political contributions intended	Fort Worth	, TX 76185				
	PURPOSE	Category (See Categories listed at the top of this so	hedule)	Description	=	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Exp	ense		L	_	eck if Austin, TX, officeholder living expense
					Christmas party t	ticke	et and BFF fee
	Complete ONLY if direct	Candidate/Office	ahaldar nama		Office sought		Office held
	expenditure to benefit C/OH	Candidate/Office	enoluei name		Office Sought		Office field
	Date	Payee name	2				
	09/21/2024	Ulta	-				
	Amount (\$)	Payee addr	, , , , , , , , , , , , , , , , , , , ,	e; Zip Co	ode		
	\$269.52	2901 Rio (Grande Blvd Ste 600				
	Reimbursement from political contributions intended	Euless, TX	76039				
	PURPOSE OF		See Categories listed at the top of this sci	hedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Exp	ense		Cupplies for Ligh	_	neck if Austin, TX, officeholder living expense
					Supplies for High	ıte	a Bags for Attendees
	Complete ONLY if direct expenditure to benefit C/OH	 Candidate/Office	eholder name		Office sought		Office held
_							

OUTSTAN	NDING LOANS	SCHEDULE L			
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 16/16			
FILER NAME Newcomer-Fitz	patrick, Kimberly (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082242			
LENDER INFORMATION	4 Name of lender Newcomer-Fitzpatrick, Kimberly				
	5 Lender address; City; State; Zip Code				
	Colleyville, TX 76034				
GUARANTOR INFORMATION	6 Name of guarantor				
X not applicable	7 Guarantor address; City; State; Zip Code				
	•				