#### 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) 00057659 33 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Karin NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Crump CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 300593 MAILING Amount Receipt # **ADDRESS** Change of Address Austin, TX 78703 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Beverly G. NAME NICKNAME LAST **SUFFIX** Reeves **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 3103 Bee Caves Rd. **ADDRESS** Ste. 240 (Residence or Business) Austin, TX 78746 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 334-4500 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 250 Travis Court Of Appeals, Justice Place 5 District 3

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

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 33

13 C / OH NAME	Crump, Karin (The H	onorable)	<b>14</b> Filer ID 00057659	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditi These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or
Additional Pages				
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 38,944.23
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 2,423.82		
	4. TOTAL POLIT		\$ 22,912.94	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 32,703.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Ho	norable Karin Crump	
		Signature o	f Candidate or Officehol	der
AFFIX NO	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	r administering oath

## **SUBTOTALS - JC/OH**

## FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 33
	ILER NA	(Ethics Commission Filers)		
		LE SUBTOTALS - SCHEDULE		SUBTOTAL AMOUNT
1	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 38,944.23
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	<b>\$</b> 22,673.15
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	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 239.79
1	D	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
1	1.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
1	2.	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	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/17 Rpt: 4/33
2	FILER NAME	( <del>-</del> 1			3	Filer ID (Ethics Commission Filers)
	Crump, Karıı	n (The Honorable)			L	00057659
4	Date 11/21/2024	5 Full name of contributor Almanza Blackburn Dick	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$526.63
		6 Contributor address; City; S	State; Zip Code			
		Austin, TX 78746				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title Partner		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (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#:	)	Т	Amount of Contribution (\$)
	11/21/2024 Baker Botts Amicus Fund			\$3,750.00		
		Contributor address; City; 9	state; Zip Code			
		Houston, TX 77002				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	11/13/2024	Bennett, Bruce	_			\$526.63
		Contributor address; City; \$	State; Zip Code			
		Austin, TX 78701				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Lawyer			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Cardwell, Ha	art & Bennett, LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/17 Rpt: 5/33
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Crump, Karii	n (The Honorable)				00057659
4	Date 11/26/2024			7	Amount of Contribution (\$) \$1,052.95	
		Austin, TX 78746				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title Partner		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/03/2024	Brophy, Joseph Contributor address; City;	<u> </u>			\$1,052.95
		Austin, TX 78735				
		Principal Occupation		Contributor's Job Title		
	Attorney			Managing Member		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Brophy & Bla					
	If contributor is	s a child, law firm of parent(s) (i	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	11/21/2024	Burgess Law PC	_			\$500.00
		Contributor address; City;  Austin, TX 78701	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
				Principal		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/17 Rpt: 6/33
2	FILER NAME	n (The Henerable)			3	Filer ID (Ethics Commission Filers)
4	Date	p, Karin (The Honorable)  5 Full name of contributor  out-of-state PAC (ID#:		7	00057659  Amount of Contribution (\$)	
	11/27/2024	Burke, Cecelia  6 Contributor address; City;				\$263.47
		Austin, TX 78731				
8		Principal Occupation		9 Contributor's Job Title		
10	Na Na Samtulbutanla a	and a conflorer figure		Retired		on (it am )
10	Na	employer/law firm		11 Law firm of contributor's sp	Jous	se (II arry)
12	If contributor is	s a child, law firm of parent(s) (if	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/02/2024	Byrd Davis Alden & Hen Contributor address; City;  Austin, TX 78705			·	\$526.63
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
				Partner		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/03/2024	Cokinos   Young  Contributor address; City;	State; Zip Code			\$2,500.00
		Houston, TX 77010				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 4/17 Rpt: 7/33
2	FILER NAME Crump, Karii	n (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659
4	Date 11/22/2024			7	Amount of Contribution (\$) \$1,052.95	
		Waco, TX 76710				
8		Principal Occupation		9 Contributor's Job Title		
_	Lawyer			Owner/Lawyer		77
10	Law Office o	employer/law firm If Vic Feazell		11 Law firm of contributor's sp	oou	se (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#:	)		Amount of Contribution (\$)
	07/18/2024	Francois, Landon  Contributor address; City; S	State; Zip Code			\$52.95
	Contributorio	Houston, TX 77027		Contributor's Job Title		
	Attorney	Principal Occupation		Associate Attorney		
-		employer/law firm		Law firm of contributor's sp	oou	se (if any)
		e & Barger, LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/03/2024	George Brothers Kincaid	& Horton LLP			\$1,000.00
		Contributor address; City; S  Austin, TX 78701	tate; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u>                                       </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	otal pages Schedule A(J)1 ch: 5/17 Rpt: 8/33	:
2	FILER NAME	(The Heaventhia)			1	iler ID (Ethics Commission	on Filers)
Ļ		n (The Honorable)  15 Full name of contributor	out-of-state PAC (ID#:			0057659	
4	Date 12/03/2024	<b>L</b> ,		, A	mount of Contribution (\$)	\$250.00	
		Austin, TX 78701					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	attorney			Attorney			
10		employer/law firm		11 Law firm of contributor's sp	oouse	(if any)	
L	Lloyd Gosse						
12	2 If contributor is	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	ГА	mount of Contribution (\$)	
	11/22/2024	Goranson Bain Ausley, I	<del></del>			( )	\$526.63
		Contributor address; City;  Dallas, TX 75206	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Continuator 3 i	- ппстрат Оссирацоп		Law Firm			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	A	mount of Contribution (\$)	
	11/22/2024	Greer, Marcy	<del>_</del>				\$526.63
		Contributor address; City;	State; Zip Code				
		Austin, TX 78746					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	attorney			Managing Partner			
		employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	Alexander D	ubose & Jefferson					
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL CON	ITRIBUTIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to c	omplete this f	orm.	1	Total pages Schedule A(J)1: Sch: 6/17 Rpt: 9/33
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Crump, Karii	n (The Honorable)				00057659
4	Date 11/18/2024			7	Amount of Contribution (\$) \$105.58	
		Austin, TX 78704				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	attorney			Partner		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
		Il Reynolds Bailey Stephenson		·		, ,,
12	! If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ou	t-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	12/03/2024	Hayes, Butch  Contributor address; City; State; Zi	p Code			\$263.47
		Manchaca, TX 78652				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Weisbart Sp	ringer Hayes LLP				
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ou	t-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	11/13/2024	Howry Breen & Herman LLP				\$1,052.95
		Contributor address; City; State; Zij Austin, TX 78705	p Code		•	
_	Contributor's	Principal Occupation		Contributor's Job Title	<u> </u>	
	Continuator 3 r	тіпсіраі Оссираціон		Partner		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		<u> </u>		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/17 Rpt: 10/33
2	FILER NAME	(The Henerable)			3	Filer ID (Ethics Commission Filers)
4	Date	n (The Honorable)  5 Full name of contributor	out-of-state PAC (ID#:	)	7	00057659  Amount of Contribution (\$)
	12/03/2024	Icenogle & Boggins  6 Contributor address; City;	State; Zip Code			\$263.47
		Austin, TX 78735				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title Attorney		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/03/2024	Kaplan, Austin  Contributor address; City;  Austin, TX 78746	State; Zip Code		•	\$250.00
_	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Attorney	molpai Godapation		Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Kaplan Law	Firm				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)
	12/03/2024	Kennard, Karen				\$526.63
		Contributor address; City;  Austin, TX 78703				
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney Co-Managing Sharehold			der		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Greenberg T					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/17 Rpt: 11/33
2	FILER NAME	(The Henerable)			3	Filer ID (Ethics Commission Filers)
4	Date	n (The Honorable)  5 Full name of contributor	out-of-state PAC (ID#:	\	ļ_	00057659  Amount of Contribution (\$)
4	11/12/2024				\$105.58	
		Austin, TX 78751				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Lawyer			Shareholder		
10		employer/law firm	<u></u>	11 Law firm of contributor's sp	oous	se (if any)
12		igherty, Hearon & Moody, Possible States, Hearon & Moody, Possible States,				
12	in Contributor is	s a criliu, iaw iiriri or parerii(s) (i	rany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	12/03/2024	King, Frank	<b>_</b> ` `			\$25.00
		Contributor address; City;  Austin, TX 78757	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Texas Comr	nission for Fire Protection				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	11/22/2024	Kostura, Judy	_			\$263.47
		Contributor address; City;	State; Zip Code			
		Austin, TX 78746				
		Principal Occupation		Contributor's Job Title		
	Lawyer			Partner		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
_		s a child, law firm of parent(s) (i	f any)			
	ii continutoi i	s a criliu, iaw iiiiii oi parerii(s) (i	i arry)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 9/17 Rpt: 12/33
2	FILER NAME	n (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659
4	Date 11/27/2024			7	Amount of Contribution (\$) \$263.47	
		Austin, TX 78746				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title Owner		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	11/25/2024	Loewy, Adam  Contributor address; City;	State; Zip Code			\$2,631.89
		Austin, TX 78731				
		Principal Occupation		Contributor's Job Title		
	Attorney			Owner		77
	Loewy Law I	employer/law firm =irm		Law firm of contributor's sp Loewy Law firm	oou	se (if any)
		s a child, law firm of parent(s) (if	any)	Loewy Law IIIII		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	12/04/2024	Noelke Maples St. Lege Contributor address; City;				\$526.63
		Austin, TX 78746				
	Contributor's F	Principal Occupation		Contributor's Job Title Attorney		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 10/17 Rpt: 13/33
2	FILER NAME Crump, Karii	R NAME  np, Karin (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659
4	Date 12/03/2024			7	Amount of Contribution (\$) \$2,500.00	
		Houston, TX 77010				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	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	f any)			
	Date 11/13/2024	Full name of contributor Obriant, Sheryl Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$263.47
		Austin, TX 78704				
		Principal Occupation		Contributor's Job Title		
	Attorney	employer/law firm		Mediator  Law firm of contributor's sp	2011	oo (if am)
	Thamm & O'	, ,		Law littl of contributors s	Jou	se (II ally)
		s a child, law firm of parent(s) (if	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	12/02/2024	Plummer, Travis  Contributor address; City;  Round Rock, TX 78665	State; Zip Code			\$105.58
Н	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Member		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Dykema					
	If contributor is	s a child, law firm of parent(s) (if	f any)			

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/17 Rpt: 14/33		
2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Crump, Kari	n (The Honorable)				00057659		
4	4 Date 11/24/2024		7	Amount of Contribution (\$) \$500.00				
		Austin, TX 78746						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
12	! If contributor i	s a child, law firm of parent(s) (i	f any)					
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)		
12/03/2024 Rogers, Elizabeth  Contributor address; City; State; Zip Code				\$263.47				
		Austin, TX 78750						
	Contributor's Principal Occupation Contributor's Job Title							
	Attorney Of Counsel							
	Contributor's (	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
		s a child, law firm of parent(s) (i	f anv)					
		o a oa, .a.v o . pa. o(o) (						
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Τ	Amount of Contribution (\$)		
	11/12/2024	Romero, Joshua	out of state 1 Me (IBH.	<b></b>		\$263.47		
Contributor address; City; State; Zip Code  Leander, TX 78641								
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>			
	Lawyer	-ппстрат Оссирацоп		Partner				
_	Contributor's employer/law firm  Law firm of contributor's s			יווח	se (if any)			
Jackson Walker LLP			Jou.	se (ii diiy)				
	If contributor i	s a child, law firm of parent(s) (i	f any)	l.				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A(J)1	
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 12/17 Rpt: 15/33	
2	FILER NAME Crump, Karii	n (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659	
4			7	Amount of Contribution (\$) \$105.58			
		Austin, TX 78701					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)				
Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$) \$526.63			
		Austin, TX 78703					
	Contributor's Principal Occupation Contributor's Job Title						
Attorney Partner  Contributor's employer/law firm Law firm of contributor's s				Ct A			
		ass & McConnico LLP		Law firm of contributor's sp Scott Douglass & McCo			
		s a child, law firm of parent(s) (if	any)	Goott Douglass & Mode		00 221	
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/03/2024	Scott Douglass & McCor Contributor address; City; S Austin, TX 78701				\$1,000.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
Contributor's employer/law firm			Law firm of contributor's sp	ous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)	ı			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 13/17 Rpt: 16/33		
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Crump, Karii	n (The Honorable)			L	00057659
4	4 Date 11/23/2024 5 Full name of contributor out-of-state PAC (ID#:) Singley, Michael 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$263.47		
		Austin, TX 78750				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			partner		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	11/13/2024	Snell, Jason				\$105.58
Contributor address; City; State; Zip Code						
	Austin, TX 78701  Contributor's Principal Occupation  Contributor's Job Title			<u> </u>		
_	Attorney Attorney  Contributor's employer/law firm Law firm of contributor's sp				(1 )	
	Snell Law	employer/law liftii		Law firm of contributor's sp	Jou	se (II ariy)
_			f a.m. ()			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	11/12/2024	Taylor, Amanda	—			\$105.58
		Contributor address; City;	State; Zip Code		1	
		Austin TV 70740	·			
_	0	Austin, TX 78749		0		
		Principal Occupation		Contributor's Job Title		
	Attorney Partner				-	
	Contributor's employer/law firm  Law firm of contributor's s			Law firm of contributor's sp	oou	se (if any)
	Butler Snow					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 14/17 Rpt: 17/33
2	FILER NAME Crump, Karii	n (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659
4	Date 11/27/2024  5 Full name of contributor out-of-state PAC (ID#:) Terrazas PLLC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00		
		Austin, TX 78746				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title Owner/Shareholder		
10	Contributor's	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)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
12/03/2024 Terrill & Waldrop PLLC  Contributor address; City; State; Zip Code				\$1,000.00		
		Austin, TX 78701				
Contributor's Principal Occupation  Contributor's Journal Occupation  Partner			Contributor's Job Title Partner			
Contributor's employer/law firm				Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
12/02/2024 The Tomlinson Firm, PLLC  Contributor address; City; State; Zip Code				\$526.63		
		Austin, TX 78704				
Contributor's Principal Occupation  Contributor's Job Title			Contributor's Job Title  Managing Member			
			Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 15/17 Rpt: 18/33
2	FILER NAME	n (The Honorable)			1	Filer ID (Ethics Commission Filers) 00057659
4	Date 10/28/2024	ate 5 Full name of contributor out-of-state PAC (ID#:)		_	Amount of Contribution (\$) \$2,500.00	
		San Antonio, TX 78269				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$) \$131.89	
		Contributor address; City;  Austin, TX 78701	State; Zip Code			
	Contributor's Principal Occupation Contributor's Job Title					
	Law Attorney					
Contributor's employer/law firm  Law firm of contributor's  Winstead PC			Law firm of contributor's sp	oous	e (if any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>		
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	10/28/2024	Wager, James	<b>ப</b> ` `	·		\$52.95
Contributor address; City; State; Zip Code						
		Philadelphia, PA 19147				
		Principal Occupation		Contributor's Job Title		
	educator psychologist					
	Contributor's employer/law firm  Law firm of contributor's s  SDP			Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 16/17 Rpt: 19/33
2	FILER NAME Crump, Karii	n (The Honorable)			3	Filer ID (Ethics Commission Filers) 00057659
4	Date 11/13/2024  5 Full name of contributor out-of-state PAC (ID#:) Weinman, Daryl  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,052.95		
		Mustang Ridge, TX 7861	0			
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			President		
10		employer/law firm Associates, P. C.		11 Law firm of contributor's sp	ous	se (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	11/12/2024 Wilson, James  Contributor address; City; State; Zip Code				\$1,052.95	
		Austin, TX 78731				
	Contributor's Principal Occupation Contributor's Job Title					
	staff Chair, Institution Revie			v B	oard	
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	University of	Texas at Austin				
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	12/02/2024	Wynne & Wynne, Austin	_			\$1,000.00
		Contributor address; City; S	tate; Zip Code		•	
_	Contributorio	Austin, TX 78746		Contributorio Joh Titlo		
Contributor's Principal Occupation  Contributor's Job Title  owner						
Contributor's employer/law firm Law firm of contributor's			Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)			

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.					ages Schedule A(J) 7/17 Rpt: 20/33	L:
2	FILER NAME Crump, Karii	n (The Honorable)			3 Filer ID 00057	(Ethics Commissi 659	on Filers)
4	Date 12/03/2024  5 Full name of contributor out-of-state PAC (ID#:) Zausmer, Gary  6 Contributor address; City; State; Zip Code  Austin, TX 78731				7 Amoun	t of Contribution (\$)	\$105.58
8	Contributor's F	Principal Occupation	9 Coi	ntributor's Job Title	<u> </u>		
	Attorney		mber				
10	Contributor's e	employer/law firm r PLLC	<b>11</b> Lav	v firm of contributor's sp	pouse (if any	r)	
12	If contributor is	s a child, law firm of parent(s) (if any)	I				
	Date	Full name of contributor  ut-of-state PAC (	ID#:	)	Amoun	t of Contribution (\$)	
	12/02/2024	Zinda Law Group					\$2,631.89
Contributor address; City; State; Zip Code  Austin, TX 78759							
Contributor's Principal Occupation  Contributor's Job Title CEO							
	Contributor's	employer/law firm	Lav	v firm of contributor's sp	pouse (if any	<b>(</b> )	
	If contributor is	s a child, law firm of parent(s) (if any)					

### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 1/11 Rpt: 21/33	Crump, Karin (The Honorable)  00057659
4	Date	5 Payee name
	09/17/2024	Austin AFL-CIO
6	Amount (\$)	7 Payee address; City; State; Zip Code P.O. Box 87
	\$250.00	P.O. BOX 87
		Austin, TX 78767
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Print advertisement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	<del>1</del>
	Date	Payee name
	07/12/2024	Clay Pit
	Amount (\$)	Payee address; City; State; Zip Code
	\$155.57	1601 Guadalupe St.
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign meeting expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	11/15/2024	Clay Pit
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.15	1601 Guadalupe St.
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes, Complete Schedule T
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		officeholder meeting expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>

### 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	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: 2/11 Rpt: 22/33	Crump, Karin (The Honorable) 00057659
4	Date	5 Payee name
	12/31/2024	DonateWay
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,271.03	P.O. Box 301267
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		online contribution processing fees
		online contribution processing rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	
		Payee name
	07/17/2024	El Chile Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.19	1809 Manor Rd
		Austin, TX 78722
	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
		campaign meeting expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	08/12/2024	El Chile Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.00	1809 Manor Rd
		Austin, TX 78722
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  campaign meeting expense
		campaign meeting expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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 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: 3/11 Rpt: 23/33	Crump, Karin (The Honorable) 00057659
4	Date	5 Payee name
	10/03/2024	El Chile Cafe
6	Amount (\$) \$21.13	7 Payee address; City; State; Zip Code 1809 Manor Rd  Austin, TX 78722
8	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 officeholder meeting expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/01/2024	El Chile Cafe
	Amount (\$) \$79.24	Payee address; City; State; Zip Code  1809 Manor Rd  Austin, TX 78722
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  officeholder meeting expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/23/2024	HBAA Charitable Foundation
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 3144 Bee Caves Road
		Austin, TX 78746
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Condidate/Officebldor/Political Committee

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

oursement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
ot Labor OTHER (enter a category not listed above)

	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: 4/11 Rpt: 24/33	Crump, Karin (The Honorable) 00057659
4	Date	5 Payee name
	08/06/2024	Hays County Young Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$700.00	215 W San Antonio St.
		San Marcos, TX 78666
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeriolder/Political Committee Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/16/2024	JW Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.43	23808 Resort Pkwy
		San Antonio, TX 78261
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		hotel fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/09/2024	JW Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$561.66	23808 Resort Pkwy
		San Antonio, TX 78261
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	CLE expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Hotel while attending Texas Association of District
		Judges meeting (see memo)
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### 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/Officeholder/Politica Credit Card Payment	l 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: 5/11 Rpt: 25/33	Crump, Karin (The Honorable) 00057659
4	Date	5 Payee name
	10/22/2024	Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.95	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Email software
		Littali Software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/22/2024	Mailchimp
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Email software
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
F	Date	Payee name
	12/23/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.95	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Email software
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
$\vdash$		

### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Out of District R (enter a category not listed above)			
1	Total pages Schedule F1:	.: 2 FILER NAME 3 Filer	ID (Ethics Commission Filers)			
Ĺ	Sch: 6/11 Rpt: 26/33		57659			
4	Date	5 Payee name				
	07/22/2024	Mailchimp				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$79.95	675 Ponce de Leon Ave NE				
		Suite 5000				
		Atlanta, GA 30308				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense	exas. Complete Schedule T.			
	EXPENDITORE	Check if Austin, TX, officeho	older living expense			
		Email software				
9	Complete ONLY if direct expenditure to benefit C/OI		Office held			
	Date	Payee name				
	08/22/2024	Mailchimp				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$79.95	675 Ponce de Leon Ave NE				
		Suite 5000				
		Atlanta, GA 30308				
	BUBBOOF					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	ovas Complete Schodule T			
	EXPENDITURE	Office Overhead/Rental Expense				
		Email software	3 - 1			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	Date	Payee name				
	09/23/2024	Mailchimp				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$79.95					
	, <b>.</b>	Suite 5000				
		Atlanta, GA 30308				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	was Consulate Cal. 11. T			
	EXPENDITURE	Office Overhead/Rental Expense	exas. Complete Schedule T.			
		Email software	bider living expense			
		Linea solware				
	Complete ONLY if direct	Candidate/Officeholder name Office sought C	Office held			
	expenditure to benefit C/OI		JINGG HEIU			
_	•					

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 7/11 Rpt: 27/33	Crump, Karin (The Honorable) 00057659					
4	Date	5 Payee name					
	10/28/2024	Susan Harry Consulting					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$195.00	PO Box 301074					
		Austin, TX 78703					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
		Compliance consulting					
		Compliance consulting					
_	Complete ONLY if direct	Condidate/Office holds					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	07/23/2024	Susan Harry Consulting					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$200.00	PO Box 301074					
		Austin, TX 78703					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Compliance consulting					
		Compliance consulting					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
_	Date	Payee name					
	12/20/2024	Susan Harry Consulting					
	Amount (\$)						
	\$3,000.00	Payee address; City; State; Zip Code PO Box 301074					
	φ3,000.00	FO BOX 301074					
		Austin, TX 78703					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITORE	Check if Austin, TX, officeholder living expense					
		Fundraising consulting					
	0 1. 0						
	Complete ONLY if direct expenditure to benefit C/O	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 Con

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

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 8/11 Rpt: 28/33	Crump, Karin (The Honorable) 00057659					
4	Date	5 Payee name					
	08/26/2024	Texas Access to Justice Foundation					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$500.00	1601 Rio Grande St #351					
		Austin, TX 78701					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By					
		Candidate/Officeholder/Political Committee					
		- Spoilsoisilip					
Ļ	Compulate ONII V if direct	Condidate/Office holds					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	08/19/2024	Texas District Judges Assocation					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$50.00	201 Caroline, 10th Floor					
		Houston, TX 77019					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Dues					
		5465					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
_	Dete						
	Date 09/20/2024	Payee name Texas District Judges Assocation					
		-					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$550.00	201 Caroline, 10th Floor					
		Houston, TX 77019					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By					
		Candidate/Officeholder/Political Committee					
		ομοτιουτοιτήμ Το πουτουτοιτήμ					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

### 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

	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: 9/11 Rpt: 29/33	Crump, Karin (The Honorable) 00057659							
4	Date	5 Payee name							
	11/24/2024	The Otis							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$35.50	1901 San Antonio St							
		Austin, TX 78705							
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							
		event expense							
		STORIC OXPORTED							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
ľ	expenditure to benefit C/OI								
F	Date	Payee name							
	09/23/2024	The Otis							
H	Amount (\$)	Payee address; City; State; Zip Code							
	\$29.90	1901 San Antonio St							
		Austin, TX 78705							
	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  event expense							
		CVOIL EXPENSE							
⊢	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
expenditure to benefit C/OH									
F	Date	Payee name							
	12/09/2024	The Otis							
H	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,384.55	1901 San Antonio St							
	•	1001 Gail / William Gr							
		Austin, TX 78705							
	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							
		Event venue expenses							
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
$\vdash$									
ı									

### 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

	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: 10/11 Rpt: 30/33	Crump, Karin (The Honorable) 00057659						
4	Date	5 Payee name						
	07/20/2024	Travis County Democratic Party						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$5,000.00	1311 E 6th St						
		Austin, TX 78702						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		Candidate/Officeholder/Political Committee						
		Contribution						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9	expenditure to benefit C/O							
	Date	Payee name						
	12/06/2024	Veracruz						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$41.71	1700 Guadalupe St.						
		Austin, TX 78701						
PURPOSE OF		(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		officeholder meeting						
		Cineditional incoming						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH							
	Dette							
	Date	Payee name						
	07/23/2024	Veracruz						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$270.65	1700 Guadalupe St.						
		Austin, TX 78701						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Food/Beverage Expense						
EXPENDITORE		Check if Austin, TX, officeholder living expense						
		lunch for Youth Justice Alliance						
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2							
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H						

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		nittee	Legal Services  The Instruction Gu	·		ages	Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	<b>2</b> F	ILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 11/11 Rpt: 31/33		-	n (The Honorab	le)					00057659	
4	Date	<b>5</b> P	Payee name								
	08/23/2024	>	/eracruz								
6	Amount (\$)	<b>7</b> P	ayee addres	ss; City;	State;	Zip Co	de				
	\$15.92	1	.700 Guada	llupe St.							
			Austin, TX 7								
8	PURPOSE OF			e Categories listed at th	e top of this sche	edule)	(b)	Description			
	EXPENDITURE	F	ood/Bevera	age Expense			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
								Officeholder r			ехрепзе
										J9	
9	Complete ONLY if direct		andidate/Offic	ceholder name	0	ffice souç	ght			Office he	eld
	expenditure to benefit C/OI	1									
Г	Date	Р	ayee name								
	08/30/2024	W	Villiamson (	County Democra	atic Party						
Г	Amount (\$)	P	ayee addres	ss; City;	State;	Zip Cod	de				
	\$3,000.00	Р	P.O. Box 12	96							
		G	Georgetown	, TX 78627							
	PURPOSE OF			e Categories listed at th		edule)	(b)	Description			
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee			<b></b>			plete Schedule T.		
			zandidate/C	micenolaer/Poli	licai Commi	lllee		Contribution	, 1,	onicendaei iiving	ехрепзе
								Continuation			
⊢	Complete ONLY if direct	Ca	andidate/Offic	ceholder name	0	ffice soug	aht			Office he	eld
	expenditure to benefit C/OI						y				
┝											

### 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:	2 FILER NAM	E			3 Filer ID (Ethics Commission Filers)	,		
	Sch: 1/2 Rpt: 32/33	Crump, Ka	rin (The Honorable)			00057659			
4	Date	5 Payee name	9						
	12/18/2024	Amazon							
6	Amount (\$)	7 Payee addre		Zip Co	ode				
	\$76.80	410 Terry <i>i</i>	Avenue North						
	X Reimbursement from political contributions intended	Seattle, W	A 98109						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	edule)	(b) Description	Check if travel outside of Texas. Complete Schedule	э Т.		
	OF EXPENDITURE	Gift/Award	s/Memorials Expense		L	Check if Austin, TX, officeholder living expense			
					gifts for staff				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held			
	Date	Payee name	9						
	12/16/2024	Amazon							
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode				
	\$62.99	410 Terry Avenue North							
	Reimbursement from political contributions intended	Seattle, W	A 98109						
	PURPOSE OF		See Categories listed at the top of this sch	edule)	Description	Check if travel outside of Texas. Complete Schedule	∍ T.		
	EXPENDITURE	Gift/Award:	s/Memorials Expense		Laitte for staff	Check if Austin, TX, officeholder living expense			
					gifts for staff				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				Office held			
	Date	Payee name	<u>,</u>						
	12/11/2024	Deseta Lyt	tle, Daniella						
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode				
	\$20.00	redacted (j	udge)						
	Reimbursement from political contributions intended	Austin, TX	78701						
	PURPOSE	Category (s	See Categories listed at the top of this sch	edule)	Description	Check if travel outside of Texas. Complete Schedule	э Т.		
OF EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee			Check if Austin, TX, officeholder living expense  staff gifts and meals				
		Surididate/	Cincendident ontical comm	iiii	i sian yins anu me	ταις			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Office	eholder name		Office sought	Office held			

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 2/2 Rpt: 33/33 Crump, Karin (The Honorable) 00057659 Date Payee name 12/02/2024 Guerra Gamble, Maya Amount (\$) State; Zip Code Payee address; City; \$30.00 redacted (judge) Reimbursement from political contributions Х intended Austin, TX 78701 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Gift/Awards/Memorials Expense **EXPENDITURE** courthouse holiday expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/16/2024 **Texas State Directory Press** Amount (\$) Payee address; City; State; Zip Code \$50.00 1800 Nueces St. Reimbursement from political contributions Х Austin, TX 78701 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** legislative handbooks Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH