JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00088174	,	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	
OFFICEHOLDER NAME	Ms.	Holly E.			Date Received	
					ELECTRONICA	LLY FILED
					01/14/2025	
	NICKNAME	LAST		SUFFIX	01/14/2020	
		Taylor				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER	1101 W. 34th St. #119					
MAILING ADDRESS					Receipt #	Amount
Change of Address	Austin TV 70705					
Change of Address	Austin, TX 78705				Date Processed	•
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Ms.	Holly E.				
NAME	-	- ,				
	NICKNAME	LAST			SUFFIX	
		Taylor				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP'	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	1101 W. 34th St. #119					
(Residence or Business)	Austin, TX 78705					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER	EXTENSION			
TREASURER	(512) 643-3637					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff	15th day after carr	npaign treasurer
		_			appointment (offic	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	TI	HROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024					
			General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
				Court of Criminal	Appeals, Presidi	ng Judge
				1		
	GO TO PAGE 2					
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	S	Versio	n V4.1.0.5dd2ace2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 22

L

13 C / OH NAME	Taylor, Holly E. (Ms.)		14 Filer ID 00088174	(Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	ROM candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.								
Additional Pages		COMMITTEE NAME							
	GENERAL	COMMITTEE ADDRESS							
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC	, , ,	\$ 22.90					
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	2)	\$ 2,085.21					
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES	5)	\$ 0.00					
	4. TOTAL POLIT		\$ 24,923.36						
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AST DAY OF THE	\$ 28,136.77						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	OF THE LAST DAY	\$ 20,250.00						
17 AFFIDAVIT		l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.							
			. Holly E. Taylor Candidate or Officeho	Ider					
AFFIX NO	TARY STAMP / SEAL AB	-							
			this the	dov					
		aid ertify which, witness my hand and seal of office.	, this the	day					
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath					
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2					

S	UBT	OTALS - JC/OH			CORM JC/OH SHEET PG 3 3 of 22
	ER NAM ylor, Ho	//E Dlly E. (Ms.)	19 Filer ID 0008817		Commission Filers)
		E SUBTOTALS SCHEDULE		S	UBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	1,317.00
2.	Х	\$	768.21		
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,919.75
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
8.	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				9,273.75
9.	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				11,729.86
10.		\$			
11.		\$			
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	2.43

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

2 FILER NAME Taylor, Holly E. (Ms.) 3 Filer ID (Ethics Commission Filers) 00088174 4 Date 10/27/2024 5 Full name of contributor out-of-state PAC (ID#:) Albright, Elizabeth 6 7 Amount of Contribution (\$) \$2.00 6 Contributor address; City; State; Zip Code 9 Contributor's Job Title n/a 7 10 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 11 10 Contributor is a child, law firm of parent(s) (if any) 11 Law firm of contributor's spouse (if any) 12 If contributor address; City; State; Zip Code San Diego, CA 92129 Amount of Contributor (\$) San Diego, CA 92129 Amount of Contributor Job Title
4 Date 5 Full name of contributor
10/27/2024 Albright, Elizabeth \$2.00 6 Contributor address; City; State; Zip Code \$2.00 Gibsonia, PA 15044 9 Contributor's Job Title n/a 10 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 0ut-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/29/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) San Diego, CA 92129 San Diego, CA 92129 San Diego, CA 92129 San Diego, CA 92129
6 Contributor address; City; State; Zip Code Gibsonia, PA 15044 Gibsonia, PA 15044 8 Contributor's Principal Occupation Not employed 9 10 Contributor's employer/law firm n/a n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor 10/29/2024 Full name of contributor Bharucha, Cyrus Amount of Contribution (\$) Contributor address; City; State; Zip Code \$100.00
Gibsonia, PA 15044 9 Contributor's Description 8 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 11 Law firm of contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) Bharucha, Cyrus Amount of Contribution (\$) \$100.00 Date Full name of contributor out-of-state PAC (ID#:) Bharucha, Cyrus Amount of Contribution (\$) \$100.00 San Diego, CA 92129 San Diego, CA 92129 San Diego, CA 92129
8 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 11 Law firm of contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code San Diego, CA 92129
8 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 11 Law firm of contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code San Diego, CA 92129
8 Contributor's Principal Occupation Not employed 9 Contributor's Job Title n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 11 Law firm of contributor's spouse (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code San Diego, CA 92129
Not employed n/a 10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Bharucha, Cyrus Contributor address; City; State; Zip Code Amount of Contribution (\$) San Diego, CA 92129 San Diego, CA 92129
10 Contributor's employer/law firm n/a 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8harucha, Cyrus \$100.00 Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 5an Diego, CA 92129
n/a 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Bharucha, Cyrus Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 San Diego, CA 92129
12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#:) 10/29/2024 Bharucha, Cyrus Amount of Contribution (\$) Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 San Diego, CA 92129
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 San Diego, CA 92129
10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 \$100.00
10/29/2024 Bharucha, Cyrus \$100.00 Contributor address; City; State; Zip Code \$100.00 San Diego, CA 92129 \$100.00
Contributor address; City; State; Zip Code San Diego, CA 92129
San Diego, CA 92129
Contributor's Principal Occupation Contributor's Job Title
Patent Attorney Patent Attorney
Contributor's employer/law firm Law firm of contributor's spouse (if any)
ASML
If contributor is a child, law firm of parent(s) (if any)
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
11/01/2024 Bonde, David \$20.00
Contributor address; City; State; Zip Code
Longmont, CO 80503
Contributor's Principal Occupation Contributor's Job Title Not employed n/a
Contributor's employer/law firm Law firm of contributor's spouse (if any)
n/a
If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruc	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 2/4 Rpt: 5/22
2 FILER NAME Taylor, Holly	E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088174	
4 Date 11/12/2024	5 Full name of contributor Out-of-state PAC (ID#:_ CWA - COPE PCC	7 Amount of Contribution (\$)\$750.00	
	6 Contributor address; City; State; Zip Code		
	Washington, DC 20001		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	bouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)	1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/04/2024	Campo, Wendy		\$40.00
	Contributor address; City; State; Zip Code Selma, TX 78154		
	Principal Occupation	Contributor's Job Title	
Not Employe		Not Employed	
Contributor's e No Employer	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/28/2024	Edwards, Kate		\$100.00
	Contributor address; City; State; Zip Code		
	Austin, TX 78751		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Art Historian	- Director	Executive Director + Cu	irator
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	ulpture Garden + Museum		
If contributor is	a child, law firm of parent(s) (if any)		
	oy Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.5dd2ace2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instru	ction Guide explains how to complet	1 Total pages Schedule A(J)1: Sch: 3/4 Rpt: 6/22					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Taylor, Holly	E. (Ms.)	00088174					
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of Contribution (\$)				
11/03/2024	Gilford, Dexter		\$100.00				
	6 Contributor address; City; State; Zip Code						
	Austin, TX 78749						
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•				
Attorney		Assistant District Attorn	ley				
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)				
Travis Count	iy						
12 If contributor is	s a child, law firm of parent(s) (if any)	ł					
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of Contribution (\$)				
10/27/2024	Hansen, Mike		\$100.00				
	Contributor address; City; State; Zip Code						
	Deerfield, IL 60015						
Contributor's F	Principal Occupation	Contributor's Job Title	•				
Not employe	d	n/a					
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)				
n/a							
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 (\$)				
10/28/2024	Wager, James		\$100.00				
	Contributor address; City; State; Zip Code						
	Philadelphia, PA 19147-5728						
Contributor's F	Principal Occupation	Contributor's Job Title					
Educator		Psychologist					
	employer/law firm	pouse (if any)					
SDP							
If contributor is	s a child, law firm of parent(s) (if any)						
	by Tayoo Ethico Commission	utu athiaa atata tu ua					

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 7/22 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Taylor, Holly E. (Ms.) 00088174 4 Date Amount of Contribution (\$) **5** Full name of contributor out-of-state PAC (ID#: 7 10/27/2024 \$5.00 Whitesell, Summer 6 Contributor address; City; State; Zip Code Seattle, WA 98125 Contributor's Job Title Contributor's Principal Occupation 8 9 Office Worker Transcript Processor 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Seattle Deposition Workers 12 If contributor is a child, law firm of parent(s) (if any)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/22			
2	FILER NAME			3	3 Filer ID (Ethics Commission Filers)		
	Taylor, Holly	y E. (Ms.)			00088174		
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	22.90			
5 Date 6 Full name of contributor Image: out-of-state PAC (ID#:					Amount of 9 In-kind contribution contribution (\$) description \$745.31 food, drinks, etc. for meet and greet		
		Richardson, TX 75081			Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			11 Employer (FOR NON	-JL	JDICIAL) (See instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)		
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

				EXPENDITU	RECATEGOR		ROX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Exper Gift/Awards/Memorial: Legal Services The Instruction G	ise s Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense pense /ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/4 Rpt: 9/22		Taylor, Hol	ly E. (Ms.)					00088174	
4	Date	5	Payee name	9						
	12/31/2024		ActBlue							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de			
	\$0.60		366 Summ	er St.						
			Somerville	MA 02144						
8	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Fees						de of Texas. Com	
	EXIENDITORE								officeholder living	expense
							credit card p	OCe	essing fees	
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	0	Office sou	ght		Office he	eld
	Date		Payee name	9						
	11/05/2024		Apex Cons	ulting						
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de			
	\$1,355.00		200 Rowla	-		•				
	+_,000.00		2001.011.0							
			Austin, TX	78745-2327						
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting	Expense					de of Texas. Com	
	-								officeholder living	expense
							campaign se	IVIC	es	
	Complete ONLY if direct			ficeholder name		Office sou	aht		Office he	ald
	expenditure to benefit C/OI		candidate/on				gn		Office fie	
-	Date		Payee name	<u>)</u>						
	12/31/2024			, / Engine, LLC						
-		-	-		Stata	Zip Co	de			
	Amount (\$) \$7.08		Payee addre		State;	∠ıµ C0	ue			
	Φ7.08		850 Quincy	/ SLINVV						
			Washingto	n, DC 20011-58	67					
-	PURPOSE	(a)		See Categories listed at		odule)	(b) Description			
	OF	(``'	Fees	bee Calegones listed at	ure top of this SCN	euule)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE								officeholder living	
							credit card p	OCe	essing fees	
	Complete ONLY if direct		Candidate/Of	ficeholder name	C	Office sou	ght		Office he	eld
	expenditure to benefit C/OI	Н								

Advertising Expense Accounting/Banking Consulting 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: 2/4 Rpt: 10/22	Taylor, Holly E. (Ms.) 00088174
4 Date	5 Payee name
11/22/2024	Intuit Mailchimp
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$28.25	405 N. Angier Ave.
	Atlanta, GA 30324
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
	email processing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/23/2024	Intuit Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$28.25	405 N. Angier Ave.
Ψ20.20	- too tw. / wight / we.
	Atlanta, GA 30324
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
	email processing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Dette	
Date	Payee name
10/28/2024	Lashelle Scott
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2277 Winrock #322
	Houston, TX 77057
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	social media advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 3/4 Rpt: 11/22	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Taylor, Holly E. (Ms.) 00088174						
4	Date	5 Payee name						
	11/18/2024	SquareSpace, Inc.						
6	Amount (\$) \$84.52	7 Payee address; City; State; Zip Code 225 Varick St. 12th Fl. New York, NY 10014						
		New TOIK, NT 10014						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website hosting 						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	12/06/2024	SquareSpace, Inc.						
_	Amount (\$)	Payee address; City; State; Zip Code						
	\$60.00	225 Varick St. 12th Fl. New York, NY 10014						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense domain hosting 						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	12/31/2024	Stripe, Inc.						
	Amount (\$) \$1.11	Payee address; City; State; Zip Code 185 Berry St						
		San Francisco, CA 94107						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense credit card processing fees 						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expens y - Gift/Awards/Memorials Expense Printing Expens	nt/Reimbursement Solicitation/Fundraising Expense d/Rental Expense Transportation Equipment & Related Expense e Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)
	· · · ·	
1 Total pages Schedule F1: Sch: 4/4 Rpt: 12/22	Z FILER NAME Taylor, Holly E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088174
4 Date	5 Payee name	
11/04/2024	Two Four Consulting	
6 Amount (\$) \$200.00	 Payee address; City; State; Zip Code 1013 West Ellaine Ave. Pasadena, TX 77506 	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
10/29/2024	Y-Strategy LLC	
Amount (\$) \$1,904.94	Payee address; City; State; Zip Code 3110 Manor Rd., Ste. H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense push cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve - Gift/Award	rage Expense s/Memorials Expense	Loan Repay	ment/Re nead/Rer ense ense	imbursement ntal Expense	Tra Tra Tra	icitation/Fundraising E nsportation Equipmer vel in District vel Out of District HER (enter a category	t & Related	
		The Inst	ruction Guide explains h							
1	Total pages Schedule F4:	2 FILER NAME						3 Filer ID (Ethic	s Commis	sion Filers)
	Sch: 1/5 Rpt: 13/22	Taylor, Holly E. (Ms	5.)					00088174		
4	CREDIT CARD		ncial institution	5 T(OTAL (OF UNITEMIZE	D			
	ISSUER	Bar	E) Cl	EXPENDITURES CHARGED TO A CREDIT CARD			\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) D	ate(s)	Credit Card Iss	uer	Paid		
		\$163.95	11/02/2024	12/1	L0/202	24				
7	PAYEE	(a) Payee name		(b) P	ayee a	address;		City,	State,	Zip Code
				194	6 E. H	lwy 31				
		Comfort Inn Corsica	ana East							
				Corsicana, TX 75110						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		(b) D	(b) Description					
	EXPENDITURE			hote	hotel for campaign event					
	X Political	Travel In District								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Г	Check if Austin,	TX, c	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice soug	ht L			Office held		
	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) D	ate(s)	Credit Card Iss	uer	Paid		
		\$28.00	11/02/2024	12/1	10/202	24				
		+_0.00								
	PAYEE	(a) Payee name		(b) P	ayee a	address;		City,	State,	Zip Code
				723	3 Gas	ton Ave.				
		Whip-In #6132								
				Dall	as, T>	(75214				
	PURPOSE OF	(a) Category			escrip					
		(See Categories listed at the top of this schedule) Transportation Equipment And Related		gas to attend campaign event						
	X Political	Expense								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	[Check if Austin,	TX, c	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice soug	ht			Office held		
е	xpenditure to benefit C/OH			_						
	PAYMENT	(a) Amount Charged	(b) Date of Charge			Credit Card Iss	uer	Paid		
		\$630.00	10/28/2024	12/1	10/202	24				
	PAYEE	(a) Payee name		(b) P	ayee a	address;		City,	State,	Zip Code
		Google, Inc.		160	0 Amp	phitheatre Pkv	vy.			
		Google, Inc.								
						View, CA 940)43			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		escript		~			
	_	Advertising Expense		SOCI	social media advertising					
	X Political									
	Non-Political		of Texas. Complete Schedule			Check if Austin,	TX, c	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice soug	ht			Office held		
e	xpenditure to benefit C/OH									

EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense Is/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising I Transportation Equipmer Travel in District Travel Out of District OTHER (enter a categor	nt & Related I		
	The Inst	ow to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)	
Sch: 2/5 Rpt: 14/22	Taylor, Holly E. (Ms	s.)		00088174			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED				
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	⊤ \$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid			
	\$1,000.00	10/29/2024	12/10/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Google, Inc.		1600 Amphitheatre Pkwy	<i>y</i> .			
			Mountain View, CA 94043				
8 PURPOSE OF	(a) Category	of this school (a)	(b) Description				
	(See Categories listed at the top of this schedule) Advertising Expense		social media advertising				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living exp	ense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 12/10/2024	er Paid			
	\$1,000.00	10/30/2024	12/10/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Caasia ina		1600 Amphitheatre Pkw	/.			
	Google, Inc.						
			Mountain View, CA 9404	13			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Advertising Expense		social media advertising				
X Political							
Non-Political		of Texas. Complete Schedule		X, officeholder living exp	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held			
expenditure to benefit C/OH	(a) Amount Charges	(b) Data of Charge	(a) Data(a) Credit Const Loss	or Doid			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 12/10/2024				
	\$1,500.00	10/31/2024					
PAYEE			(b) Davias address:	City	Ctot-	Zip Code	
FAILE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Google, Inc.		1600 Amphitheatre Pkwy	y.			
			Mountain View, CA 9404	13			
PURPOSE OF	(a) Category		(b) Description	ro			
EXPENDITURE	(See Categories listed at the top	of this schedule)	social media advertising				
X Political	Advertising Expense						
Non-Political		of Texas. Complete Schedule		X, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	Office held			
expenditure to benefit C/OH							

EXPENDITURE CATEGORIES FOR BOX 10(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising E Transportation Equipmer Travel in District Travel Out of District OTHER (enter a categor	t & Related I				
	The Inst	ow to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)			
Sch: 3/5 Rpt: 15/22	Taylor, Holly E. (Ms	5.)		00088174					
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED						
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	⊤ \$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
	\$1,168.68	11/01/2024	12/10/2024						
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Google, Inc.		1600 Amphitheatre Pkwy	у.					
			Mountain View, CA 9404						
8 PURPOSE OF	(a) Category	of this school (10)	(b) Description						
	(See Categories listed at the top of this schedule) Advertising Expense		social media advertising						
X Political									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T.	X, officeholder living exp	ense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
	\$43.00	11/01/2024	12/10/2024						
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
	Chayman #277276		2417 State Hwy. 71						
	Chevron #377276								
			Columbus, TX 78934						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Transportation Equip		gas to attend campaign	event					
X Political	Expense								
Non-Political		of Texas. Complete Schedule		X, officeholder living exp	ense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held					
expenditure to benefit C/OH		(b) Data of Charge	(a) Data(a) Cradit Card Jacu	an Daid					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 12/10/2024	er Pald					
	\$500.00	11/02/2024							
PAYEE				City	Ctata	Zin Cada			
PATEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	Google, Inc.		1600 Amphitheatre Pkw	у.					
			Mountain View, CA 9404	13					
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top	of this schedule)	social media advertising						
X Political	Advertising Expense								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held					
expenditure to benefit C/OH									

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising B Transportation Equipmen Travel in District Travel Out of District OTHER (enter a categor	nt & Related			
The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 4/5 Rpt: 16/22	Taylor, Holly E. (Ms	5.)		00088174				
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE					
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	91T \$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$500.00	11/03/2024	12/10/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Google, Inc.		1600 Amphitheatre Pkw	/y.				
			Mountain View, CA 94043					
8 PURPOSE OF	(a) Category	of this school (10)	(b) Description					
	(See Categories listed at the top of this schedule) Advertising Expense		social media advertising					
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exp	ense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 12/10/2024	uer Paid				
	\$1,000.00	11/04/2024	12/10/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
			1600 Amphitheatre Pkw		,	p =		
	Google, Inc.							
			Mountain View, CA 94043					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	social media advertising	9				
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	r name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$46.25	11/04/2024	12/10/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
		1000	1003 E Criner St.					
	Shell Oil #57545931909							
			Grandview, TX 76050					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Transportation Equip Expense		gas to attend campaign	event				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exp	ense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Award	erage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a				
	The Inst	ow to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commis	sion Filers)			
Sch: 5/5 Rpt: 17/22	Taylor, Holly E. (Ms	5.)		00088174				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZED					
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREDI CARD	т \$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid				
	\$1,500.00	11/05/2024	12/10/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code			
	Google, Inc.		1600 Amphitheatre Pkwy	у.				
			Mountain View, CA 94043					
8 PURPOSE OF	(a) Category		(b) Description					
	(See Categories listed at the top of this schedule) Advertising Expense		social media advertising					
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid				
	\$48.50	11/05/2024	12/10/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State,	Zip Code			
	Circle 14 #2740024		9697 San Pedro Ave.					
	Circle K #2740924							
			San Antonio, TX 78216-	4431				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	Transportation Equip		gas to attend campaign	event				
X Political	Expense							
Non-Political		of Texas. Complete Schedule		X, officeholder living expense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held				
expenditure to benefit C/OH	(a) Amount Charged	(b) Data of Charge	(a) Data(a) Cradit Card Jacu	or Doid				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Pald				
	\$145.37	12/01/2024						
PAYEE			(b) Payee address;	City, State,	Zip Code			
	(a) Payee name		1600 Amphitheatre Pkwy		Zip Code			
	Google, Inc.		1000 Amphilitealle Pkwy	y.				
			Mountain View, CA 9404	13				
PURPOSE OF	(a) Category		(b) Description	10				
EXPENDITURE	(See Categories listed at the top	of this schedule)	social media advertising					
X Political	Advertising Expense							
Non-Political		of Texas. Complete Schedule		X, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	Office held				
expenditure to benefit C/OH								

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling /- Gift/Awards/Memorials Expense Printing	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 1/2 Rpt: 18/22	2 FILER NAME Taylor, Holly E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088174
4 Date 11/21/2024	5 Payee name Bank of America	
6 Amount (\$) \$200.00 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C PO Box 15284 Wilmington, DE 19850 	code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense payment of credit card bill for credit card expenditures
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
11/10/2024	Barclays	
Amount (\$) \$1,892.06	Payee address; City; State; Zip C PO Box 60517	code
x political contributions intended	City of Industry, CA 91716-0517	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense payment of credit card bill for credit card expenditures
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Barclays	
Amount (\$) \$9,282.18	Payee address; City; State; Zip C PO Box 60517	code
X Reimbursement from political contributions intended	City of Industry, CA 91716-0517	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense payment of credit card bill for credit card expenditures
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held

POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Ex g - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solicitation/Fundraising Expense erhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District xpense Travel Out of District Vages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 2/2 Rpt: 19/22	2 FILER NAME Taylor, Holly E. (Ms.)	3 Filer ID (Ethics Commission Filers) 00088174
4 Date 11/01/2024	5 Payee name Chase Bank	
6 Amount (\$) \$174.85	 Payee address; City; State; Zip Co PO Box 15298 	de
X Reimbursement from political contributions intended	Wilmington, DE 19850-5298	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense payment of credit card bill for credit card expenditures
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Chase Bank	
Amount (\$) \$180.77	Payee address; City; State; Zip Co PO Box 15298	de
X Reimbursement from political contributions intended	Wilmington, DE 19850-5298	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense payment of credit card bill for credit card expenditures
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ctio	on Guide explains how to complete this form.			pages Schedule K: 1/1 Rpt: 20/22	
2				D (Ethics Commission Filers	5)		
	Taylor, Holly E. (Ms.) 0			0008	8174		
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	11/27/2024		Frost Bank			\$1	.38
		6	Address of person from whom amount is received; City; State; Zip Code				
			Austin, TX 78767				
		7		olitic	cal con	tribution returned to filer	
			Interest				
	Date		Name of person from whom amount is received			Amount (\$)	
	12/26/2024		Frost Bank			\$1	.05
			Address of person from whom amount is received; City; State; Zip Code				
			Auctin TV 70767				
		_	Austin, TX 78767 Purpose for which amount is received Check if po			tribution not model to film	
			Interest	JIIIIC	car con	tribution returned to filer	
-							

OUTSTANDING LOANS		SCHEDULE L
The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 21/22
2 FILER NAME Taylor, Holly E. (Ms.)		3 Filer ID (Ethics Commission Filers) 00088174
LENDER	 4 Name of lender Taylor, Holly (Ms.) 5 Lender address; City; State; Zip Code 	
	Austin, TX 78705	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	

TEXT ANNOTATION

Sch: 1/1 Rpt: 22/22

FILER NAME	Filer ID (Ethics Commission Filers)
Taylor, Holly E. (Ms.)	00088174
Schedule	

A(J)1

Information entered by filer as a memo:

Credit card processing fees are reported either as a lump-sum in-kind donation (for donors who chose to pay the fees on top of their desired donation amount), or as a lump-sum expense per credit card processor (for donors who chose to have the fees deducted from their contribution).