### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 1

| The JC/OH Instruction   | Guide explains how to complete t | his form. 1 Filer ID<br>(Ethics Cor<br>000613 | nmission Filers)<br>94 | 2 Total pages filed:<br>9              |  |  |  |  |
|-------------------------|----------------------------------|---|------------------------|--|--|--|--|--|
| 3 CANDIDATE /           | MS / MRS / MR FIR                | ST  | MI                     | OFFICE USE ONLY                        |  |  |  |  |
| OFFICEHOLDER            | Ms. Viv                          | an R.   |                        |  |  |  |  |  |
| NAME                    |                                  |   |                        | Date Received                          |  |  |  |  |
|                         |                                  |   |                        | ELECTRONICALLY FILED                   |  |  |  |  |
|                         | NICKNAME LAS                     | Т   | SUFFIX                 | . 01/14/2025                           |  |  |  |  |
|                         | Kin                              |   | 001101                 |  |  |  |  |  |
|                         |                                  | 3   |                        |  |  |  |  |  |
| 4 CANDIDATE /           | ADDRESS / PO BOX; APT / SUI      | TE #; CITY;                                   | ZIP CODE               | Date Hand-delivered or Date Postmarked |  |  |  |  |
| OFFICEHOLDER            | 2202 Alabama St.                 |   |                        |  |  |  |  |  |
| MAILING<br>ADDRESS      | Ste. A                           |   |                        | Receipt # Amount                       |  |  |  |  |
| I                       |                                  |   |                        |  |  |  |  |  |
| Change of Address       | Houston, TX 77004                |   |                        | Date Processed                         |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         |                                  |   |                        | Date Imaged                            |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
| 5 CAMPAIGN              | MS/MRS/MR FIRS                   | ст.   |                        | MI                                     |  |  |  |  |
| TREASURER               |                                  |   |                        |  |  |  |  |  |
| NAME                    | Mr. Joh                          | 1 L.  |                        |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         | NICKNAME LAS                     | Т   |                        | SUFFIX                                 |  |  |  |  |
|                         | Gre                              | en, ATTY, CPA, PhD                            |                        |  |  |  |  |  |
|                         |                                  | ,   |                        |  |  |  |  |  |
| <b>0</b>                |                                  |   |                        |  |  |  |  |  |
| 6 CAMPAIGN<br>TREASURER | STREET ADDRESS (NO PO BOX        | PLEASE); A                                    | APT / SUITE #; CITY;   | STATE; ZIP CODE                        |  |  |  |  |
| ADDRESS                 | 4888 Loop Central Dr.            |   |                        |  |  |  |  |  |
| (Desidence en Dusinese) | Ste. 445                         |   |                        |  |  |  |  |  |
| (Residence or Business) | Houston, TX 77081                |   |                        |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
| 7 CAMPAIGN              | AREA CODE PHONE NU               | MBER EXTENSION                                |                        |  |  |  |  |  |
| TREASURER               | (713) 660-7400                   |   |                        |  |  |  |  |  |
| PHONE                   | (113) 000-1400                   |   |                        |  |  |  |  |  |
| 8 REPORT                |                                  |   |                        |  |  |  |  |  |
| TYPE                    | January 15 30                    | )th day before election                       | Runoff                 | 15th day after campaign treasurer      |  |  |  |  |
|                         |                                  |   | Runon                  | appointment (officeholder only)        |  |  |  |  |
|                         | July 15                          | h day before election                         | Exceeded modified X    | Final Report (Attach C/OH-FR)          |  |  |  |  |
|                         |                                  |   | reporting limit        |  |  |  |  |  |
|                         | Month Day Maar                   |   | Manth Dav              | Maar                                   |  |  |  |  |
| 9 PERIOD<br>COVERED     | Month Day Year                   | TUDOUQU                                       | Month Day              | Year<br>-                              |  |  |  |  |
| OOVERLED                | 10/27/2024                       | THROUGH                                       | 01/14/202              | 5                                      |  |  |  |  |
|                         |                                  | -   |                        |  |  |  |  |  |
| 10 ELECTION             | ELECTION DATE                    |   | ELECTION TYPE          |  |  |  |  |  |
|                         | Month Day Year                   | Primary                                       | Runoff                 | Other                                  |  |  |  |  |
|                         | 11/05/2024                       |   |                        |  |  |  |  |  |
|                         |                                  | X General                                     | Special                |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
| 11 OFFICE               | OFFICE HELD (if any)             |   | 12 OFFICE SOUGHT       | (if known)                             |  |  |  |  |
|                         | None Harris                      |   | Criminal District      | Court Judge Place 486th District       |  |  |  |  |
|                         |                                  |   | Harris Coun            |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
|                         |                                  | GO TO PAGE                                    | 2                      |  |  |  |  |  |
|                         |                                  |   |                        |  |  |  |  |  |
| Forms provided by Te    | exas Ethics Commission           | www.ethics.state.tx                           | (.uS                   | Version V4.1.0.5dd2ace2                |  |  |  |  |

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 9

T

| 13 C / OH NAME                                 | King, Vivian R. (Ms.)            |   | 14 Filer ID (<br>00061394 | (Ethics Commission Filers) |  |  |  |  |
|--|----------------------------------|---|---------------------------|----------------------------|--|--|--|--|
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) | candidate / officeholder.        | political contributions accepted or political expenditu<br>These expenditures may have been made without t<br>officeholders are required to report this information | he candidate's or office  | eholder's knowledge or     |  |  |  |  |
| Additional Pages                               |                                  | COMMITTEE NAME  |                           |                            |  |  |  |  |
|  | GENERAL                          | COMMITTEE ADDRESS   |                           |                            |  |  |  |  |
|  | SPECIFIC                         |   |                           |                            |  |  |  |  |
|  |                                  | COMMITTEE CAMPAIGN TREASURER NAME   |                           |                            |  |  |  |  |
|  |                                  | COMMITTEE CAMPAIGN TREASURER ADDRES   | S                         |                            |  |  |  |  |
| 16 CONTRIBUTION<br>TOTALS                      |                                  | ZED POLITICAL CONTRIBUTIONS(OTHER THAN<br>ES OF LOANS, OR CONTRIBUTIONS MADE ELEC   |                           | <b>\$</b> 0.00             |  |  |  |  |
|  |                                  | ICAL CONTRIBUTIONS  | 5)                        | <b>\$</b> 2,604.36         |  |  |  |  |
| EXPENDITURE<br>TOTALS                          |                                  |   |                           |                            |  |  |  |  |
|  |                                  | <b>\$</b> 12,344.70   |                           |                            |  |  |  |  |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITIC<br>REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE LA  | AST DAY OF THE            | \$ 0.00                    |  |  |  |  |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIP<br>OF THE REPOR | AL AMOUNT OF ALL OUTSTANDING LOANS AS<br>TING PERIOD  | OF THE LAST DAY           | <b>\$</b> 0.00             |  |  |  |  |
| 17 AFFIDAVIT                                   | •                                |   |                           |                            |  |  |  |  |
|  |                                  | I swear, or affirm, under penalty<br>true and correct and includes al<br>under Title 15, Election Code.   |                           |                            |  |  |  |  |
|  |                                  | Ms.   | . Vivian R. King          |                            |  |  |  |  |
|  |                                  | Signature of  | Candidate or Officehol    | der                        |  |  |  |  |
| AFFIX NO                                       | AFFIX NOTARY STAMP / SEAL ABOVE  |   |                           |                            |  |  |  |  |
|  | •                                | aid   | , this the                | day                        |  |  |  |  |
| of   | , 20, to ca                      | ertify which, witness my hand and seal of office.   |                           |                            |  |  |  |  |
| Signature of offic                             | er administering oath            | Printed name of officer administering oath  | Title of office           | r administering oath       |  |  |  |  |
| Forms provided by Tex                          | xas Ethics Commission            | www.ethics.state.tx.us  |                           | Version V4.1.0.5dd2ace2    |  |  |  |  |

| S   | UBT                  | OTALS - JC/OH  | C                       |            | RM JC/OH<br>HEET PG 3<br>3 of 9 |
|-----|----------------------|--|-------------------------|------------|---------------------------------|
|     | .ER NAM<br>ng, Vivia | IE<br>an R. (Ms.)  | 19 Filer ID<br>00061394 | (Ethics Co | mmission Filers)                |
|     |                      | E SUBTOTALS<br>SCHEDULE  |                         | SUBT       | OTAL AMOUNT                     |
| 1.  | Х                    | SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)                    |                         | \$         | 2,604.36                        |
| 2.  |                      | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |                         | \$         |                                 |
| 3.  |                      | SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                |                         | \$         |                                 |
| 4.  |                      | SCHEDULE E(J): LOANS (JUDICIAL)  |                         | \$         |                                 |
| 5.  | Х                    | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS               | 5                       | \$         | 5,156.00                        |
| 6.  |                      | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       |                         | \$         |                                 |
| 7.  |                      | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO                | DNS                     | \$         |                                 |
| 8.  |                      | \$   |                         |            |                                 |
| 9.  | Х                    | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                         |                         | \$         | 7,188.70                        |
| 10. |                      | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (               | OF C/OH                 | \$         |                                 |
| 11. |                      | \$   |                         |            |                                 |
| 12. |                      | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F<br>TO FILER | RETURNED                | \$         |                                 |
|     |                      |  |                         |            |                                 |

## MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

| The Instrue          | ction Guide explains how to complete th       | is form.                       | 1 Total pages Schedule A(J)1:<br>Sch: 1/2 Rpt: 4/9 |
|----------------------|---|--------------------------------|--|
| 2 FILER NAME         |   |                                | <b>3</b> Filer ID (Ethics Commission Filers)       |
| King, Vivian         | R. (Ms.)                                      | 00061394                       |  |
| 4 Date               | 5 Full name of contributor out-of-state PAC ( | ID#:)                          | 7 Amount of Contribution (\$)                      |
| 11/05/2024           | Davis, Algenita                               |                                | \$100.00   |
|                      | 6 Contributor address; City; State; Zip Code  |                                |  |
|                      |   |                                |  |
|                      | Houston, TX 77021                             |                                |  |
| 8 Contributor's F    | Principal Occupation                          | 9 Contributor's Job Title      |  |
| Lawyer               |   |                                |  |
| 10 Contributor's e   | employer/law firm                             | 11 Law firm of contributor's s | pouse (if any)                                     |
| Retired              |   |                                |  |
| 12 If contributor is | s a child, law firm of parent(s) (if any)     |                                |  |
|                      |   |                                |  |
| Date                 |   | ID#:)                          | Amount of Contribution (\$)                        |
| 10/28/2024           | Dorsey, Morgan                                |                                | \$205.00   |
|                      | Contributor address; City; State; Zip Code    |                                |  |
|                      |   |                                |  |
|                      | Houston, TX 77004                             |                                |  |
| Contributor's F      | Principal Occupation                          | Contributor's Job Title        |  |
| Advertising          |   | Ex. Asst. Adverising           |  |
| Contributor's e      | employer/law firm                             | Law firm of contributor's s    | pouse (if any)                                     |
| GMMB                 |   |                                |  |
| 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           | King, Richard                                 |                                | \$1,599.36   |
|                      | Contributor address; City; State; Zip Code    |                                |  |
|                      |   |                                |  |
|                      | Houston, TX 77004                             |                                |  |
| Contributor's F      | Principal Occupation                          | Contributor's Job Title        |  |
| Operations C         |   | Operations Officer             |  |
| Contributor's e      | employer/law firm                             | Law firm of contributor's s    | pouse (if any)                                     |
| United Airline       | es  |                                |  |
| If contributor is    | s a child, law firm of parent(s) (if any)     |                                |  |
|                      |   |                                |  |
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|                      |   |                                |  |
|                      |   |                                |  |
| L<br>Forms provided  | hy Texas Ethics Commission www.e              | thics state ty us              | Version VA 1.0 5dd2ace2                            |

## MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

| The Instru      | ction Guide explains how to complete this        | form.  | 1 Total pages Schedule A(J)1:<br>Sch: 2/2 Rpt: 5/9 |
|-----------------|--|--|--|
| 2 FILER NAME    |  | <b>3</b> Filer ID (Ethics Commission Filers) |  |
| King, Vivian    | R. (Ms.)   | 00061394                                     |  |
| 4 Date          | 5 Full name of contributor out-of-state PAC (ID# | 7 Amount of Contribution (\$)                |  |
| 11/22/2024      | Mosqueda, Veronica                               | \$200.00                                     |  |
|                 | 6 Contributor address; City; State; Zip Code     |  |  |
|                 |  |  |  |
|                 |  |  |  |
|                 | Houston, TX 77066                                |  |  |
| 8 Contributor's | Principal Occupation                             | 9 Contributor's Job Title                    |  |
| Financial Sp    |  | Financial Specialist                         |  |
|                 | employer/law firm                                | 11 Law firm of contributor's sp              | oouse (if any)                                     |
| HCDAO           |  |  |  |
|                 | s 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      | Williams, Elise                                  |  | \$500.00   |
|                 | Contributor address; City; State; Zip Code       |  |  |
|                 |  |  |  |
|                 |  |  |  |
|                 | Houston, TX 77004                                |  |  |
| Contributor's   | Principal Occupation                             | Contributor's Job Title                      |  |
| Retired         |  | Retired                                      |  |
| Contributor's   | employer/law firm                                | Law firm of contributor's sp                 | oouse (if any)                                     |
| Retired         |  |  |  |
| If contributor  | is a child, law firm of parent(s) (if any)       |  |  |
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| POLITICAL EXPENDITURES FROM POLITICAL |
|---------------------------------------|
| CONTRIBUTIONS                         |

#### SCHEDULE F1

|   | EXPENDITURE CATEGORIES FOR BOX 8(a)   |     |  |                |            |                 |       |  |                            |
|---|---|-----|--|----------------|------------|-----------------|-------|--|----------------------------|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |     | Event Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense           Fees         Office Overhead/Rental Expense         Transportation Equipment & Relate           Food/Beverage Expense         Polling Expense         Travel in District           Glft/Awards/Memorials Expense         Printing Expense         Travel out of District |                |            |                 |       | quipment & Related Expense<br>trict        |                            |
| 1 | Total pages Schedule F1:  | 2   | FILER NAME   |                |            |                 | 3     | Filer ID                                   | (Ethics Commission Filers) |
|   | Sch: 1/2 Rpt: 6/9   |     | King, Vivian R. (Ms.)  |                |            |                 |       | 00061394                                   |                            |
| 4 | Date  | 5   | Payee name   |                |            |                 |       |  |                            |
|   | 11/01/2024  |     | ABC Canvassing   |                |            |                 |       |  |                            |
| 6 | Amount (\$)   | 7   | Payee address; City;   | State;         | Zip Co     | le              |       |  |                            |
|   | \$2,000.00  |     | 6111 Wortham Way   |                |            |                 |       |  |                            |
|   |   |     |  |                |            |                 |       |  |                            |
|   |   |     | Houston, TX 77033  |                |            |                 |       |  |                            |
| 8 | PURPOSE   | (a) | Category (See Categories listed at the top   | p of this sche | edule)     | (b) Description |       |  |                            |
|   | OF<br>EXPENDITURE   |     | Polling Expense  |                | ,          | Check if travel | outsi | ide of Texas. Com                          | plete Schedule T.          |
|   | EXPENDITORE   |     |  |                |            |                 | , TX, | , officeholder living                      | expense                    |
|   |   |     |  |                |            | Poll Workers    |       |  |                            |
|   |   |     |  |                |            |                 |       |  |                            |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O   |     | Candidate/Officeholder name  | C              | Office sou | ht              |       | Office he                                  | eld                        |
|   | Date  |     | Payee name   |                |            |                 |       |  |                            |
|   | 10/30/2024  |     | Blake, Gloria  |                |            |                 |       |  |                            |
|   | Amount (\$)   | ┝   | Payee address; City;   | State:         | Zip Co     | le              |       |  |                            |
|   | \$288.00  |     | 7413 Parker Rd   | otato,         | 2.0 000    |                 |       |  |                            |
|   | φ200.00   |     | 1413 Faikei Ku   |                |            |                 |       |  |                            |
|   |   |     | Houston, TX 77016  |                |            |                 |       |  |                            |
|   | PURPOSE<br>OF<br>EXPENDITURE  | (a) | Category (See Categories listed at the top<br>Polling Expense  | p of this sche | edule)     |                 |       | ide of Texas. Com<br>, officeholder living |                            |
|   |   |     |  |                |            |                 |       |  |                            |
|   | Complete ONLY if direct expenditure to benefit C/O  |     | Candidate/Officeholder name  | C              | )ffice sou | ht              |       | Office he                                  | eld                        |
| ⊢ | Date  |     | Payee name   |                |            |                 |       |  |                            |
|   | 11/01/2024  |     | Blake, Gloria  |                |            |                 |       |  |                            |
| - |   | -   |  | State:         | Zip Co     | 10              |       |  |                            |
|   | Amount (\$)<br>\$948.00   |     |  | Siale,         |            | ie              |       |  |                            |
|   | \$948.00  |     | 7413 Parker Rd   |                |            |                 |       |  |                            |
|   |   |     | Houston, TX 77016  |                |            |                 |       |  |                            |
|   | PURPOSE   | (a) | Category (See Categories listed at the top   | p of this sche | edule)     | (b) Description |       |  |                            |
|   | OF<br>EXPENDITURE   |     | Polling Expense  |                |            |                 |       | ide of Texas. Com                          |                            |
|   |   |     |  |                |            |                 | , TX, | , officeholder living                      | expense                    |
|   |   |     |  |                |            | Poll Workers    |       |  |                            |
|   |   |     |  |                |            |                 |       |  |                            |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/OF  |     | Candidate/Officeholder name  | C              | Office sou | ht              |       | Office he                                  | eld                        |
|   |   |     |  |                |            |                 |       |  |                            |
|   |   |     |  |                |            |                 |       |  |                            |

| POLITICAL EXPENDITURES FROM POLITICAL |
|---------------------------------------|
| CONTRIBUTIONS                         |

#### SCHEDULE F1

|   |   |          |  | EXPENDITU    | JRE CATEGOR            | RIES FOR    | во                         | X 8(a)       |        |                     |                            |
|---|---|----------|--|--------------|------------------------|-------------|----------------------------|--------------|--------|---------------------|----------------------------|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |          | - Gift/Awards/Memorials Expense Polling Expense Travel in District Travel out of District Travel Out of District |              |                        |             | quipment & Related Expense |              |        |                     |                            |
| 1 | Total pages Schedule F1:  | 2        | FILER NAME   |              |                        |             |                            |              | 3      | Filer ID            | (Ethics Commission Filers) |
|   | Sch: 2/2 Rpt: 7/9   |          | King, Vivian   | R. (Ms.)     |                        |             |                            |              |        | 00061394            |                            |
| 4 | Date  | 5        | Payee name   |              |                        |             |                            |              |        |                     |                            |
|   | 11/05/2024  |          | Blake, Gloria  | l            |                        |             |                            |              |        |                     |                            |
| 6 | Amount (\$)   | 7        | Payee addres   | s; City;     | State;                 | ; Zip Co    | de                         |              |        |                     |                            |
|   | \$1,208.00  |          | 7413 Parker  | Rd           |                        |             |                            |              |        |                     |                            |
|   |   |          |  |              |                        |             |                            |              |        |                     |                            |
|   |   |          | Houston, TX  | 77016        |                        |             |                            |              |        |                     |                            |
|   | DUDDOSE   | <u> </u> |  |              |                        | r           | (h)                        | <u> </u>     |        |                     |                            |
| 8 | PURPOSE<br>OF   |          |  |              | at the top of this sch | edule)      | (u)                        | Description  | outeir | de of Texas. Com    | nlete Schedule T           |
|   | EXPENDITURE   |          | Polling Expe   | nse          |                        |             |                            |              |        | officeholder living |                            |
|   |   |          |  |              |                        |             |                            | Poll Workers | ,,     |                     |                            |
|   |   |          |  |              |                        |             |                            |              |        |                     |                            |
| 9 | Complete ONLY if direct   |          | andidate/Offic   | eholder name | C                      | Office sour | aht                        |              |        | Office he           | eld                        |
| - | expenditure to benefit C/OF   |          |  |              |                        |             | 5                          |              |        |                     |                            |
|   | Date  |          | Payee name   |              |                        |             |                            |              |        |                     |                            |
|   | 11/13/2024  |          | Hightower, F   | ohert        |                        |             |                            |              |        |                     |                            |
|   |   |          | •  |              |                        | 7: 0        |                            |              |        |                     |                            |
|   | Amount (\$)   |          | Payee addres   |              | State;                 | ; Zip Co    | de                         |              |        |                     |                            |
|   | \$512.00  |          | 7413 Parker  | Rd           |                        |             |                            |              |        |                     |                            |
|   |   |          | Houston, TX  | 77016        |                        |             |                            |              |        |                     |                            |
|   | PURPOSE   | <u> </u> |  |              |                        |             | (h)                        | Description  |        |                     |                            |
|   | OF  |          | Advertising E  |              | at the top of this sch | edule)      | (5)                        |              | outsio | de of Texas. Com    | plete Schedule T.          |
|   | EXPENDITURE   |          | Auventising  | zpense       |                        |             |                            |              |        | officeholder living |                            |
|   |   |          |  |              |                        |             |                            | Take down al | ll 4>  | 4 campaigr          | n signs                    |
|   |   |          |  |              |                        |             |                            |              |        |                     |                            |
|   | Complete ONLY if direct   | C        | andidate/Offic   | eholder name | C                      | Office sou  | ght                        |              |        | Office he           | eld                        |
|   | expenditure to benefit C/OF   | Н        |  |              |                        |             |                            |              |        |                     |                            |
|   | Date  |          | Payee name   |              |                        |             |                            |              |        |                     |                            |
|   | 11/05/2024  |          | Our Legends  | 5            |                        |             |                            |              |        |                     |                            |
|   | Amount (\$)   |          | Payee addres   | s; City;     | State:                 | ; Zip Co    | de                         |              |        |                     |                            |
|   | \$200.00  |          | 5312 Almeda  |              |                        |             |                            |              |        |                     |                            |
|   | +=00.00   |          |  |              |                        |             |                            |              |        |                     |                            |
|   |   |          | Houston, TX  | 77004        |                        |             |                            |              |        |                     |                            |
|   | PURPOSE   |          |  |              |                        |             | (h)                        | Description  |        |                     |                            |
|   | OF  |          | Event Expen  |              | at the top of this sch | edule)      | (5)                        |              | outsio | de of Texas. Com    | plete Schedule T.          |
|   | EXPENDITURE   |          | Event Expen  | 36           |                        |             |                            |              |        | officeholder living |                            |
|   |   |          |  |              |                        |             | l                          | Election Day |        |                     |                            |
|   |   |          |  |              |                        |             |                            | ,            |        |                     |                            |
| - | Complete ONLY if direct   | L        | andidate/Offic   | eholder name | C                      | Office sou  | ght                        |              |        | Office he           | eld                        |
|   | expenditure to benefit C/OF   |          |  |              |                        |             | <b>-</b>                   |              |        |                     |                            |
| - |   |          |  |              |                        |             |                            |              |        |                     |                            |
|   |   |          |  |              |                        |             |                            |              |        |                     |                            |

| POLITICAL EX  | POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G                            |   |   |  |  |  |  |  |
|---|--|---|---|--|--|--|--|--|
| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made B<br>Candidate/Officeholder/Politic<br>Credit Card Payment   | Fees C<br>Food/Beverage Expense P<br>y - Gift/Awards/Memorials Expense P         | oan Repayment/Reimbursement<br>Office Overhead/Rental Expense<br>Volling Expense<br>Vrinting Expense<br>Salaries/Wages/Contract Labor | Solicitation/Fundraising Expense<br>Transportation Equipment & Related Expense<br>Travel in District<br>Travel Out of District<br>OTHER (enter a category not listed above) |  |  |  |  |  |
| 1 Total pages Schedule G:<br>Sch: 1/1 Rpt: 8/9  | 2 FILER NAME<br>King, Vivian R. (Ms.)  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00061394  |  |  |  |  |  |
| 4 Date<br>10/31/2024  | Payee name<br>Blake, Gloria  |   |   |  |  |  |  |  |
| 6 Amount (\$)<br>\$6,888.00   | \$6,888.00 7413 Parker Rd  |   |   |  |  |  |  |  |
| 8       PURPOSE<br>OF<br>EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description       Check if travel outside of Texas. Complete<br>Check if Austin, TX, officeholder living exp         Polling Expense       Polling Expense       Poll Workers |  |   |   |  |  |  |  |  |
| 9 Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH  | Candidate/Officeholder name  | Office sought   | Office held   |  |  |  |  |  |
| Date<br>11/18/2024  | Payee name<br>Constant Contact   |   |   |  |  |  |  |  |
| Amount (\$)<br>\$85.28<br>Reimbursement from<br>political contributions<br>intended   |  | Zip Code  |   |  |  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedu<br>Advertising Expense | Description   | Check if travel outside of Texas. Complete Schedule T.<br>Check if Austin, TX, officeholder living expense  |  |  |  |  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH  | Candidate/Officeholder name  | Office sought   | Office held   |  |  |  |  |  |
| Date<br>10/28/2024  | Payee name<br>NyceGraphix  |   |   |  |  |  |  |  |
| Amount (\$)<br>\$215.42   |  | Zip Code  |   |  |  |  |  |  |
| Reimbursement from<br>political contributions<br>intended   | Houston, TX 77054  |   |   |  |  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | OF Drinting Expanse  |   |   |  |  |  |  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH  | Candidate/Officeholder name  | Office sought   | Office held   |  |  |  |  |  |
|   |  |   |   |  |  |  |  |  |

| The instruction Guide explains how to complete this form.       Page 9 (1)         "Complete only if "Report Type" on page 1 is marked "Final Report" **       Page 9 (1)         1 COH NAME       2 Fier ID       (Ethics Commission Files)         3 SIGNATURE       00061334       00061334         1 do not expect any further political contributions or political expenditures in connection with my candidacy. Lunderstand that designating a report as an of expect any company community of a complete network of the expect any company community of a complete network of the expect any company community of a complete network of the expect any company community of the expected of the ex   |   |   | FORM   | C/OH - FR  |
|---|---|---|--|--|
| King, Vivian R. (Ms.)       00061394         3 SIGNATURE       Idonate speed any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign reasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.         Ms. Vivian R. King   |   |   |  | Page 9 of 9  |
| Signature I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a find input terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.  Ms. Vivian R. King  FILER WHO IS NOT AN OFFICEHOLDER  Check only one:  I do not have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended contributions or unexpended interest or income earned from political contributions to parsonal use. I also unexpended political contributions or unexpended interest or income earned from political contributions to parsonal use. Take unexpended political contributions or unexpended interest or income earned from political contributions to parsonal use. Take unexpended political contributions or unexpended interest or income earned from political contributions in accordance with the requirements of Election Code 254 204. B ASSETS Check only one:  I do not retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not understand that I must dispose of assets purchased with political contributions or interest or other income from political contributions. I do not retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code. 254.204.  S OFFICEHOLDER Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with | 1 | C/OH NAME   | 2 Filer ID (Ethics   | s Commission Filers)                               |
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| as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.           Ms. Vivian R. King         Signature of Candidate / Officeholder         * Complete A & B below only if you are not an officeholder **         A CAMPAIGN FUNDS         Check only one:         I do not have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended polical contributions or unexpended interest or income earned from political contributions to personal use. I also unexpended interest or income earned from political contributions in accordance with the requirements of Election Code 254.204.         B ASSETS         Check only one:         I do not take assets purchased with political contributions or interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.         B ASSETS         Check only one:         I do not retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions in accordance         Ms. Vivian R. King         I do not retain assets purchased with political contributions or interest or other income from political contributions of Election Code. 254.204.         Ms. Vivian R. King         Signature of Candidate   | 3 | SIGNATURE   |  |  |
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|   |   | Ms Vi   | vian R. King   |  |
| FILER WHO IS NOT AN OFFICEHOLDER ** Complete A & B below only if you are not an officeholder ** A CAMPAIGN FUNDS Check only one: I do not have unexpended contributions or unexpended interest or income earned from political contributions to unexpended interest or income earned from political contributions to unexpended interest or income earned from political contributions or unexpended interest or income earned from political contributions or unexpended interest or income earned on political contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions and that I may not retain unexpended contributions or unexpended contributions or increast or other income from political contributions in accordance with the requirements of Election Code 254.204. B ASSETS Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, 254.204. Signature of Candidate SoFFICEHOLDER ** Complete this section only if you are an officeholder ** I an aware that I will be required to fling requirements applicable to an officeholder who does not have a   |   |   | •  |  |
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