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 Commiss 00084573	sion Filers)	2 Total pages fi	led: 7
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	JSE ONLY
OFFICEHOLDER NAME		Jon			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	. 01/14/2025	
		West				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
OFFICEHOLDER MAILING	5769 Grand Lake Circle					
ADDRESS					Receipt #	Amount
Change of Address	Robstown, TX 78380				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mrs.	Sandra A.				
	NICKNAME	LAST			SUFFIX	
		West				
6 CAMPAIGN	STREET ADDRESS (NO PC) BOX PLEASE):	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	5769 Grand Lake Circle	,		· · · · , · · · · · ,		
(Residence or Business)	Robstown, TX 78380					
7 CAMPAIGN	AREA CODE PHOI	NE NUMBER	EXTENSION			
TREASURER PHONE	(361) 389-3025					
-						
8 REPORT TYPE	X January 15	30th day before		Runoff	15th day after ca	mpaign treasurer
					appointment (offi	
	July 15	8th day before		Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	TH	HROUGH	12/31/202		
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Year 11/05/2024		Primary	Runoff	Other	
	11/03/2024	X	General	Special		
				F		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT Court Of Appeals		5 District 13th
	1					
		GO 1	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Versi	on V4.1.0.5dd2ace2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 7

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13 C / OH NAME	West, Jon		Filer ID (00084573	(Ethics Commissi	ion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures These expenditures may have been made without the I officeholders are required to report this information or	candidate's or office	eholder's knowled	lge or
X Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
	X GENERAL Texas Alliance for Life PAC				
		COMMITTEE ADDRESS			
	SPECIFIC	8000 Centre Park Drive, Suite 380			
		Austin, TX 78754			
		Shaw, James			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		4505 Corazon Cv			
		Round Rock, TX 78681			
16 CONTRIBUTION TOTALS		I. ZED POLITICAL CONTRIBUTIONS(OTHER THAN PI ES OF LOANS, OR CONTRIBUTIONS MADE ELECTI		\$	0.00
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		\$	3,000.00
	·	PLEDGES, LOANS, OR GUARANTEES OF LOANS)			0,000.00
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	6,056.74
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	834.84
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.			
			on West		
		Signature of Ca	Indidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	_, this the	da	ıy
of	, 20, to ca	ertify which, witness my hand and seal of office.			
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of officer	r administering oa	ath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0	.5dd2ace2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH

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C / OH NAME	West, Jon		Filer ID 00084573	(Ethics Commission Filers)			
17 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures						
	COMMITTEE TYPE COMMITTEE NAME						
	X GENERAL	Judicial Fairness PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	919 Congress Ave., Ste. 455					
		Austin, TX 78701					
		Parsley, E. Lee					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		919 Congress Ave., Ste. 455					
		Austin, TX 78701					
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees to su been made without the candidate's or officeholder's d to report this information only if they receive notice	knowledge or co	onsent. Candidates and			
	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Sombrero Advertising & Marketing PAC					
		COMMITTEE ADDRESS					
	SPECIFIC SPECIFIC	2177 Kennedy Circle					
		McAllen, TX 78501					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Benson, Sam					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		2177 Kennedy Circle					
		McAllen, TX 78501					

FORM JC/OH COVER SHEET PG 3

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18 FILER			19 Filer ID	(Ethics Co	mmission Filers)	
West			00084573			
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE					SUBTOTAL AMOUNT	
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)			\$	3,000.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$		
4.	Х	SCHEDULE E(J): LOANS (JUDICIAL)		\$	2,000.00	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	6,056.74	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$		
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

SUBTOTALS - JC/OH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

			1 Total pages Schedule A(J)1:
The Instruction Guide explains how to complete this form.			Sch: 1/1 Rpt: 5/7
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
West, Jon			00084573
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
12/12/2024	Baker Botts Amicus Fund		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002-4995		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	\ \	Amount of Contribution (\$)
10/30/2024	Dewitt County Republican Party)	\$500.00
10/00/2024	Contributor address; City; State; Zip Code		
	Communication address, City, State, Zip Code		
	Cuero, TX 77954		
Contributorio		Contributor's Job Title	
Contributors	Principal Occupation		
Contributorio	employer/law firm	Law firm of contributor's sp	oouco (if opv)
Contributors	employen/aw intri	Law IIIII of Contributor 5 Sp	Jouse (II ally)
If contributor	c a shild low firm of parant(c) (if any)		
	s a child, law firm of parent(s) (if any)		

LOANS (J	UDICIAL)			SCHEDULE E(J)	
The Instruction Guide explains how to complete this form				Total pages Schedule E(J): Sch: 1/1 Rpt: 6/7	
2 FILER NAME West, Jon				B Filer ID (Ethics Commission Filers) 00084573	
⁴ TOTAL OF UN	IITEMIZED LOANS			\$	
5 Date of loan 12/03/2024	7 Name of lender Out-of-state PA West, Jon (Mr.)	JC (ID#:)	9 Loan Amount (\$) \$2,000.00	
6 Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
No	Robstown, TX 78380			11 Maturity Date	
12 Lender's Principal	Occupation	13 Lender's Job Title		1	
Attorney		Attorney			
14 Lender's Employe The Law Office		15 Law Firm of lender's spous	e (if any)		
16 If lender is child, la	aw firm of parent(s) (if any)	1			
17 Description of Col	ateral	18 Check if personal funds we	re deposited	l into political account	
X None		×		(See Instructions)	
19 GUARANTOR INFORMATION	20 Name of guarantor	L		22 Amount Guaranteed (\$)	
X not applicable	21 Guarantor address; City; State;	Zip Code			
23 Guarantor's Princi	pal Occupation	24 Guarantor's Job Title			
25 Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)		
27 If guarantor is chil	d, law firm of parent(s) (if any)	I			

CONTRIBUTIO	PENDITURES FROM PO NS	OLITICAL		SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayme Office Overhea Polling Expens Printing Expen Salaries/Wage	ent/Reimbursement St d/Rental Expense Ti e Ti se Ti s/Contract Labor O	olicitation/Fundraising Expense ansportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/7		•	3 Fi	Iler ID (Ethics Commission Filers) 0084573
4 Date 10/29/2024	5 Payee name Arrow Display Signs			
6 Amount (\$) \$711.74	 7 Payee address; City; 1343 S. Staples Street Corpus Christi, TX 78404 	State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Printing Expense	this schedule) (b)		of Texas. Complete Schedule T. iceholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office held
Date	Payee name			
12/26/2024	Steve Ray Associates			
Amount (\$) \$3,345.00	Payee address; City; 710 Buffalo Street, Ste. 507 Corpus Christi, TX 78401	State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Consulting Expense	this schedule) (b)		of Texas. Complete Schedule T. iceholder living expense rertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name I	Office sought		Office held
Date 12/26/2024	Payee name West, Jon			
Amount (\$) \$2,000.00	Payee address; City; 5769 Grand Lake Circle Robstown, TX 78380	State; Zip Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Loan Repayment/Reimbursemen	,		of Texas. Complete Schedule T. iceholder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought		Office held