#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088227 18 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Lee NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Finley CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 1818 Waterford Lane MAILING Amount Receipt # **ADDRESS** Change of Address Richardson, TX 75082 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Lee NAME NICKNAME LAST **SUFFIX** Finley STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 1818 Waterford Lane **ADDRESS** (Residence or Business) Richardson, TX 75082 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 836-9277 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 10/27/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 11/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Criminal Appeals, Judge Place 8

**GO TO PAGE 2** 

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 18

13 C / OH NAME	Finley, Lee (Mr.)		<b>14</b> Filer ID 00088227	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committee candidate / officeholder. These expenditures may have been made without the candidate's or officeholder consent. Candidates and officeholders are required to report this information only if they receive notice of (S)			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	3)	\$ 11,350.00
EXPENDITURE TOTALS	`	IZED POLITICAL EXPENDITURES	<i>-</i> )	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 4,919.02
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 19,860.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 90,000.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		N	1r. Lee Finley	
			Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
-	•	-		-

### **SUBTOTALS - JC/OH**

## FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET I	PG 3 3 of 18
	LER NAM		<b>19</b> Filer ID 00088227	(Ethics Commission I	
		E SUBTOTALS SCHEDULE		SUBTOTAL AM	OUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		<b>\$</b> 1	.1,350.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	4,407.47
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	511.55
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🗆	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CON		SCHEDULE A	A(J)1		
	The Instru	ction Guide explains how to co	omplete this f	orm.	1	ges Schedule A(J)1: 2 Rpt: 4/18	;
2	FILER NAME Finley, Lee (	Mr.)			3 Filer ID 000882	(Ethics Commission 27	n Filers)
4	Date 10/28/2024	<ul> <li>Full name of contributor out Leander Area Republican Wome</li> <li>Contributor address; City; State; Zip</li> <li>Leander, TX 78641</li> </ul>			7 Amount	of Contribution (\$)	\$250.00
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	<u> </u>		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)		
12	! If contributor is	s a child, law firm of parent(s) (if any)					
	Date 10/28/2024	Lone Star Republican Club  Contributor address; City; State; Zip	-of-state PAC (ID#:_ 0 Code	)	Amount .	of Contribution (\$)	\$100.00
	Contributor's I	Larue, TX 75770 Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm				Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date Full name of contributor out-of-state PAC (ID#: 10/28/2024 Peck, Vera  Contributor address; City; State; Zip Code  Dallas, TX 75255		)	Amount .	of Contribution (\$)	\$5,000.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	1		
	Unknown			Unknown			
	Unknown	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	action Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/18
2	FILER NAME Finley, Lee			3 Filer ID (Ethics Commission Filers) 00088227
4	Date 10/28/2024	Full name of contributor		7 Amount of Contribution (\$) \$5,000.00
		Dallas, TX 75225		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	•
	Unkown		Unkown	
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)
10	Unknown	in a little law form of a constant of the constant		
12	if contributor	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor		Amount of Contribution (\$)
	10/28/2024	Full name of contributor  out-of-state PAC (ID#: San Antonio Republican Women	)	\$1,000.00
	10/20/2024	Contributor address; City; State; Zip Code		
		Continuator address, City, State, 21p Code		
		San Antonio, TX 78270		
	Contributoric		Contributor's Job Title	L
	Contributors	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm			Law firm of contributor's s	pouse (if any)
Contributor of Chiployernaw IIIII				, , , , , , , , , , , , , , , , , , , ,
	If contributor i	is a child, law firm of parent(s) (if any)		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
l	Sch: 1/11 Rpt: 6/18	Finley, Lee (Mr.)		00088227
4	Date	5 Payee name		
	11/08/2024	1-Vision		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
l	\$1,292.15	9346 Telge Road		
		Houston, TX 77095		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Push Cards
				T don Gardo
9	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held
	expenditure to benefit C/O		9	
H	Date	Payee name		
	11/08/2024	1-Vision		
┝	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$463.03	9346 Telge Road		
	,	3		
		Houston, TX 77095		
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF	Advertising Expense	( )	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	3 P		Check if Austin, TX, officeholder living expense
				Business Cards
L	Operation ONLY if the est	Our distance (Office health as a second		Office held
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so	ugnt	Office held
⊨				
l	Date 11/12/2024	Payee name		
L		1210 San Antonio St, Ste 800		
	Amount (\$)	Payee address; City; State; Zip C	oae	
l	\$75.00			
		Austin TV 70701		
┡		Austin, TX 78701	1	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(d)	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
l				Registration Judge's School
L				
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
L	expenditure to benefit C/OI	1		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/11 Rpt: 7/18	Finley, Lee (Mr.) 00088227
4	Date	5 Payee name
	12/30/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$349.31	440 Terry Ave N
		Seattle, TX 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Supplies Check if travel outside of Texas. Complete Schedule T.
		Coffee, air filters, misc office supplies.
		Conce, an inters, misc onice supplies.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	12/30/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.88	440 Terry Ave N
		Seattle, TX 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	David and the second se
	Date 12/30/2024	Payee name
		Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.48	440 Terry Ave N
		Seattle, TX 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

12/29/2024 Amazon  6 Amount (\$) 7 Payee address; City; State; Zip Code  \$61.78 \$61.78 \$61.78 \$109  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies
5 Payee name 12/29/2024
12/29/2024 Amazon  7 Payee address; City; State; Zip Code 440 Terry Ave N  Seattle, TX 98109  8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Supplies  9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name
12/29/2024 Amazon  7 Payee address; City; State; Zip Code 440 Terry Ave N  Seattle, TX 98109  8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Supplies  9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name
\$61.78 440 Terry Ave N  Seattle, TX 98109  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Supplies  Candidate/Officeholder name Office sought  Date  Payee name
Seattle, TX 98109  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Office Overhead/Rental Expense  Office Supplies  Candidate/Officeholder name Office sought  Date  Payee name
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies  9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies  9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name
OF EXPENDITURE Office Overhead/Rental Expense Office Supplies  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies  Office Supplies  Date Payee name
Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Office Supplies  Office Supplies  Date  Payee name
9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name  Check if Austin, 1X, officeholder living expense Office Supplies  Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH  Date Payee name  Candidate/Officeholder name Office sought Office held
Date Payee name
Date Payee name
- ayee name
- ayee name
12/29/2024 Amazon
Amount (\$) Payee address; City; State; Zip Code
\$46.69 440 Terry Ave N
Seattle, TX 98109
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense  Office Supplies
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
Date Payee name
12/13/2024 Buc-ees Hillsboro
Amount (\$) Payee address; City; State; Zip Code
\$38.84   165 State Highway 77
Hillshoro, TX 76645
Hillsboro, TX 76645
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE OF FOOd/Beverage Expense  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for Judge School  Complete ONLY if direct Candidate/Officeholder name Office sought Office held
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for Judge School
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for Judge School  Complete ONLY if direct Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 9/18	Finley, Lee (Mr.) 00088227
4	Date	5 Payee name
	12/30/2024	Buc-ees Hillsboro
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.75	165 State Highway 77
		Hillsboro, TX 76645
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  event
		eveni
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	
L		
	Date	Payee name
	11/27/2024	Buc-ees
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.23	4155 N General Bruce Dr
		Temple, TX 76501-9722
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		travel to Austin to interview staff
		davor to 7 dodin to interview stan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	11/26/2024	Payee name Buc-ees
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.35	4155 N General Bruce Dr
		Temple, TX 76501-9722
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff interview
		Stati interview
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 5/11 Rpt: 10/18	Finley, Lee (Mr.)		00088227
4	Date	5 Payee name		
	11/26/2024	Buc-ees		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$121.49	4155 N General Bruce Dr		
		Temple, TX 76501-9722		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense gas
				gus
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
3	expenditure to benefit C/O		grit	Office field
_	Data			
	Date	Payee name		
	11/27/2024	Doubletree Suites		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$202.13	303 W 15th S		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Hotel
				Tiotei
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		giit	Office field
	Date	Payee name		
	12/12/2024	Longhorn Steakhouse		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$101.03	1005 W University Av		
		Georgetown, TX 78628		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Dinner with Judges
	Complete ONLY if direct	Condidate/Officeholder nema	abt	Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ynı	Office held

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage E
Contribution/ Onations Made By Good/Beverage E
Gift/Awards/Mem

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/11 Rpt: 11/18	Finley, Lee (Mr.) 00088227
4	Date	5 Payee name
	12/30/2024	Oasis on the Lake
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$183.42	6550 Comanche Trail
		Austin, TX 78732
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Dinner with Political Consultant
		Diffiel with Folitical Consultant
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	11/27/2024	PMC Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.50	unknown
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Parking at Court to interview staff
		Faiking at Court to interview stair
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	Davies same
	Date 12/13/2024	Payee name Shell Oil 1257043
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.15	
		Georgetown, TX
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		gas
		gue
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commiss	sion Filers)
	Sch: 7/11 Rpt: 12/18	Finley, Lee (Mr.) 00088227	
4	Date	5 Payee name	
	12/30/2024	Shell Oil	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$57.45		
		TX	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORE	Check if Austin, TX, officeholder living expense	
		gas	
0	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		
	Date	Payee name	
	12/10/2024	Sheraton Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$54.39	1101 Woodlawn Avenue	
		Georgetown, TX 78628	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Judge School	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH .	
	Date	Payee name	
	12/13/2024	Sheraton Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$625.96		
		Georgetown, TX 78628	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Hotel for Judge School	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experientare to benefit C/OI	<u> </u>	

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 13/18	Finley, Lee (Mr.) 00088227
4	Date	5 Payee name
	12/16/2024	Sheraton Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.98	1101 Woodlawn Avenue
		Georgetown, TX 78628
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Judge School
		Gadge Collect.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Dete	
	Date	Payee name
	11/27/2024	Texas Chili Parlor
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.04	40.04
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Lunch with Judge
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
_	_	
	Date	Payee name
	11/19/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.25	
		TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this	form.
1	Total pages Schedule F1: Sch: 9/11 Rpt: 14/18	2 FILER NAME Finley, Lee (Mr.)	3 Filer ID (Ethics Commission Filers) 00088227
4	Date 11/19/2024	5 Payee name Uber	·
6	Amount (\$) \$26.23	7 Payee address; City; State; Zip Code	
8	PURPOSE OF EXPENDITURE	Travel in Bistrict	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 11/27/2024	Payee name Uber	
	Amount (\$) \$38.43	Payee address; City; State; Zip Code  TX	
	PURPOSE OF EXPENDITURE	Traver in District	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 11/28/2024	Payee name Uber	
	Amount (\$) \$38.43	Payee address; City; State; Zip Code  TX	
	PURPOSE OF EXPENDITURE	Traver in District	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	olete this fo	orm.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 10/11 Rpt: 15/18	Finley, Lee (Mr.)			00088227	
4	Date	5 Payee name		•		
	12/09/2024	Uber				
6	Amount (\$)	7 Payee address; City; State; Zip Code	9			
	\$50.68					
		TX				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Descrip	otion		
	OF EXPENDITURE	Travel In District				plete Schedule T.
			Event		officeholder living	expense
			Lvoin			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI					
_	Date	Payee name				
	12/18/2024	Uber				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$43.64	1725 3rd Street				
		San Francisco, CA 94158				
	PURPOSE		<b>)</b> Descrip	ntion		
	OF EXPENDITURE	Travel In District	·		de of Texas. Com	plete Schedule T.
	EXPENDITURE			ck if Austin, TX,	officeholder living	expense
			event			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	ald
	expenditure to benefit C/OI		ıı		Office file	au
	Data					
	Date 12/30/2024	Payee name Uber				
	Amount (\$) \$37.00	Payee address; City; State; Zip Code 1725 3rd Street	-			
	Ψ37.00	1723 Sid Stieet				
		San Francisco, CA 94158				
	PURPOSE		N Di	-41		
	OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Descrip Chec		de of Texas. Com	plete Schedule T.
	EXPENDITURE	Traver in District	Chec	ck if Austin, TX,	officeholder living	expense
			event			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt		Office he	eld
	S.portation to bottom 0/01					

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to c	ompl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME		3	F	iler ID	(Ethics Commission Filers)
	Sch: 11/11 Rpt: 16/18		Finley, Lee (Mr.)			C	00088227	
4	Date	5	Payee name		<b>_</b>			
	12/11/2024		Wildfire					
6	Amount (\$)	7	Payee address; City; State; Zip C	ode				
	\$72.37		812 S Austin Ave					
			Georgetown, TX 78626					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	``	Food/Beverage Expense		Check if travel outsi	ide	of Texas. Com	plete Schedule T.
	EXPENDITURE				Check if Austin, TX,			g expense
					Dinner with Judg	ge	<b>)</b>	
_	Operation ONE Vitation of	L	0.00				O#: I	-1-1
9	Complete ONLY if direct expenditure to benefit C/O	Н	Candidate/Officeholder name Office so	ugnt			Office he	eid
_		_						
	Date		Payee name					
	12/02/2024	L	uber					
	Amount (\$)		Payee address; City; State; Zip C	ode				
	\$53.41							
			TX					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Travel In District		Check if travel outsing Check if Austin, TX,			
					event	, 0.	meenolder hving	CAPCHISC
	Complete ONLY if direct	٠,	Candidate/Officeholder name Office so	ught			Office he	eld
	expenditure to benefit C/O	Н						

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 17/18 Finley, Lee (Mr.) 00088227 4 Date Payee name 12/14/2024 Godaddy 6 Amount (\$) Payee address; City; State; Zip Code \$511.55 2155 E. GoDaddy Way Reimbursement from political contributions intended Х Tempe, AZ 85284 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Web Hosting Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

OL	JTSTAN	NDING LOANS	SCHEDULE L				
The	Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 18/18				
	R NAME ey, Lee (Mr.	)	3 Filer ID (Ethics Commission Filers) 00088227				
LENI	DER DRMATION	4 Name of lender Finley, Gary	<b>'</b>				
		5 Lender address; City; State; Zip Code					
		Richardson, TX 75082-3102					
	RANTOR DRMATION	6 Name of guarantor					
X r	not applicable	7 Guarantor address; City; State; Zip Code					