# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

### FORM JCOR-C/OH

	•	ics Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
0	0088176		5			Date Received	
	ANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONIC	ALLY FILED
	FFICEHOLDER AME	The Honorable	Kimberly M.			08/08/2025	
		NICKNAME	LAST		SUFFIX		
			Laseter			Date Hand-delivered	or Date Postmarked
	RIGINAL	January 15	Runoff	Other (s	pecify)		or Date i Countained
R	EPORT TYPE	X July 15	Exceeded modified	modified reporting limitter campaign treasurer		Receipt #	Amount
		30th day before election					
		8th day before election	appointment (office	*,		Date Processed	
0	RIGINAL PERIOD	Month Day Ye		Month Day	Year	- Data Imaged	
	OVERED	01/01/2025	THROUGH	06/30/2025	real	Date Imaged	
F	XPLANATION OF C			00/00/2020			
		s this reporting period and i	no contributions and the	erefore initially filed a r	renort stating s	uch However I fail	led to enter
A	FFIDAVIT			ear, or affirm, under po	enalty of perjur	y, that this correcte	ed report is true
A	FFIDAVIT		and				d report is true
A	FFIDAVIT		and	correct.	and all applicas: I swear, or	able statements: r affirm that the orig t an intent to mislea	inal report
A	FFIDAVIT		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa	and all applica s: I swear, or aith and without ormation contain swear, or affirm the 14th busing ginally filed is int any error or or	able statements:  r affirm that the original to misleating the report.  that I am filing this less day after the danaccurate or incom	ginal report ad or to s corrected ate I learned plete. I
Α	FFIDAVIT		and Che	correct.  ck the box next to any  Semiannual reports was made in good fa misrepresent the info  Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in any error or or ood faith.	able statements:  r affirm that the original tan intent to misleated in the report.  that I am filing this less day after the danaccurate or incommission in the reporterly M. Laseter	ginal report ad or to s corrected ate I learned plete. I
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Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

#### 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) 00088176 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Kimberly M. NAME Date Received **ELECTRONICALLY FILED** 08/08/2025 NICKNAME LAST **SUFFIX** Laseter CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Kimberly M. NAME NICKNAME LAST **SUFFIX** Laseter **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 390-5893 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge Place McKinney District 401 Collin

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

3 of 5

13 C / OH NAME	Laseter, Kimberly M.	(The Honorable)	<b>14</b> Filer ID (00088176	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political exp These expenditures may have been made w officeholders are required to report this infor	ithout the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NA	AME			
		COMMITTEE CAMPAIGN TREASURER AD	DDRESS			
16 CONTRIBUTION TOTALS	· ·					
		CAL CONTRIBUTIONS		\$ 0.00		
EXPENDITURE	,	PLEDGES, LOANS, OR GUARANTEES OF ZED POLITICAL EXPENDITURES	LOANS)			
TOTALS	3. TOTAL ONTEWN	ZED FOLITICAL EXPENDITORES		\$ 0.00		
	4. TOTAL POLIT		\$ 550.00			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	<b>\$</b> 12,400.37		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAP TING PERIOD	NS AS OF THE LAST DAY	\$ 2,000.00		
<b>17</b> AFFIDAVIT		l swear, or affirm, under p true and correct and inclu under Title 15, Election C	penalty of perjury, that the accudes all information required to	companying report is o be reported by me		
		The H	onorable Kimberly M. Las	eter		
		Signa	ture of Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL ABO	DVE				
Sworn to and subsc	cribed before me, by the sa	aid	, this the	day		
of	, 20, to ce	rtify which, witness my hand and seal of offic	ce.			
Signature of offic	eer administering oath	Printed name of officer administering or	ath Title of officer	r administering oath		

### SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

4 of 5							
18 FIL Las	ER NAN seter, K	(Ethics Commission Filers)					
<b>20</b> SC NA	HEDULI ME OF	SUBTOTAL AMOUNT					
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$			
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$			
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$			
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$			
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 550.00			
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$			
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$			

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - al Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	nse	Polling Ex Printing E			Transportation Equipment & Related Expense Travel out of District OTHER (enter a category not listed above)
	Credit Card Payment			The Instruction Guide	explains h	ow to co	mplete this form.		
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 5/5		Laseter, Kir	mberly M. (The Hor	orable)				00088176
4	Date	5	Payee name					-	
	03/10/2025		Golden Cor	ridor Republican W	omen				
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de		
	\$300.00		PO Box 16	2					
	Reimbursement from								
	political contributions intended		Frisco, TX	75034					
8	PURPOSE	(a)	Category (s	ee Categories listed at the top	of this sched	dule)	(b) Description	CI	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Event Expe	nse				CI	heck if Austin, TX, officeholder living expense
	LAFLINDHORL						Tickets to Lincol	n D	ay 2025 (self and spouse)
9		Ca	ndidate/Office	holder name			Office sought		Office held
	expenditure to benefit C/OH								
F	Date	_	Davis a name						
	06/02/2025		Plano Reni	ıblican Women					
┝	Amount (\$)	⊢	Payee addre		Stato	Zip Co	do		
	\$250.00		3320 Centr		State,	Zip Cc	ue		
			3320 CCIIII	ai Expy					
	Reimbursement from political contributions intended		Plano, TX 7	<b>'</b> 5074					
	PURPOSE		Category (s	ee Categories listed at the top	of this schee	dule)	Description	CI	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Sponsorshi	р				CI	heck if Austin, TX, officeholder living expense
							Sponsorship		
L									
	Complete ONLY if direct expenditure to benefit C/OH	Ca	ndidate/Office	holder name			Office sought		Office held
H									
l									
l									
1									