JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. MS (MRS) MR 3 CANDIDATE / MI OFFICE USE ONLY **OFFICEHOLDER** NAME Date Received NICKNAME 4 CANDIDATE / ADDRESS / PO BOX: OFFICEHOLDER MAILING **ADDRESS** Change of Address 5 CANDIDATE/ PHONE NUMBER Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (682) 553-1994 PHONE Receipt #-Ampynt \$ 6 CAMPAIGN MS / MRS / MR MI **TREASURER** NAME Date Processed NICKNAME Date Imaged CAMPAIGN ZIP CODE **TREASURER ADDRESS** (Residence or Business) AREA CODE 8 CAMPAIGN PHONE NUMBER EXTENSION **TREASURER** 214) 542-9148 PHONE 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election **Exceeded Modified** Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Day COVERED 2023 **THROUGH** 11 ELECTION **ELECTION DATE ELECTION TYPE** Other Description Runoff General Special 12 OFFICE 13 OFFICE SOUGHT (if known) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 2** 15 JC/OH NAME 16 Filer ID (Ethics Commission Filers) 150 reen 17 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR \$ CONTRIBUTIONS MADE ELECTRONICALLY) 2. **TOTAL POLITICAL CONTRIBUTIONS** \$ (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** \$ **TOTAL POLITICAL EXPENDITURES** 4. \$ CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD **OUTSTANDING** TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and confrect and includes all information required to be reported by me under Title 15, Election Code, Signature of Candidate/Officeholder Please complete either option below: DENISE ALVAREZ (1) Affidavit Notary ID # 133777929 Viy Commission Expires June 26, 2026 NOTARY STAMP/SEAL Swom to and subscribed before me by to certify which, witness my hand and seal of office.

ENGE ALVARE

Signature of officer administering oath Printed name of officer administering oath

		OR		ART CO. IS	AND DES	TO STATE OF THE
2) Unsworn Declaration						
/ly name is		, a	and my date of I	birth is		
My address is		,				
	(street)		(city)	(state)	(zip code)	(country)
Executed in	County, State of	, on the	day of _	(month)	, 20	
				(month)	(year)	
			Signature of	Candidate/Of	ficeholder (Dec	larant)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	nmission Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 84.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 77,00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

SCHEDULE E(J)

4 TOTAL OF UNITEMIZED LOANS 5 Date of loan 7 Name of lender Out-of-state PAC (IDE: 9 Loan Amount (S) \$24 CO \$24 CO \$3 Is lender a financial Institution? 14 Y N 17 X 75/04 18 Lender's Principal Occupation 13 Lender's Job Title HISTAN Professor 14 Lender's Employer/Law Firm 15 Law Firm of lender's spouse (if any) 7 Description of Collateral 18 Check if personal funds were deposited into account (See Instructions) 9 GUARANTOR INFORMATION 20 Name of guarantor 21 Guarantor address; City; State; Zip Code 3 Guarantor's Principal Occupation 24 Guarantor's Spouse (if any) 25 Law Firm of guarantor's spouse (if any)		struction Guide explains how to complete thi	s form.	1 Total pages Schedule E(J):
5 Date of loan 7 Name of lender out-of-state PAC (IDII: 9 Loan Amount (\$) 7 128 23 Work Green 9 Loan Amount (\$) 8 Lender address; City: State; Zip Code a financial Institution? 14 Lender's Principal Occupation 13 Lender's Job Title 14 Lender's Employer/Law Firm 15 Law Firm of lender's spouse (if any) 14 Lender's Employer/Law Firm 18 Check if personal funds were deposited into account (See Instructions) 15 Guarantor's Principal Occupation 21 Guarantor address; City: State; Zip Code 22 Amount Guaranteed (\$ 3 Guarantor's Principal Occupation 24 Guarantor's Spouse (if any)	2 FILER NAME	isa Green		3 Filer ID (Ethics Commission Filers
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13 Lender's Job Title 14 Lender's Employer/Law Firm 15 Law Firm of lender's spouse (if any) 16 If lender is a child, law firm of parent(s) (if any) 18 Check if personal funds were deposited into account (See Instructions) 18 Check if personal funds were deposited into account (See Instructions) 20 Name of guarantor INFORMATION 21 Guarantor address; City; State; Zip Code 22 Amount Guaranteed (into a count (See Instructions) 23 Guarantor's Principal Occupation 24 Guarantor's Job Title 25 Guarantor's Employer/Law Firm 26 Law Firm of guarantor's spouse (if any) 26 Law Firm of guarantor's spouse (if any)	a financial Institution?	1442 Oxbon Drive		N/A
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not applicable 3 Guarantor's Principal Occupation 24 Guarantor's Job Title 5 Guarantor's Employer/Law Firm 26 Law Firm of guarantor's spouse (if any)		20 Name of guarantor		22 Amount Guaranteed (\$)
5 Guarantor's Employer/Law Firm 26 Law Firm of guarantor's spouse (if any)	not applicable	21 Guarantor address; City;	State; Zip Code	
spouse (if any)	3 Guarantor's Principa	al Occupation	24 Guarantor's Job Title	
7 If guarantor is a child, law firm of parent(s) (if any)	5 Guarantor's Employe	er/Law Firm	26 Law Firm of guarantor's	spouse (if any)
	7 If guarantor is a chil-	d, law firm of parent(s) (if any)		

SCHEDULE E(J)

The Ir	nstruction Guide explains how to complete this	form.	1 Total pages Schedule E(J):
2 FILER NAME	Lisa Green		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	TEMIZED LOANS		\$ 84,00
5 Date of loan	7 Name of lender	(ID#:)	9 Loan Amount (\$)
8/30/23		en	\$12.00
6 Is lender a financial Institution?	8 Lender address; City; 1442 Oxbow Drive	State: Zip Code Cedur Hill,	10 Interest rate NA 11 Maturity date
	TX 75104		N/A
12 Lender's Principal	ricater	13 Lender's Job Title	rufessor
14 Lender's Employer	Law Firm	15 Law Firm of lender's spou	ise (if any)
16 If lender is a child,	law firm of parent(s) (if any)		
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17 Description of Colla	ateral	Check if persor account (See I	nal funds were deposited into political nstructions)
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)
not applicable	21 Guarantor address; City;	State; Zip Code	
23 Guarantor's Princip	al Occupation	24 Guarantor's Job Title	
25 Guarantor's Employ	/er/Law Firm	26 Law Firm of guarantor's s	spouse (if any)
27 If guarantor is a ch	ild, law firm of parent(s) (if any)		
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SCHEDULE E(J)

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form. 2 FILER NAME LIGA GARDM 3 Filer ID (Ethics Commission Filer 4 TOTAL OF UNITEMIZED LOANS 5 Date of loan 7 Name of lender 9 Loan Amount (6) 4 12 Londer address; City: State; Zip Code 10 Interest raje 11 Maturity date N/A 11 Maturity date N/A 12 Lender's Principal Qocupation 14 Lender's Employed Law Firm 15 Lender's Inspiration of Collateral 16 If lender is a child, law firm of parent(s) if any) 17 Description of Collateral 28 Guarantor's Principal Occupation 29 Loan Amount (8) 4 // A 11 Maturity date N/A 11 Maturity date N/A 11 Maturity date N/A 12 Lender's Principal Qocupation 13 Lender's Inspiration of Collateral 14 Check if personal funds were deposited into political account (dee Instructions) 19 GLARANTOR 19 GLARANTOR 10 Normal Amount (8) 20 Name of guarantor 21 Guarantor's Principal Occupation 22 Amount Guaranteed (8) 23 Guarantor's Employer/Law Firm 24 Guarantor's Spouse (if any) 25 Guarantor's Employer/Law Firm 26 Law Firm of guarantor's spouse (if any) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				
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5 Date of loan 7 Name of lender our of-state PAC (IDE: 9 Loan Amount (\$) 9 Loan	2 FILER NAME	Lisa Green		3 Filer ID (Ethics Commission Filers)
9 28 23 Mark Streen \$ 12 07 6 Its lender a financial Institution? 14 2 0x 0x 0x 0x 0x 0x 0x	4 TOTAL OF UN	TEMIZED LOANS		\$ 84,00
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27 If guarantor is a child, law firm of parent(s) (if any)	23 Guarantor's Princip	al Occupation	24 Guarantor's Job Title	1
	25 Guarantor's Employ	/er/Law Firm	26 Law Firm of guarantor's	spouse (if any)
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Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 11/15/2022

SCHEDULE E(J)

The Instruction Guide explains how to comp	olete this form.	1 Total pages Schedule E(J):
2 FILER NAME LISOU GY	een	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 84.00
interest to the contract of th	r-state PAC (ID#:)	9 Loan Amount (\$) \$12.00
6 Is lender a financial Institution? N 8 Lender address; City; 1H42 Ox 6000 N TX 75/04	State; Zip Code Dryve, Claar Hill,	10 Interest rate NA 11 Maturity date NA
12 Lender's Principal Occupation	13 Lender's Job Title	N D
14 Lender's Employer/Law Firm	15 Law Firm of lender's spo	Phofesor
Dallus College	Law Film of lender's apo	use (ii ariy)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral	Check if perso account (See	onal funds were deposited into political Instructions)
19 GUARANTOR INFORMATION 20 Name of guarantor		22 Amount Guaranteed (\$)
not applicable 21 Guarantor address; City;	State; Zip Code	
23 Guarantor's Principal Occupation	24 Guarantor's Job Title	1
25 Guarantor's Employer/Law Firm	26 Law Firm of guarantor's	spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		
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ATTACH ADDITIONAL C	OPIES OF THIS SCHEDULE AS NI instruction guide for additional rep	

SCHEDULE E(J)

	nstruction Guide explains how to complete thi	s form.	1 Total pages Schedule E(J):
2 FILER NAME	Lisa Green		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	TEMIZED LOANS		\$ 84.00
5 Date of loan	7 Name of lender ut-of-state PA	C (ID#:)	9 Loan Amount (\$)
11/29/23	Mark Gre	en	\$12,00
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate
OY N	Cedar Hill, TX		11 Maturity date
12 Lender's Principal	cater	13 Lender's Job Title	Professor
14 Lender's Employer	Law Firm	15 Law Firm of lender's spo	use (if any)
16 If lender is a child,	law firm of parent(s) lif any)		
17 Description of Colla	v ateral	18	
none		Check if perso account (See	nal funds were deposited into political Instructions)
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)
not applicable	21 Guarantor address; City;	State; Zip Code	
23 Guarantor's Princip	al Occupation	24 Guarantor's Job Title	1
25 Guarantor's Employ	/er/Law Firm	26 Law Firm of guarantor's	spouse (if any)
27 If guarantor is a ch	ld, law firm of parent(s) (if any)		
	ATTACH ADDITIONAL COPIES	OF THIS COUPDING A CASE	EDED
If le	nder is out-of-state PAC, please see instru		

SCHEDULE E(J)

The Instruction Guide explains how to complete	this form.	1 Total pages Schedule E(J):
2 FILERNAME LISA GYLLEN		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 84.00
5 Date of loan 7 Name of lender out-of-state 12/28/23 LISC GYELV		9 Loan Amount (\$) \$12.00
6 Is lender a financial Institution? YN N 8 Lender address; City; 1442 Oxboox D TX 75104	rive, Cedur Will	10 Interest rate 11 Maturity date
12 Lender's Principal Occupation Judye - Law	13 Lender's Job Title	
14 Lender's Employer/yaw Firm Dallus County	15 Law Firm of lender's spou	se (if any)
16 If lender is a child, law firm of parent(s) (If any)		
17 Description of Collateral none	Check if person account (See Ir	al funds were deposited into political instructions)
19 GUARANTOR INFORMATION 20 Name of guarantor		22 Amount Guaranteed (\$)
not applicable 21 Guarantor address; City;	State; Zip Code	
23 Guarantor's Principal Occupation	24 Guarantor's Job Title	
25 Guarantor's Employer/Law Firm	26 Law Firm of guarantor's s	spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL CODE		
If lender is out-of-state PAC, please see ins	ES OF THIS SCHEDULE AS NE truction guide for additional repo	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME LISA GYELN	3 Filer ID (Ethics Commission Filers)	
4 Date 7/26/23	5 Payee name TP Margam Chase Y	Bank	
6 Anfount (\$)/	7 Payee address;	City: State; Zip Code	
\$12,00	PO 130x 659754 San	1 Ahtmin, TX 78265	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	fees	monthly bunk fee	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OI-	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
8/23/23	J.P. Morgan Chas	se Bank	
Amount (\$)	Payee address;	City; State; Zip Code	
\$12.00	P.O. Box 659754	San Antonio, TX 78265	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	tees	monthly bank fee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
9/26/23	J. P. Morgran Cha	se Bank	
Amount (\$)	Payee address;	City; State; Zip Code	
\$12.00	P.O. BOX 659754	1 San Antonio, TX 78265	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	fees	monthly bunk fee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	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)
4 Date 16/25/23	5 Payee name P Murian Chase Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.00	PO Box 659754 Sun Antrius, TX 78265
8	(a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE OF EXPENDITURE	tees monthly bank fee
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI-	Candidate / Officeholder name Office sought Office held
Date	Payee name
11/24/23	JP Margan Chuse Bank
Amount (\$)	Payee address; City; State; Zip Code
\$12.00	PO Box 659754 San Antonio, TX 78265
	Category (See Categories listed at the top of this schedule) Description
PURPOSE OF EXPENDITURE	fees monthly bank fee
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
Date	Payee name
12/26/23	JP Morgan Chase Bank
Amount (\$)	Payee address; City; State; Zip Code
\$12.00	PO Box 659754 San Antenio, TX 78265
	Category (See Categories listed at the top of this schedule) Description
PURPOSE OF EXPENDITURE	tees monthly bank tee
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED