JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to comp	lete this form. 1 Filer ID		2 Total pages filed: 10
3 CANDIDATE /	MS/MRS/MR	FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME		Julia		
NAME				Date Received
	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER	LACT		
	NICKNAME	LAST Malveaux	SUFFIX	
	1000000 100 00V 10V		710.0005	Date Hand-delivered or Date Postmarked
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT . P.O. Box 740363	/ SUITE #; CITY;	ZIP CODE	Date Hand-delivered of Date Postmarked
MAILING ADDRESS	F.O. BOX 740303			Receipt # Amount
Change of Address	Dallas, TX 75374			Date Processed
				Date Imaged
5 CAMPAIGN TREASURER	MS/MRS/MR	FIRST		MI
NAME		Julia		
	NICKNAME	LAST		SUFFIX
		Malveaux		
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE); Al	PT / SUITE #; CITY;	STATE; ZIP CODE
ADDRESS	P.O. Box 740363			20Z
(Residence or Business)	Dallas, TX 75374			2025 JAN JUHA COUL DALL
				>=====================================
7 CAMPAIGN TREASURER	AREA CODE PHON	E NUMBER EXTENSION		0-3
PHONE				
8 REPORT				
TYPE	X January 15	30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before election	Exceeded modified	appointment (officenoider only) Final Report (Attach C/OH-FR)
		our day before election	reporting limit	That report y mach or or intry
9 PERIOD COVERED	Month Day Year		Month Day	Year
COVERED	07/01/2024	THROUGH	12/31/2024	4
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
		General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	Dallas County Probate #1			
		GO TO PAGE 2		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

				2 of 10
13 C / OH NAME	Malveaux, Julia	14	Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures These expenditures may have been made without the officeholders are required to report this information or	candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAN P ES OF LOANS, OR CONTRIBUTIONS MADE ELECT		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
EXPENDITURE TOTALS	-	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 4,293.97
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS RIOD	T DAY OF THE	\$ 14,187.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF TING PERIOD	THE LAST DAY	\$ 0.00
17 AFFIDAVIT	ANNETTE RICHARD Notary Public, State of Comm. Expires 06-16 Notary ID 134413	Texas -2027 06		be reported by me
Sworn to and subs	cribed before me, by the s	bus buller of and	this the	day
Signature of Office	cer auministering batti	Trailed name of officer administering batti	The of officer a	Jan

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 10
18 FILER NA	ME	19 Filer ID	
Malveaux	ς, Julia		
	E SUBTOTALS SCHEDULE		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. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 4,293.97
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.	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 CONTRIBUTION	ONS	\$
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 4.39

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel On the Control of Control of Control

Candidate/Officeholder/Politica Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/6 Rpt: 4/10	2 FILER NAME Malveaux, Julia 3 Filer ID
4 Date 08/27/2024 6 Amount (\$)	5 Payee name AFL-CIO Dallas 7 Payee address; City; State; Zip Code
\$40.00	1408 N Washington Dallas, TX 75204
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor Day Breakfast
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 11/27/2024	Payee name Collins, Darryl
Amount (\$) \$360.00	Payee address; City; State; Zip Code 2225 Spring Mills Rd Mesquite, TX 75181
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 Staff appreciation catering for Thanksgiving
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/02/2024	Payee name Friendship Twenty Foundation
Amount (\$) \$75.00	Payee address; City; State; Zip Code P.O. Box 15927 Ft Worth, TX 76119
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Scholarship sponsorship
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/6 Rpt: 5/10	Malveaux, Julia
4	Date	5 Payee name
	09/22/2024	J L Turner Legal Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	2101 Ross Ave
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Luncheon with Dallas Bar Association
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
ı	07/12/2024	Kroger
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$157.56	536 Centennial Blvd
ı		
		Richardson, TX 75081
⊢	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Food bank donation
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
Г	Date	Payee name
	12/08/2024	Legacy 1st Cleaners
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$16.68	908 Audelia Rd. Ste 700
		Richardson, TX 75081
Г	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.
ı	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Robe dry cleaning
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		,

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees Food/Beverage Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment Gift/Awards/Memorials Expense Travel Out of District Legal Services 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 Sch: 4/6 Rpt: 7/10 Malveaux, Julia 4 Date Payee name 10/27/2024 Sams Club State; Zip Code Amount (\$) Pavee address: City; \$368.00 5150 N Garland Ave Garland, TX 75040 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift cards for donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/03/2024 **TJMaxx** Amount (\$) Payee address; City; State; Zip Code 9100 N Central Expy \$16.23 Dallas, TX 75231 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for courtroom Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/05/2024 Target City; Payee address; State; Zip Code Amount (\$) \$25.00 2417 N Haskell Ave. Dallas, TX 75204 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Gift for donation Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Polling Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1: Sch: 5/6 Rpt: 8/10	2 FILER NAME Malveaux, Julia 3 Filer ID	
4	Date 12/09/2024	5 Payee name Target	
6	Amount (\$) \$1,050.00	7 Payee address; City; State; Zip Code 601 S Plano Rd	
L		Richardson, TX 75080	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff holiday appreciation gifts	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 12/13/2024	Payee name Target	
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 601 S Plano Rd Richardson, TX 75080	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Holiday gifts cards for staff appreciation	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date 07/03/2024	Payee name USPS	
	Amount (\$) \$232.00	Payee address; City; State; Zip Code 9130 Markville Dr Dallas, TX 75243	
	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 PO Box rental fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense
Fees
Food/Beverage Expense
Gitl/Awards/Memorials Expense
Poining Expense
Printing Expense
Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Serv				/ages	/Contract Labor		OTHER (enter	a category not listed above)	
L		_			ruction Guid	ie explains	now to co	mpie	ete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME	Ε						3	Filer ID		
	Sch: 3/6 Rpt: 6/10		Malveaux, .	Julia									
4	Date	5	Payee name										
	07/25/2024		Malveaux,										
L		_				S: :	7: 0	1					
6	Amount (\$)	l'	Payee addre		City;	State	; Zip Co	ae					
	\$131.42		PO Box 740	0363									
		ı	Dallas, TX	75374									
8	PURPOSE	(a)	Category (S	as Catanasi	as listed at the	top of this cob	adula)	(b)	Description				
	OF	()	Loan Repar				ledule)	` '		outsi	ide of Texas. Co	implete Schedule T.	
	EXPENDITURE		Loan Nepa	ymemory	Ciribaise	ment			Check if Austin,	, TX	officeholder livi	ng expense	
									Reimburseme	ent	of expense	es from personal fu	nds,
									noted on earli	ier	reports		
9	Complete ONLY if direct		Candidate/Off	iceholder	name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н											
	Date	Т	Payee name										
	12/14/2024		Pappadeau		urant								
⊢		⊢				Ct-t-	7:- 0-	4-					
	Amount (\$)		Payee addre		City;	State	; Zip Co	ae					
	\$1,400.00		725 S Cent	rai Expy	′								
			Richardson	, TX 750	080								
Г	PURPOSE	(a)	Category (S	ee Categori	es listed at the	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Food/Bever				1980					implete Schedule T.	
	EXPENDITORE								Check if Austin,			ng expense	
									Holiday staff I	lun	cneon		
L													
	Complete ONLY if direct		Candidate/Off	iceholder	name	(Office sou	ght			Office	held	
	expenditure to benefit C/OI	Н											
Г	Date	Г	Payee name										
	10/01/2024		Saint Luke	Commu	nity Unite	d Methodi	ist Churc	h					
H	Amount (\$)	\vdash	Payee addre	ss: C	City;	State	; Zip Co	de					
	\$101.43	l	5710 E R L										
	Q101.40		0/10 2 11 2	111011110									
			D-II	75000									
L			Dallas, TX	75223									
	PURPOSE	(a)	Category (S				nedule)	(b)	Description				
	OF EXPENDITURE		Contribution									omplete Schedule T.	
			Candidate/	Officeho	lder/Politi	cal Comm	nittee				, officeholder livi		
									Women's Ret	uea	at donation		
L							- 40						
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder	name	(Office sou	ght			Office	neid	
	experience to belief C/O												
_													

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Polling Expense Polling Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services		Salari		nse es/Contract Labor lete this form.		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 6/6 Rpt: 9/10	2	FILER NAME Malveaux,						3	Filer ID
4	Date 09/10/2024	5	Payee name USPS						_	
6	Amount (\$) \$9.85	7	Payee addre 9130 Marky Dallas, TX	ville Dr	i	State; Zip	Code			
8	PURPOSE OF EXPENDITURE	(a)	Category (S Office Over				(b			ide of Texas. Complete Schedule T., officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder na	me	Office :	sough	t		Office held
	Date 11/03/2024		Payee name USPS							
	Amount (\$) \$10.80		Payee addre 9130 Marky Dallas, TX	ville Dr		State; Zip	Code			
	PURPOSE OF EXPENDITURE	(a)	Category (S Office Over				(b			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder na	me	Office s	sough	t		Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Inches						
		on Guide explains how to complete this form.	1		ages Schedule K: L/1 Rpt: 10/10	
FILER NAM Malveaux,			3	Filer ID)	
Date		Name of person from whom amount is received			8 Amount (\$)	
12/31/2024		America's Credit Union				\$4.39
	6	Address of person from whom amount is received; City; State; Zip Code 2154 Forest Ln	••••••	•••••		
		Garland, TX 75042				
	7	Purpose for which amount is received	neck if polit	ical cont	ribution returned to filer	