FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. 33 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Nicole NAME Date Received NICKNAME LAST SUFFIX Taylor CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** Post Office Box 2011 MAILING Amount Receipt # **ADDRESS** Change of Address Cedar Hill, TX 75106 MI CAMPAIGN MS / MRS / MR **FIRST TREASURER** NAME SUFFIX NICKNAME LAST STATE: ZIP CODE CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; TREASURER **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE REPORT TYPE 15th day after campaign treasurer 30th day before election Runoff January 15 appointment (officeholder only) Final Report (Attach C/OH-FR) Χ July 15 8th day before election Exceeded modified reporting limit Day PERIOD Day Year Month Year COVERED **THROUGH** 06/30/2024 01/01/2024

Primary

General

ELECTION TYPE

12 OFFICE SOUGHT (if known)

Other

Runoff

Special

	GO TO PAGE 2
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us

Judge County Court at Law 5 Place 5 District Dallas

ELECTION DATE

OFFICE HELD (if any)

Cnty Dallas

Month

10 ELECTION

11 OFFICE

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH **COVER SHEET PG 2**

2 of 33

13 C / OH NAME	Taylor, Nicole		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without the difficeholders are required to report this information	ne candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	M	
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE	I. IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC	PLEDGES, LOANS, CTRONICALLY)	\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 0.00
EXPENDITURE TOTALS	The state of the s	IZED POLITICAL EXPENDITURES	7	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 12,439.82
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 3,691.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
	JILLIAN TOWNSEND	I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the accor information required to b	mpanying report is be reported by me
	Notary ID #130579989 My Commission Expires March 11, 2028	Mude) Signature of	Candidate or Officeholde	er
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid VICOL Taylon. ertify which, witness my hand and seal of office.	, this the	day
0 - 11	1, 20 0	Stary William, Walless Hy Higha and Scar of Office.		
J. Clien,	housing	Jillian Townsend	Notary	dministaring oath
Signature of office	er administering oath	Printed name of officer administering oath	Title of officera	dministering oath

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SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

		3 of 33			
18 FILER NAME Taylor, Nicole					
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT			
1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	5			
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	3			
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	5			
4. SCHEDULE E(J): LOANS (JUDICIAL)	\$	3			
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	s \$	12,439.82			
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	3			
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS \$	3			
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	3			
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	3			
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH \$	3			
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS \$	5			
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS INTO FILER	RETURNED \$	2,740.83			
I .					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials 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
	Sch: 1/28 Rpt: 4/33	Taylor, Nicole
4	Date	5 Payee name
	03/14/2024	Abounding Prosperity Inc
6	Amount (\$) \$50.18	7 Payee address; City; State; Zip Code 1705 Martin Luther King Jr Blvd Suite C Dallas, TX 75215
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Tickets to Grandeur Affair Celebration of Life for Kirk
		Meyers
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2024	Alankar Food Court
	Amount (\$) \$6.48	Payee address; City; State; Zip Code 600 Commerce Street
		Dallas, TX 75201
	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 Meal in George Allen
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/25/2024	Allianz Travel Insurance
	Amount (\$) \$31.85	Payee address; City; State; Zip Code PO Box 72031
		Richmond, VA 23255
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel Insurance
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		Vorsion VA 1.0 d278aha0

SCHEDULE F1

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

ement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category por listed above)

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 2/28 Rpt: 5/33	Taylor, Nicole	
4	Date	5 Payee name	
	01/10/2024	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$16.75	410 Terry Ave N	
		Seattle, WA 98109	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expense	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule 1, Check if Austin, TX, officeholder living expense	
		Courtroom Supplies	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
Г	Date	Payee name	
	01/11/2024	Amazon	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$29.35	410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense.	
		Courtroom Supplies	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
F	Date	Payee name	
	01/12/2024	Amazon	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$47.76	410 Terry Ave N	
	******	200 (200) (200 to	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Courtroom Supplies	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	Н	
\vdash			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Fees Coffice Overhead/Rental Expense
Food/Beverage Expense
Gift/Awards/Memorials Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 3/28 Rpt: 6/33	Taylor, Nicole	
4	Date	5 Payee name	
	01/16/2024	Amazon	
6	Amount (\$) \$55.38	7 Payee address; City; State; Zip Code 410 Terry Ave N	
	φ33.36	410 Telly Ave N	
		Seattle, WA 98109	
8	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	
		Courtroom Supplies	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
L	experialiture to beliefft C/Of		
	Date	Payee name	
	02/26/2024	Amazon	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$30.26	410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Courtroom Supplies	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	03/12/2024	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$62.50	410 Terry Ave N	
		Seattle, WA 98109	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Courtroom Supplies	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
\vdash			
1			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 4/28 Rpt: 7/33	2 FILER NAME Taylor, Nicole 3 Filer ID
4 Date 03/14/2024	5 Payee name Amazon
6 Amount (\$) \$94.06	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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 Courtroom Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 03/27/2024	Payee name Amazon
Amount (\$) \$46.48	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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 Courtroom Supplies
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 04/26/2024	Payee name Amazon
Amount (\$) \$33.43	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
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 Courtroom Supplies
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	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
Sch: 5/28 Rpt: 8/33	Taylor, Nicole
4 Date	5 Payee name
04/26/2024	Amazon
6 Amount (\$) \$17.58	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109
8 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 Courtroom Supplies
Ocomplete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/15/2024	Amazon
Amount (\$) \$61.68	Payee address; City; State; Zip Code 410 Terry Ave N
	Seattle, WA 98109
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 Courtroom Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/06/2024	Amazon
Amount (\$) \$167.63	Payee address; City; State; Zip Code 410 Terry Ave N
	Seattle, WA 98109
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 Courtroom Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
forms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.d378aba

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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
	Sch: 6/28 Rpt: 9/33	Taylor, Nicole
4	Date	5 Payee name
	01/02/2024	American Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$144.91	PO Box 619616
		DFW Airport, TX 75261
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Travel for Conference
		Traver for Conference
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiantare to benefit or or	
	Date	Payee name
	01/25/2024	American Airlines
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$444.20	PO Box 619616
		10 1-00 (CONTROLOGICAL CONTROLOGICAL CONTROLOGICA CON
		DFW Airport, TX 75261
L		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if travel outside of Texas, Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Travel for Judicial Conference
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
H	Date	Payee name
	01/25/2024	American Airlines
L		(All Principles Section Control of Control o
	Amount (\$)	Payee address; City; State; Zip Code
	\$215.00	PO Box 619616
		DFW Airport, TX 75261
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXILITORE	Check if Austin, TX, officeholder living expense Travel for Judicial Conference
		Traver for Sudicial Conference
_		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	onperioration to belief 6/0	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	ai Con	The Instruction Guide explains how t	to comp	plete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
	Sch: 7/28 Rpt: 10/33	1	Taylor, Nicole		
4	Date	5	Payee name		
	01/29/2024		American Airlines		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	e
	\$139.75		PO Box 619616		
			DFW Airport, TX 75261		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	b) Description
	OF EXPENDITURE		Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE				Check if Austin, TX, officeholder living expense Travel for Conference
					Traver for Conference
9	Complete ONLY if direct	<u>_</u>	andidate/Officeholder name Office	sough	ht Office held
9	expenditure to benefit C/OI		andidate/Officerioider frame	Sough	The Since Held
\vdash	Date	Т	Payee name		
	02/28/2024	1	American Airlines		
<u> </u>		_			
	Amount (\$)	1	Payee address; City; State; Zip PO Box 619616	Code	e
	\$129.33		PO B0x 613616		
L			DFW Airport, TX 75261		
	PURPOSE OF	1	Category (See Categories listed at the top of this schedule)	(b	b) Description
	EXPENDITURE		Travel Out of District		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Travel for Conference
一	Complete ONLY if direct	C	Candidate/Officeholder name Office	sough	ht Office held
	expenditure to benefit C/OI	Н			
	Date	Г	Payee name		
	03/14/2024		American Airlines		
Г	Amount (\$)		Payee address; City; State; Zip	Code	le
	\$563.84		PO Box 619616		
			DFW Airport, TX 75261		
Г	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	(b) Description
	OF EXPENDITURE	1	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense Travel
					Havei
-	Complete ONLY if direct		Candidate/Officeholder name Office	sough	ht Office held
1	expenditure to benefit C/OI			3	Supplication of the Control of the C
\vdash					
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense o Mada Bu Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 8/28 Rpt: 11/33	Taylor, Nicole
4	Date	5 Payee name
	04/29/2024	American Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$241.06	PO Box 619616
		DFW Airport, TX 75261
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EM EMBRONE	Check if Austin, TX, officeholder living expense
		Travel for Conference
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit or or	
	Date	Payee name
	06/24/2024	American Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$165.47	PO Box 619616
		DFW Airport, TX 75261
\vdash	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Travel for Conference
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
Г	Date	Payee name
	05/09/2024	American Inns of Court
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$115.00	225 Reinekers Lane
		Transparent Editional Analysis (Analysis)
		Alexandria, VA 22314
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Joint Inns Meeting Ticket
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experience to belief C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 9/28 Rpt: 12/33	Taylor, Nicole
4	Date	5 Payee name
	03/01/2024	Arts District Mansion
6	Amount (\$) \$25.50	7 Payee address; City; State; Zip Code 2101 Ross Avenue
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
1	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
1		Check if Austin, TX, officeholder living expense
		Lunch
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/02/2024	Best Buy
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$96.34	731 N Hwy 67
	Ψ30.34	731 WTIWY 07
		Cedar Hill, TX 75104
	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
		Laptop Cover
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/05/2024	Best Buy
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$248.96	6006 E. Sam Houston Pkwy
		Houston, TX 77049
	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.
1	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Keyboard
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
1	Sch: 10/28 Rpt: 13/33	Taylor, Nicole
4	Date	5 Payee name
	06/26/2024	Beyond the Slogan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	2710 Routh Creek #4120
		Richardson, TX 75082
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign services TDP convention
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	05/20/2024	Buffalo Wild Wings
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.91	7800 Airport Blvd. C-104
		Houston, TX 77061
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meal at Airport
		ivieal at Allport
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/01	
	Date	Payee name
	03/01/2024	Chick-Fil-A
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$52.25	300 Hwy 67
	Φ32.23	300 HWy 67
		December TV 75407
L		Duncanville, TX 75137
	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.
	EM EMPHONE	Check if Austin, TX, officeholder living expense
		Staff Meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 11/28 Rpt: 14/33	Taylor, Nicole
4	Date	5 Payee name
	05/20/2024	Chick-Fil-A
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.42	300 Hwy 67
		Duncanville, TX 75137
8	PURPOSE	Inv
°	OF	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Staff Meal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
l	03/07/2024	Cindis Deli
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$34.86	307 S. Houston St.
		Dallas, TX 75203
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Staff Lunch
L		
	Complete ONLY if direct expenditure to benefit C/OR	Candidate/Officeholder name Office sought Office held
L	experientare to benefit Grot	
	Date	Payee name
	04/17/2024	Cindis Deli
	Amount (\$)	Payee address; City; State; Zip Code
1	\$87.46	307 S. Houston St.
		Dallas, TX 75203
Г	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.
l	EXILITIONE	Check if Austin, TX, officeholder living expense Staff Lunch
		Stall Lulicii
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	Cardidate of morning trains
\vdash		

SCHEDULE F1

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

	Candidate/Officeholder/Politica Credit Card Payment		ee Legal Services	on Guide explains		es/Contract Labor	OTHER (enter a c	category not listed above)
1	Total pages Schedule F1:	2 FIL	ER NAME				3 Filer ID	
	Sch: 12/28 Rpt: 15/33		vlor, Nicole				CONTROL STATE OF THE STATE OF T	
4	Date	5 Pay	ee name					
	04/18/2024	Cin	dis Deli					
6	Amount (\$)	7 Pay	ee address; City;	State;	Zip Code			
	\$15.37	307	' S. Houston St.					
		Dal	las, TX 75203					
8	PURPOSE	(a) Cat	egory (See Categories list	ed at the top of this sch	edule) (b	Description		
	OF EXPENDITURE	Foo	od/Beverage Expens	se			outside of Texas. Comp n, TX, officeholder living	
						Staff Lunch	i, 1X, officeriolder living	expense
						Stan Editori		
_	Complete ONLY if direct	Conc	lidata/Officebolder per		Office sought		Office hel	Id
9	Complete ONLY if direct expenditure to benefit C/OI		lidate/Officeholder nar	ne C	mice sough		Office He	iu
_	and the second s							
	Date		ee name					
	03/15/2024	City	of DeSoto					
	Amount (\$)	Pay	ee address; City;	State;	Zip Code			
	\$748.79	211	East Pleasant Run	Rd.				
		De	Soto, TX 75115					
	PURPOSE	(a) Cat	egory (See Categories list	ed at the top of this sch	edule) (b	Description		
	OF EXPENDITURE	Adv	ertising Expense				outside of Texas, Comp n, TX, officeholder living	
							sary Table Spon	
						70417411110	outy rubic opon	
-	Complete ONLY if direct		lidate/Officeholder nar	ne C	Office sought		Office he	ld
	expenditure to benefit C/OI	H 						
	Date	Pay	ee name					
	01/11/2024	Co	stco Gas					
	Amount (\$)	Pay	ee address; City;	State;	Zip Code			
	\$71.58	250) Hwy 67					
		Du	ncanville, TX 75137					
	PURPOSE OF	25/00/5	egory (See Categories list	ed at the top of this sch	edule) (b	Description		Lie Cobert la T
	EXPENDITURE	Tra	vel In District				outside of Texas. Comp n, TX, officeholder living	
						Gas	i, ix, oncerioder iving	ехрепзе
\vdash	Complete ONLY if direct	Cann	lidate/Officeholder nar	ne C	Office sought	<u> </u>	Office he	ld
	expenditure to benefit C/O		nadici Onicentidei Hai		oc sough		233 1101	0.770
\vdash								

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

Contributions/ Donations Made By 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:	
Sch: 13/28 Rpt: 16/33	Taylor, Nicole
4 Date	5 Payee name
02/26/2024	Costco Gas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$55.44	250 Hwy 67
And the Control of Con	
	Duncanville, TX 75137
8 PURPOSE	
OF OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Gas
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
03/07/2024	Costco Gas
Amount (\$)	Payee address; City; State; Zip Code
\$48.15	250 Hwy 67
	, and the second
	Duncanville, TX 75137
DUDDOCE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Gas
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/10/2024	Costco
Amount (\$)	Payee address; City; State; Zip Code
\$121.69	250 Hwy 67
	Duncanville, TX 75137
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Jury Snacks
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Forms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gui			/ages	Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME					[3	3	Filer ID	
	Sch: 14/28 Rpt: 17/33		Taylor, Nicol	le							
4	Date	5	Payee name								
	02/26/2024		Costco								
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de				
	\$45.98		250 Hwy 67								
			•								
			Duncanville,	TX 75137							
8	PURPOSE	(a)	Category (See	e Categories listed at the	top of this sch	edule)	(b)	Description			
	OF			age Expense				Check if travel ou	utsid	e of Texas. Complete Schedule T,	
l	EXPENDITURE								TX, c	officeholder living expense	
l								Jury Snacks			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	C	Office sou	ght			Office held	
L	experialture to benefit C/Or	:1									
	Date		Payee name								
	06/06/2024		Costco								
Н	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de				
	\$108.99		250 Hwy 67								
			Duncanville,	TV 75127							
L											
	PURPOSE OF	(a)		e Categories listed at the	top of this sch	edule)	(b)	Description	uteid	e of Texas. Complete Schedule T.	
	EXPENDITURE		Food/Bevera	age Expense						officeholder living expense	
								Jury snacks		3000 B 100 C 1800 R C 18	
H	Complete ONLY if direct	(Candidate/Offic	eholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/O	4									
F	Date		Payee name								
	04/22/2024		Costo								
⊢	Amount (\$)	_	Payee addres	s; City;	State:	; Zip Co	de		_		
	\$66.50		250 Hwy 67	s, City,	State,	, Zip C0	ue				
	\$00.50		230 HWy 07								
			Duncanville,	TX 75137							
	PURPOSE	(a)	Category (See	e Categories listed at the	top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Office Overh	ead/Rental Expe	ense					e of Texas. Complete Schedule T.	
								Courtroom Su		officeholder living expense	
								Courtiooni Su	hhi		
\vdash	2 /: 2:::::::::::::::::::::::::::::::::		0 11 1 1 1 1 1 1			D#F # -	a le c		_	Office hold	-
1	Complete ONLY if direct expenditure to benefit C/OR		Candidate/Offic	enolder name	C	Office sou	ynt			Office held	
L	- Formula to content of or						_				

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		Expens Wages	e /Contract Labor		Travel District Travel Out of District OTHER (enter a category not listed at	oove)	
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	
	Sch: 15/28 Rpt: 18/33	L	Taylor, Nico	ole							
4	Date	5	Payee name								
	02/13/2024		DFW Airpor	rt Valet							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip C	ode				
	\$184.90		DFW Intern	ational Airport							
			Dallas, TX	75261							
8	PURPOSE	(a)	Category (S	ee Categories listed at th	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Travel Out	of District						ide of Texas. Complete Schedule T.	
								Parking	i, I.X.	, officeholder living expense	
							1	Larking			
_	Complete ONLY if direct	L	Candidata (O#	iceholder name		Office so	ught			Office held	
9	expenditure to benefit C/O		Jandidate/Oili	cenoider name		mice so	ugrit			Office field	
Г	Date	Γ	Payee name								
	04/23/2024		DFW Airpor	rt Valet							
Г	Amount (\$)	Т	Payee addre	ss; City;	State;	Zip C	ode				
	\$129.90		DFW Intern	ational Airport							
			Dallas, TX	75261							
⊢	PURPOSE	(0)					T(h)	Description			
	OF	(a)	Travel Out	ee Categories listed at th	e top of this sch	edule)	(6)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Travel Out	of District						, officeholder living expense	
								Parking			
Г	Complete ONLY if direct		Candidate/Offi	iceholder name	C	Office so	ught			Office held	
	expenditure to benefit C/OI	Н									
Г	Date	Г	Payee name								
	05/23/2024		DFW Airpor	rt Valet							
\vdash	Amount (\$)	\vdash	Payee addre	ss; City;	State:	Zip C	ode				
1	\$97.43			ational Airport							
	2.5										
			Dallas, TX	75261							
_		,					Tax				
	PURPOSE OF	(a)		ee Categories listed at th	ne top of this sch	edule)	(a)	Description Check if travel	Outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Travel Out	of District						, officeholder living expense	
								Parking			
\vdash	Complete ONLY if direct	_	Candidate/Offi	iceholder name		Office so	ught			Office held	
	expenditure to benefit C/OI										
\vdash											

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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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorial Legal Services The Instruction G			Vages	s/Contract Labor		OTHER (enter a category not	listed above)
1	Total pages Schedule F1:	2							3	Filer ID	
L	Sch: 16/28 Rpt: 19/33	L	Taylor, Nico	ile							
4	Date	5	Payee name								
	03/21/2024		Dallas Cour	nty East Democ	crats						
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
	\$26.00		1414 N Was	shington Ave							
				_							
			Dallas, TX 7	75204							
L		7 U.S. 2									
8	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description		de al Taure Complete School	lo T
	EXPENDITURE		Fees							de of Texas. Complete Schedu officeholder living expense	le I,
								Membership	115391	3	
	Complete ONII V if direct	L_	Candidata/Offi	ceholder name	0	Office sou	aht		_	Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		zandidate/Oni	cerioider name		mice sou	grit			Office field	
L		_							_		
	Date		Payee name								
	05/17/2024		Del Frisco's								
Г	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$90.78		5061 Westh	eimer Rd. Ste.	8060						
			Houston, TX	< 77056							
⊢	PURPOSE	(2)					(h)	Description			
	OF	(a)		ee Categories listed at age Expense	the top of this sche	edule)	(5)		utsio	de of Texas. Complete Schedu	le T.
	EXPENDITURE		roou/bever	age Expense						officeholder living expense	318-000AD
l								Meat at Judici	ial	Conference	
Г	Complete ONLY if direct	(Candidate/Offi	ceholder name	0	Office sou	ght			Office held	
	expenditure to benefit C/OI	Н									
F	Date	Г	Payee name								
l	01/17/2024		Ecolatino								
⊢		\vdash	Payee addre	ce: City:	State:	Zip Co	de		_		
l	Amount (\$) \$100.00		3606 S. Tyl		State,	Zip Co	de				
	\$100.00		3000 S. Tyl	er St.							
ı											
			Dallas, TX	75224							
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Gift/Awards	/Memorials Exp	oense					de of Texas. Complete Schedu officeholder living expense	le T.
								Coat Blanket			
								Coat Diarret	011	ve Donation	
\vdash	Complete ON V 3 direct	L_	Candidata (Off	ceholder name		Office sou	abt			Office held	
	Complete ONLY if direct expenditure to benefit C/O		Januluate/Offi	centituer name	C	Allice Sou	yrıı			Office field	
L											

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 17/28 Rpt: 20/33	2 FILER NAME Taylor, Nicole 3 Filer ID
4 Date 01/03/2024	5 Payee name Extra Space Storage
6 Amount (\$) \$111.00	7 Payee address; City; State; Zip Code 303 E Hwy 67 Cedar Hill, TX 75137
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 Campaign Storage
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 02/05/2024	Payee name Extra Space Storage
Amount (\$) \$111.00	Payee address; City; State; Zip Code 303 E Hwy 67 Cedar Hill, TX 75137
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 Campaign Storage
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 03/04/2024	Payee name Extra Space Storage
Amount (\$) \$111.00	Payee address; City; State; Zip Code 303 E Hwy 67
	Cedar Hill, TX 75137
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 Campaign Storage
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		d above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 18/28 Rpt: 21/33	Taylor, Nicole	
4	Date	5 Payee name	
L	04/04/2024	Extra Space Storage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$111.00	303 E Hwy 67	
		Cedar Hill, TX 75137	
8	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	
		Campaign Storage	
		Campaign Storage	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
٦	expenditure to benefit C/OI	Carranator Circulator Harris	
⊨	2.4		
	Date	Payee name	
L	05/06/2024	Extra Space Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$126.00	303 E Hwy 67	
		Cedar Hill, TX 75137	
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. Check if Austin, TX, officeholder living expense	
		Campaign Storage	
		oumpaight otolage	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
F	Date	Payee name	
	06/03/2024	Extra Space Storage	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$126.00	303 E Hwy 67	
	Ψ120.00	300 E 1111 01	
		Cedar Hill, TX 75137	
H	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.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign Storage	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
\vdash			
	rms provided by Texas E	Ethics Commission www.ethics.state.tx.us Version V4.	.1.0.d378aba0
LO	IIIIS PIOVIDED BY TEXAS E	_uiica Commission www.cuiica.atate.tx.taa version v-	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		ry not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 19/28 Rpt: 22/33	Taylor, Nicole	
4	Date	5 Payee name	
	01/02/2024	Green & Green	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$200.00	4100 Spring Valley	
		Dallas, TX 75244	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	
	EXPENDITORE	Check if Austin, TX, officeholder living expens	
		Ad for MLK Legacy Awards Progr	am
0	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/Ol		
	Date	Payee name	
	06/04/2024	Hickory Hollow	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.26	8038 Fallbrook Dr	
		Houston, TX 77064	
	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 So	
	year adaptifikasi aktologio neet Epithologio Ethiologio Philosophii Philosophi	Meal at Judicial Conference	SC .
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
_			
	Date	Payee name	
	05/22/2024	Indianapolis Marriott Downtown	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$90.21	350 W Maryland St	
		Indianapolis, IN 46225	
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Sci	chedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expens	se
		Meal	
_	Complete ONII V 3 dis-	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OR	Carrata and the carrain and th	
_	3511		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 20/28 Rpt: 23/33	Taylor, Nicole
4 Date	5 Payee name
05/22/2024	Indianapolis Marriott Downtown
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$90.21	350 W Maryland St
	Indianapolis, IN 46225
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
New Section of the Se	Meal
	Wicai
O Complete ONE Vitalizant	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Carranates Chicaria harris
2007	
Date	Payee name
02/06/2024	Interdenominational Ministerial Alliance of Dallas
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	8350 Forest Lane
	Dallas, TX 75243
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas, Complete Schedule T.
	Check if Austin, TX, officeholder living expense Gala Ad
	Gaid Au
0	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/C	Carlatator of the control of that to
Date	Payee name
03/11/2024	JW Marriott Houston Galleria
Amount (\$)	Payee address; City; State; Zip Code
\$913.37	5150 Westheimer Rd
	Houston, TX 77056
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Hotel for NBA Convention
	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
,001	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Leg	/Awards/Memorials Expe al Services e Instruction Guide	Salaries/\	Wages	s/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
L	Sch: 21/28 Rpt: 24/33		Taylor, Nicole							
4	Date	5	Payee name							
	03/15/2024		Jotform							
6	Amount (\$)	7	Payee address;	City;	State; Zip Co	ode		_		
	\$505.44		4 Embarcadero	Center, Suite 7	780					
			San Francisco	, CA 94111						
8	PURPOSE	(a)	Category (See Category	ategories listed at the to	p of this schedule)	(b)	Description			1
	OF EXPENDITURE			ad/Rental Expen					de of Texas. Complete Schedule T.	Ì
							100000000000000000000000000000000000000		officeholder living expense tion for Court Zoom Hearings	
							Annual Subsc	λη ρ ί	aon for Court Zooni Fleatings	
-	Complete Chilly V	L	Condid-+-1000	older see-	Off	IGE.			Office hold	_
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeh	lolder name	Office sou	ugnt			Office held	
L		_						_		_
	Date		Payee name							
	03/07/2024		Microsoft							
	Amount (\$)		Payee address;	City;	State; Zip Co	ode				
	\$108.23		1 Microsoft Wa	ıy						
			Redmond, WA	98052						
Г	PURPOSE	(a)	Category (See Category	ategories listed at the to	p of this schedule)	(b)	Description		9 4 4 4 4	
	OF EXPENDITURE			ad/Rental Expen					de of Texas, Complete Schedule T,	
							Software	ıx,	officeholder living expense	
							Sommare			
\vdash	Complete ONLY if direct		Candidate/Officeh	older name	Office sou	ıght			Office held	
	expenditure to benefit C/OF		24.6.01116611		200 001					
-	Date	$\overline{}$	Payee name					_		-
	02/14/2024		National Bar A	ssociation						
\vdash	Amount (\$)	\vdash	Payee address;		State; Zip Co	ode				
	\$375.00		1816 12th Stre		State, Lip C	Juc				
	Φ3/3.00		1010 1201 200	OC 14VV						
			Washington, D	C 20009						
L	PURCOS	, .			7	/h->	Description			
	PURPOSE OF	(a)		ategories listed at the to	p of this schedule)	(a)	Description Check if travel or	outsic	de of Texas. Complete Schedule T.	
	EXPENDITURE		Fees						officeholder living expense	
							Membership [
	Complete ONLY if direct		Candidate/Officeh	older name	Office sou	ught		_	Office held	
	expenditure to benefit C/OH	Н								
		_								
Fo	orms provided by Texas E	thic	cs Commission	www	ethics.state.tx.	JS		_	Version V4.1.0.d378aba	a0

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee	Gift/Awards/Memorials (Legal Services The Instruction Gu			/ages	s/Contract Labor		ravel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME					3	3 F	iler ID
	Sch: 22/28 Rpt: 25/33		Taylor, Nico	le						
4	Date	5	Payee name							
	02/20/2024		National Bar	Association						
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de			
1	\$200.00		1816 12th S	treet NW						
		,	Washington,	DC 20009						
8	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sch	nedule)	(b)	Description		
l	OF EXPENDITURE		Event Exper							of Texas. Complete Schedule T.
l								Conference Re		fficeholder living expense
ı								Comercince N	eyis	stration
L		Ļ				2/5				Office hald
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	(Office sou	gnt			Office held
L										
	Date	1	Payee name							
	01/16/2024		Papa Johns							
	Amount (\$)	-	Payee addres	s; City;	State	; Zip Co	de			
	\$92.76		3501 McKini	ney Ave						
		1	Dallas, TX 7	5204						
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sch	edule)	(b)	Description		
	OF			age Expense						of Texas. Complete Schedule T.
	EXPENDITURE								TX, of	fficeholder living expense
								Jury Meal		
_		L								
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office sou	ght			Office held
L										
	Date		Payee name							
	02/20/2024	0	Papa Johns							
	Amount (\$)	1	Payee addres	s; City;	State	; Zip Co	de			
	\$42.20		3501 McKini	ney Ave						
		1	Dallas, TX 7	5204						
Г	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sch	iedule)	(b)	Description		
	OF EXPENDITURE	2.00		age Expense						of Texas. Complete Schedule T.
	EXPENDITORE								TX, of	fficeholder living expense
								Jury Meal		
L	2 11 2.0.00 c					D#6 4 -	al-:		_	Office hold
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office sou	gnt			Office held
L										

SCHEDULE F1

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

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

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

Candidate/Officeholder/Politic Credit Card Payment	All 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
Sch: 23/28 Rpt: 26/33	Taylor, Nicole
4 Date	5 Payee name
02/20/2024	Papa Johns
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$13.51	3501 McKinney Ave
	Dallas, TX 75204
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
	Jury Meal
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
Date	Payee name
04/04/2024	Pappadeaux
Amount (\$)	Payee address; City; State; Zip Code
\$131.41	3520 Oak Lawn Ave.
	Dallas, TX 75219
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
	Judicial Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	DH
Date	Payee name
04/05/2024	Pappadeaux
Amount (\$)	Payee address; City; State; Zip Code
\$170.00	3520 Oak Lawn Ave.
	Dallas, TX 75219
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
	Staff Meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C	
Forms around deal by Territory	This Commission Was athis state ty us Version V4.1.0 d378aha0

SCHEDULE F1

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memonals Expense Inmittee Gift/Awards/Memonals Expense Legal Services The Instruction Guide explains how to complete this form		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME	3	Filer ID
	Sch: 24/28 Rpt: 27/33		Taylor, Nicole		
4	Date	5	Payee name		
	01/03/2024		SMU Continuing & Professional Education		
6	Amount (\$)	7	Payee address; City; State; Zip Code		
	\$359.00		5539 SMU Blvd		
			Dallas, TX 75206		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description	on	
	OF EXPENDITURE		Fees		de of Texas. Complete Schedule T.
	EXPENDITURE				officeholder living expense
			Spanish	Langua	ige Course
9	Complete ONLY if direct		Candidate/Officeholder name Office sought		Office held
	expenditure to benefit C/O	П			
	Date		Payee name		
	03/15/2024		Senate District 16 PAC		
\vdash	Amount (\$)		Payee address; City; State; Zip Code		
	\$50.00		2504 Summit Drive		
	resource of 2017				
			Irving, TX 75062		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE		Advertising Expense		de of Texas. Complete Schedule T.
			Sponsor		officeholder living expense
			Sportson	F	
\vdash	Complete ONLY if direct		Candidate/Officeholder name Office sought		Office held
	expenditure to benefit C/OI				
H	Date	Т	Payae name		
1	01/26/2024		Payee name Texas Center for the Judiciary		
\vdash		\vdash	*		
	Amount (\$)		Payee address; City; State; Zip Code		
	\$110.00		1210 San Antonio Ste. 800		
			Austin, TX 78701		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE		1 663		de of Texas. Complete Schedule T.
					officeholder living expense gistration
			Connere	nee neg	not allon
\vdash	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office cought		Office held
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office sought		Office field
L					
Fo	rms provided by Texas E	thic	s Commission www.ethics.state.tx.us		Version V4.1.0.d378aba

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Guid			ages	/Contract Labor		OTHER (enter a category	not listed above)
1	Total pages Schedule F1:	2	FILER NAME	:					3	Filer ID	
_	Sch: 25/28 Rpt: 28/33	_	Taylor, Nico								
4	Date	5	Payee name								
	02/05/2024		Texas Justi	ce Democrats PA	С						
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
l	\$500.00		6333 Mocki	ingbird Lane, Ste.	147 Box 80	00					
ı											
			Dallas, TX	75214							
8	PURPOSE	(a)	Category (s	ee Categories listed at the	top of this sched	dule)	(b)	Description	_		
	OF		Advertising		top of this series	adic)			outsi	de of Texas. Complete Sch	nedule T.
l	EXPENDITURE							Check if Austin	, TX,	officeholder living expense	
ı								Advertising			
9			Candidate/Off	iceholder name	Of	ffice sou	ght			Office held	
	expenditure to benefit C/OI	4									
Г	Date		Payee name								
	03/21/2024		Texas Spic	e Restaurant							
Г	Amount (\$)	Г	Payee addre	ss; City;	State;	Zip Co	de				
	\$43.00		555 S Lama	ar St							
1											
			Dallas, TX	75202							
⊢	BUBBBBB		17				/l=\	-	_		
l	PURPOSE OF	(a		ee Categories listed at the	top of this sched	dule)	(D)	Description	outsi	de of Texas. Complete Sch	nedule T
l	EXPENDITURE		Food/Bever	age Expense						officeholder living expense	
l								Judicial Lunc	h		
H	Complete ONLY if direct	_	Candidate/Off	iceholder name	Of	fice sou	ght			Office held	
	expenditure to benefit C/OI	Н									
F	Date	Г	Payee name								
ı	05/15/2024		The Daily G								
⊢	Amount (\$)	-	Payee addre		State:	Zip Cod	de		_		
ı	\$60.92		5085 Westh	504	Otato,	L.p 00.					
l	\$00.92		3003 Westi	icilici ita.							
l				V 77056							
L	and the second process of		Houston, T.	21 - 14 101 5000				At5- 22 VINC			
ı	PURPOSE OF	(a)		ee Categories listed at the	top of this sched	dule)	(b)	Description	outri	de of Texas, Complete Sch	andula T
	EXPENDITURE		Food/Bever	age Expense						officeholder living expense	
l								Meal at Judic			
-	Complete ONLY if direct	_	Candidate/Off	iceholder name	Of	ffice soug	ght			Office held	
	expenditure to benefit C/OI					T. C					
H							_				
1											

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		tee Le	ift/Awards/Memoria egal Services he Instruction			Vages	/Contract Labor		Travel Out of District OTHER (enter a category not listed	above)
1	Total pages Schedule F1: Sch: 26/28 Rpt: 29/33		ER NAME						3	Filer ID	
4	Date 05/03/2024		yee name le Mexican								
6	Amount (\$) \$132.26	14	yee address 01 Turtle C allas, TX 75	reek Blvd	State	; Zip Co	ode				
8	PURPOSE OF EXPENDITURE			Categories listed a ge Expense	t the top of this sch	nedule)	(b)	palmo tree o Inche Decido, Inche	TX.	de of Texas. Complete Schedule T. officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O		didate/Office	holder name	(Office sou	ght			Office held	
	Date 03/19/2024		yee name le National								
	Amount (\$) \$317.68	12	yee address 0 N Robins klahoma Cit	10 mm - 10 mm		; Zip Co	ode				
	PURPOSE OF EXPENDITURE		tegory (See avel Out of	Categories listed a District	t the top of this sch	nedule)	(b)		, TX,	de of Texas. Complete Schedule T, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		didate/Office	holder name	(Office sou	ght			Office held	
	Date 04/17/2024		yee name SPS								
	Amount (\$) \$364.00	47	yee address 5 FM 1382 edar Hill, TX		State	; Zip Co	ode				
	PURPOSE OF EXPENDITURE	(a) Ca	itegory (See	Categories listed a		nedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		didate/Office	holder name	(Office sou	ight			Office held	

SCHEDULE F1

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (extension and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 27/28 Rpt: 30/33	Taylor, Nicole	
4	Date	5 Payee name	
	05/21/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.15	1515 Third Street	
		San Francisco, CA 94158	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Transportation	
		Transportation	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	Complete ONLY if direct expenditure to benefit C/OI		
F	Date	Payee name	
	05/22/2024	Uber	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$28.65	1515 Third Street	
		Processing - 100 (2004 - 2007 - 2018)	
		San Francisco, CA 94158	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
	EXPERIENCE	Check if Austin, TX, officeholder living expense	
		Transportation	
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OI	Carlatator Chicoroladi Harri	
-			_
	Date	Payee name	
L	02/06/2024	Walgreens	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.33	501 E Beltline Rd	
		Cedar Hill, TX 75104	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Photos for Jury Room	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
\vdash			

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 28/28 Rpt: 31/33	Taylor, Nicole
4	Date	5 Payee name
	04/29/2024	Wayfair
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$346.39	2820 N. Interstate 35 E
		Lancaster, TX 75134
8	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 Courtroom Furniture
		Coditionii Funitale
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
	05/17/2024	Westin Houston Galleria
	Amount (\$)	Payee address; City; State; Zip Code
	\$522.71	5060 W. Alabama St.
		Houston, TX 77056
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Judicial Conference Hotel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	
	Date	Payee name
	04/29/2024	Wingstop
	Amount (\$)	Payee address; City; State; Zip Code
	\$141.00	418 S. Ervay St.
		Dallas, TX 75201
	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.
	E. II EIIDII OILE	Check if Austin, TX, officeholder living expense
		Jury Meal
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

SCHEDULE K

_								
The Instruction Guide explains how to complete this form. 1 Total pa Sch: 1/								
2	FILER NAME)						
	Taylor, Nicol							
4	Date	5	Name of person from whom amount is received				8 Amount (\$)	
	01/12/2024		Amazon					\$112.99
			Address of person from whom amount is received; City; State; Zip Cod	de			1	
		ľ	410 Terry Ave N	ac .				
			410 Telly Ave N					
			Seattle, WA 98109					
		7	Purpose for which amount is received	Chec	ck if politi	ical cont	ribution returned to fi	ler
			Merchant refund					
F	Date	Ħ	Name of person from whom amount is received				Amount (\$)	
	05/03/2024		American Airlines				10.1 to 10.2 to 10.0 t	\$90.90
			Address of person from whom amount is received; City; State; Zip Cod	de			1	
			P.O. Box 619616					
			1.0. Box 013010					
			DFW Airport, TX 75261-9616					
			Purpose for which amount is received	Chec	ck if politi	ical cont	ribution returned to fi	ler
			Merchant refund					
-	Date	H	Name of person from whom amount is received				Amount (\$)	
	02/23/2024		Dallas County Texas					\$85.00
			Address of person from whom amount is received; City; State; Zip Cod	de			1	
			600 Commerce Street					
			Dallas, TX 75202					
		Г	Purpose for which amount is received	Chec	ck if politi	ical cont	ribution returned to fi	ler
			Reimbursement for bail magistration CJE					
Г	Date	Г	Name of person from whom amount is received				Amount (\$)	
	03/08/2024		Dallas County Texas					\$200.00
			Address of person from whom amount is received; City; State; Zip Cod	de			1	
			600 Commerce Street					
		L	Dallas, TX 75202					
			Purpose for which amount is received	Chec	ck if politi	ical cont	ribution returned to fi	ler
			Reimbursement for judicial registration					
	Date	Π	Name of person from whom amount is received				Amount (\$)	
	02/27/2024		Office of the First Administrative Judicial Region					\$1,294.00
			Address of person from whom amount is received; City; State; Zip Cod				1	
			2100 Bloomdale Rd					
			McKinney, TX 75071					
			Purpose for which amount is received	Chec	k if politi	cal cont	ribution returned to fi	ler
			Reimbursement for judicial CLE and travel					

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

SCHEDULE K

001111	IDOTIONO RETORNED TO FIEER	
The Instru	1 Total pages Schedule K: Sch: 2/2 Rpt: 33/33	
2 FILER NAME Taylor, Nico		3 Filer ID
4 Date 06/27/2024	 Name of person from whom amount is received Texas Center for the Judiciary Address of person from whom amount is received; City; State; Zip Code 1210 San Antonio Ste 800 Austin, TX 78701 	8 Amount (\$) \$934.38
		political contribution returned to filer
Date 02/12/2024	Name of person from whom amount is received Uber Eats Address of person from whom amount is received; City; State; Zip Code 1455 Market St #400 San Francisco, CA 94103	Amount (\$) \$23.56
		political contribution returned to filer