

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

|  |  |   |   |
|--|--|---|---|
| The JC/OH Instruction Guide explains how to complete this form.                              |  | 1 Filer ID  | 2 Total pages filed:<br><br>33  |
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR FIRST MI<br>Nicole   | OFFICE USE ONLY<br>Date Received<br><br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |   |
|  | NICKNAME LAST SUFFIX<br>Taylor   |   |   |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>Post Office Box 2041<br>Cedar Hill, TX 75106  |   | <div style="position: absolute; top: 0; right: 0; transform: rotate(90deg); font-weight: bold; font-size: 2em;">FILED</div> <div style="position: absolute; top: 0; right: 0; transform: rotate(90deg); font-weight: bold;">2024 JUN 15 PM 12:23</div> <div style="position: absolute; top: 0; right: 0; transform: rotate(90deg); font-weight: bold;">JAN HARRIS<br/>COUNTY CLERK<br/>DALLAS COUNTY<br/>DEPUTY</div> |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR FIRST MI<br>NICKNAME LAST SUFFIX   |   |   |
| 6 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  |   |   |
| 7 CAMPAIGN TREASURER PHONE   | AREA CODE PHONE NUMBER EXTENSION   |   |   |
| 8 REPORT TYPE  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) |   |   |
| 9 PERIOD COVERED   | Month Day Year    Month Day Year<br>01/01/2024    THROUGH    06/30/2024  |   |   |
| 10 ELECTION  | ELECTION DATE    ELECTION TYPE<br>Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special  |   |   |
| 11 OFFICE  | OFFICE HELD (if any)<br>Judge County Court at Law 5 Place 5 District Dallas Cnty Dallas  |   | 12 OFFICE SOUGHT (if known)   |
| GO TO PAGE 2   |  |   |   |

# 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)

☐ Additional Pages

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.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 12,439.82

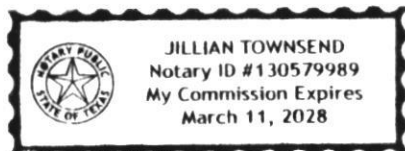
CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 3,691.49

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Nicole Taylor*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Nicole Taylor, this the 15 day of July, 2024, to certify which, witness my hand and seal of office.

*Jillian Townsend*

Signature of officer administering oath

Jillian Townsend

Printed name of officer administering oath

Notary

Title of officer administering oath



# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

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|  |  |                    |                 |
|--|--|--------------------|-----------------|
| <b>18 FILER NAME</b><br>Taylor, Nicole           |  | <b>19 Filer ID</b> |                 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |  |                    | SUBTOTAL AMOUNT |
| 1.   | <input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)                                   | \$                 |                 |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                                   | \$                 |                 |
| 3.   | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)   | \$                 |                 |
| 4.   | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)   | \$                 |                 |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$                 | 12,439.82       |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$                 |                 |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                             | \$                 |                 |
| 8.   | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD   | \$                 |                 |
| 9.   | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS  | \$                 |                 |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                        | \$                 |                 |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                           | \$                 |                 |
| 12.  | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                 | 2,740.83        |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/28 Rpt: 4/33            | <b>2</b> FILER NAME<br>Taylor, Nicole  | <b>3</b> Filer ID  |
| <b>4</b> Date<br>03/14/2024   | <b>5</b> Payee name<br>Abounding Prosperity Inc  |  |
| <b>6</b> Amount (\$)<br>\$50.18                                     | <b>7</b> Payee address; City; State; Zip Code<br>1705 Martin Luther King Jr Blvd Suite C<br><br>Dallas, TX 75215 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tickets to Grandeur Affair Celebration of Life for Kirk Meyers |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>05/03/2024  | Payee name<br>Alankar Food Court   |  |
| Amount (\$)<br>\$6.48   | Payee address; City; State; Zip Code<br>600 Commerce Street<br><br>Dallas, TX 75201                              |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal in George Allen   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>01/25/2024  | Payee name<br>Allianz Travel Insurance   |  |
| Amount (\$)<br>\$31.85  | Payee address; City; State; Zip Code<br>PO Box 72031<br><br>Richmond, VA 23255                                   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel Insurance   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 3/28 Rpt: 6/33     |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>01/16/2024                                  |  | 5 Payee name<br>Amazon   |  |   |  |
| 6 Amount (\$)<br>\$55.38                              |  | 7 Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>02/26/2024                                    |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$30.26                                |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/12/2024                                    |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$62.50                                |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 4/28 Rpt: 7/33            |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>03/14/2024   |  | 5 Payee name<br>Amazon   |  |   |  |
| 6 Amount (\$)<br>\$94.06                                     |  | 7 Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/27/2024   |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$46.48                                       |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/26/2024   |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$33.43                                       |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 5/28 Rpt: 8/33            |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>04/26/2024   |  | 5 Payee name<br>Amazon   |  |   |  |
| 6 Amount (\$)<br>\$17.58                                     |  | 7 Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>05/15/2024   |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$61.68                                       |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>06/06/2024   |  | Payee name<br>Amazon   |  |   |  |
| Amount (\$)<br>\$167.63                                      |  | Payee address; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109                   |  |   |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/28 Rpt: 9/33            | <b>2</b> FILER NAME<br>Taylor, Nicole   | <b>3</b> Filer ID   |
| <b>4</b> Date<br>01/02/2024   | <b>5</b> Payee name<br>American Airlines  |   |
| <b>6</b> Amount (\$)<br>\$144.91                                    | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261       |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Conference   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |
| Date<br>01/25/2024  | Candidate/Officeholder name   | Office sought   |
| Amount (\$)<br>\$444.20   | Payee name<br>American Airlines   | Office held   |
|   | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261                |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Judicial Conference |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>01/25/2024  | Candidate/Officeholder name   | Office sought   |
| Amount (\$)<br>\$215.00   | Payee name<br>American Airlines   | Office held   |
|   | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261                |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Judicial Conference |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |
| Date<br>01/25/2024  | Candidate/Officeholder name   | Office sought   |
| Amount (\$)<br>\$215.00   | Payee name<br>American Airlines   | Office held   |
|   | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261                |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Judicial Conference |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1:<br>Sch: 7/28 Rpt: 10/33           |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID   |  |
| 4 Date<br>01/29/2024   |  | 5 Payee name<br>American Airlines  |  |  |  |
| 6 Amount (\$)<br>\$139.75                                    |  | 7 Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261       |  |  |  |
| 8 PURPOSE OF EXPENDITURE                                     |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Conference |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held  |  |
| Date<br>02/28/2024   |  | Payee name<br>American Airlines  |  |  |  |
| Amount (\$)<br>\$129.33                                      |  | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261         |  |  |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Conference |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held  |  |
| Date<br>03/14/2024   |  | Payee name<br>American Airlines  |  |  |  |
| Amount (\$)<br>\$563.84                                      |  | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261         |  |  |  |
| PURPOSE OF EXPENDITURE                                       |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel                |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1:<br>Sch: 8/28 Rpt: 11/33    |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID   |  |
| 4 Date<br>04/29/2024                                  |  | 5 Payee name<br>American Airlines  |  |  |  |
| 6 Amount (\$)<br>\$241.06                             |  | 7 Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261       |  |  |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Conference     |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held  |  |
| Date<br>06/24/2024                                    |  | Payee name<br>American Airlines  |  |  |  |
| Amount (\$)<br>\$165.47                               |  | Payee address; City; State; Zip Code<br>PO Box 619616<br><br>DFW Airport, TX 75261         |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Travel for Conference     |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held  |  |
| Date<br>05/09/2024                                    |  | Payee name<br>American Inns of Court   |  |  |  |
| Amount (\$)<br>\$115.00                               |  | Payee address; City; State; Zip Code<br>225 Reinekers Lane<br><br>Alexandria, VA 22314     |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                   |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Joint Inns Meeting Ticket |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held  |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 10/28 Rpt: 13/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>06/26/2024                                  |  | 5 Payee name<br>Beyond the Slogan  |  |   |  |
| 6 Amount (\$)<br>\$100.00                             |  | 7 Payee address; City; State; Zip Code<br>2710 Routh Creek #4120<br><br>Richardson, TX 75082 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense       |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign services TDP convention |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>05/20/2024                                    |  | Payee name<br>Buffalo Wild Wings   |  |   |  |
| Amount (\$)<br>\$37.91                                |  | Payee address; City; State; Zip Code<br>7800 Airport Blvd. C-104<br><br>Houston, TX 77061    |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District   |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal at Airport                  |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/01/2024                                    |  | Payee name<br>Chick-Fil-A  |  |   |  |
| Amount (\$)<br>\$52.25                                |  | Payee address; City; State; Zip Code<br>300 Hwy 67<br><br>Duncanville, TX 75137              |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense    |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Meal                       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1:<br>Sch: 11/28 Rpt: 14/33   |  | 2 FILER NAME<br>Taylor, Nicole  |  | 3 Filer ID   |  |
| 4 Date<br>05/20/2024                                  |  | 5 Payee name<br>Chick-Fil-A   |  |  |  |
| 6 Amount (\$)<br>\$59.42                              |  | 7 Payee address; City; State; Zip Code<br>300 Hwy 67<br><br>Duncanville, TX 75137         |  |  |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Meal  |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>03/07/2024                                    |  | Payee name<br>Cindis Deli   |  |  |  |
| Amount (\$)<br>\$34.86                                |  | Payee address; City; State; Zip Code<br>307 S. Houston St.<br><br>Dallas, TX 75203        |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Lunch |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>04/17/2024                                    |  | Payee name<br>Cindis Deli   |  |  |  |
| Amount (\$)<br>\$87.46                                |  | Payee address; City; State; Zip Code<br>307 S. Houston St.<br><br>Dallas, TX 75203        |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Lunch |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 12/28 Rpt: 15/33   |  | 2 FILER NAME<br>Taylor, Nicole  |  | 3 Filer ID  |  |
| 4 Date<br>04/18/2024                                  |  | 5 Payee name<br>Cindis Deli   |  |   |  |
| 6 Amount (\$)<br>\$15.37                              |  | 7 Payee address; City; State; Zip Code<br>307 S. Houston St.<br><br>Dallas, TX 75203      |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Lunch                    |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name   |  | Office sought Office held   |  |
| Date<br>03/15/2024                                    |  | Payee name<br>City of DeSoto  |  |   |  |
| Amount (\$)<br>\$748.79                               |  | Payee address; City; State; Zip Code<br>211 East Pleasant Run Rd.<br><br>DeSoto, TX 75115 |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense   |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>75th Anniversary Table Sponsor |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held   |  |
| Date<br>01/11/2024                                    |  | Payee name<br>Costco Gas  |  |   |  |
| Amount (\$)<br>\$71.58                                |  | Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137           |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District    |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Gas                            |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1:<br>Sch: 13/28 Rpt: 16/33   |  | 2 FILER NAME<br>Taylor, Nicole  |  | 3 Filer ID   |  |
| 4 Date<br>02/26/2024                                  |  | 5 Payee name<br>Costco Gas  |  |  |  |
| 6 Amount (\$)<br>\$55.44                              |  | 7 Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137         |  |  |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District    |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Gas         |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>03/07/2024                                    |  | Payee name<br>Costco Gas  |  |  |  |
| Amount (\$)<br>\$48.15                                |  | Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137           |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District    |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Gas         |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>01/10/2024                                    |  | Payee name<br>Costco  |  |  |  |
| Amount (\$)<br>\$121.69                               |  | Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137           |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Snacks |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 14/28 Rpt: 17/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>02/26/2024                                  |  | 5 Payee name<br>Costco   |  |   |  |
| 6 Amount (\$)<br>\$45.98                              |  | 7 Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137                  |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Snacks        |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>06/06/2024                                    |  | Payee name<br>Costco   |  |   |  |
| Amount (\$)<br>\$108.99                               |  | Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137                    |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury snacks        |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/22/2024                                    |  | Payee name<br>Costo  |  |   |  |
| Amount (\$)<br>\$66.50                                |  | Payee address; City; State; Zip Code<br>250 Hwy 67<br><br>Duncanville, TX 75137                    |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Supplies |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1:<br>Sch: 15/28 Rpt: 18/33   |  | 2 FILER NAME<br>Taylor, Nicole  |  | 3 Filer ID   |  |
| 4 Date<br>02/13/2024                                  |  | 5 Payee name<br>DFW Airport Valet   |  |  |  |
| 6 Amount (\$)<br>\$184.90                             |  | 7 Payee address; City; State; Zip Code<br>DFW International Airport<br><br>Dallas, TX 75261 |  |  |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>04/23/2024                                    |  | Payee name<br>DFW Airport Valet   |  |  |  |
| Amount (\$)<br>\$129.90                               |  | Payee address; City; State; Zip Code<br>DFW International Airport<br><br>Dallas, TX 75261   |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |
| Date<br>05/23/2024                                    |  | Payee name<br>DFW Airport Valet   |  |  |  |
| Amount (\$)<br>\$97.43                                |  | Payee address; City; State; Zip Code<br>DFW International Airport<br><br>Dallas, TX 75261   |  |  |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Parking |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name   |  | Office sought Office held  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:<br>Sch: 16/28 Rpt: 19/33   | 2 FILER NAME<br>Taylor, Nicole  | 3 Filer ID   |
| 4 Date<br>03/21/2024                                  | 5 Payee name<br>Dallas County East Democrats  |  |
| 6 Amount (\$)<br>\$26.00                              | 7 Payee address; City; State; Zip Code<br>1414 N Washington Ave<br><br>Dallas, TX 75204           |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Fees                          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership                  |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>05/17/2024                                    | Payee name<br>Del Frisco's  |  |
| Amount (\$)<br>\$90.78                                | Payee address; City; State; Zip Code<br>5061 Westheimer Rd. Ste. 8060<br><br>Houston, TX 77056    |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meat at Judicial Conference |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>01/17/2024                                    | Payee name<br>Ecolatino   |  |
| Amount (\$)<br>\$100.00                               | Payee address; City; State; Zip Code<br>3606 S. Tyler St.<br><br>Dallas, TX 75224                 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Coat Blanket Drive Donation |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 17/28 Rpt: 20/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>01/03/2024                                  |  | 5 Payee name<br>Extra Space Storage  |  |   |  |
| 6 Amount (\$)<br>\$111.00                             |  | 7 Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>02/05/2024                                    |  | Payee name<br>Extra Space Storage  |  |   |  |
| Amount (\$)<br>\$111.00                               |  | Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/04/2024                                    |  | Payee name<br>Extra Space Storage  |  |   |  |
| Amount (\$)<br>\$111.00                               |  | Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 18/28 Rpt: 21/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>04/04/2024                                  |  | 5 Payee name<br>Extra Space Storage  |  |   |  |
| 6 Amount (\$)<br>\$111.00                             |  | 7 Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                 |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>05/06/2024                                    |  | Payee name<br>Extra Space Storage  |  |   |  |
| Amount (\$)<br>\$126.00                               |  | Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>06/03/2024                                    |  | Payee name<br>Extra Space Storage  |  |   |  |
| Amount (\$)<br>\$126.00                               |  | Payee address; City; State; Zip Code<br>303 E Hwy 67<br><br>Cedar Hill, TX 75137                   |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Storage |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule F1:<br>Sch: 19/28 Rpt: 22/33   | 2 FILER NAME<br>Taylor, Nicole  | 3 Filer ID  |
| 4 Date<br>01/02/2024                                  | 5 Payee name<br>Green & Green   |   |
| 6 Amount (\$)<br>\$200.00                             | 7 Payee address; City; State; Zip Code<br>4100 Spring Valley<br><br>Dallas, TX 75244      |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ad for MLK Legacy Awards Program |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>06/04/2024                                    | Payee name<br>Hickory Hollow  |   |
| Amount (\$)<br>\$36.26                                | Payee address; City; State; Zip Code<br>8038 Fallbrook Dr<br><br>Houston, TX 77064        |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal at Judicial Conference      |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>05/22/2024                                    | Payee name<br>Indianapolis Marriott Downtown  |   |
| Amount (\$)<br>\$90.21                                | Payee address; City; State; Zip Code<br>350 W Maryland St<br><br>Indianapolis, IN 46225   |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal                             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 20/28 Rpt: 23/33          | <b>2</b> FILER NAME<br>Taylor, Nicole  | <b>3</b> Filer ID   |
| <b>4</b> Date<br>05/22/2024   | <b>5</b> Payee name<br>Indianapolis Marriott Downtown  |   |
| <b>6</b> Amount (\$)<br>\$90.21                                     | <b>7</b> Payee address; City; State; Zip Code<br>350 W Maryland St<br><br>Indianapolis, IN 46225     |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal              |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Date<br>02/06/2024  | Candidate/Officeholder name<br>Payee name<br>Interdenominational Ministerial Alliance of Dallas      |   |
| Amount (\$)<br>\$150.00   | Office sought<br>Payee address; City; State; Zip Code<br>8350 Forest Lane<br><br>Dallas, TX 75243    |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Gala Ad                  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |
| Date<br>03/11/2024  | Candidate/Officeholder name<br>Payee name<br>JW Marriott Houston Galleria                            |   |
| Amount (\$)<br>\$913.37   | Office sought<br>Payee address; City; State; Zip Code<br>5150 Westheimer Rd<br><br>Houston, TX 77056 |   |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hotel for NBA Convention |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| 1 Total pages Schedule F1:<br>Sch: 21/28 Rpt: 24/33   | 2 FILER NAME<br>Taylor, Nicole   | 3 Filer ID   |
| 4 Date<br>03/15/2024                                  | 5 Payee name<br>Jotform  |  |
| 6 Amount (\$)<br>\$505.44                             | 7 Payee address; City; State; Zip Code<br>4 Embarcadero Center, Suite 780<br><br>San Francisco, CA 94111 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense       | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Annual Subscription for Court Zoom Hearings |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>03/07/2024                                    | Payee name<br>Microsoft  |  |
| Amount (\$)<br>\$108.23                               | Payee address; City; State; Zip Code<br>1 Microsoft Way<br><br>Redmond, WA 98052                         |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense       | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Software                                    |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>02/14/2024                                    | Payee name<br>National Bar Association   |  |
| Amount (\$)<br>\$375.00                               | Payee address; City; State; Zip Code<br>1816 12th Street NW<br><br>Washington, DC 20009                  |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Fees                                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership Dues                             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:<br>Sch: 22/28 Rpt: 25/33   | 2 FILER NAME<br>Taylor, Nicole  | 3 Filer ID   |
| 4 Date<br>02/20/2024                                  | 5 Payee name<br>National Bar Association  |  |
| 6 Amount (\$)<br>\$200.00                             | 7 Payee address; City; State; Zip Code<br>1816 12th Street NW<br><br>Washington, DC 20009 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Conference Registration |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>01/16/2024                                    | Payee name<br>Papa Johns  |  |
| Amount (\$)<br>\$92.76                                | Payee address; City; State; Zip Code<br>3501 McKinney Ave<br><br>Dallas, TX 75204         |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Meal               |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>02/20/2024                                    | Payee name<br>Papa Johns  |  |
| Amount (\$)<br>\$42.20                                | Payee address; City; State; Zip Code<br>3501 McKinney Ave<br><br>Dallas, TX 75204         |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Meal               |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|  |   |   |   |            |
|--|---|---|---|------------|
| 1 Total pages Schedule F1:<br>Sch: 23/28 Rpt: 26/33          |   | 2 FILER NAME<br>Taylor, Nicole  |   | 3 Filer ID |
| 4 Date<br>02/20/2024   |   | 5 Payee name<br>Papa Johns  |   |            |
| 6 Amount (\$)<br>\$13.51                                     |   | 7 Payee address; City; State; Zip Code<br>3501 McKinney Ave<br><br>Dallas, TX 75204 |   |            |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Meal        |            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |   |   |            |
| Candidate/Officeholder name Office sought Office held        |   |   |   |            |
| Date<br>04/04/2024   |   | Payee name<br>Pappadeaux  |   |            |
| Amount (\$)<br>\$131.41                                      |   | Payee address; City; State; Zip Code<br>3520 Oak Lawn Ave.<br><br>Dallas, TX 75219  |   |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Judicial Meeting |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |   |   |            |
| Candidate/Officeholder name Office sought Office held        |   |   |   |            |
| Date<br>04/05/2024   |   | Payee name<br>Pappadeaux  |   |            |
| Amount (\$)<br>\$170.00                                      |   | Payee address; City; State; Zip Code<br>3520 Oak Lawn Ave.<br><br>Dallas, TX 75219  |   |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Staff Meeting    |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |   |   |   |            |
| Candidate/Officeholder name Office sought Office held        |   |   |   |            |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 24/28 Rpt: 27/33  | 2 FILER NAME<br>Taylor, Nicole  | 3 Filer ID   |
| 4 Date<br>01/03/2024   | 5 Payee name<br>SMU Continuing & Professional Education                                   |  |
| 6 Amount (\$)<br>\$359.00  | 7 Payee address; City; State; Zip Code<br>5539 SMU Blvd<br><br>Dallas, TX 75206           |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Spanish Language Course |
| 9 Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held |   |  |
| Date<br>03/15/2024   | Payee name<br>Senate District 16 PAC  |  |
| Amount (\$)<br>\$50.00   | Payee address; City; State; Zip Code<br>2504 Summit Drive<br><br>Irving, TX 75062         |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Sponsorship             |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held   |   |  |
| Date<br>01/26/2024   | Payee name<br>Texas Center for the Judiciary  |  |
| Amount (\$)<br>\$110.00  | Payee address; City; State; Zip Code<br>1210 San Antonio Ste. 800<br><br>Austin, TX 78701 |  |
| PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Conference Registration |
| Complete ONLY if direct expenditure to benefit C/OH<br>Candidate/Officeholder name Office sought Office held   |   |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F1:<br>Sch: 25/28 Rpt: 28/33   | 2 FILER NAME<br>Taylor, Nicole  | 3 Filer ID   |
| 4 Date<br>02/05/2024                                  | 5 Payee name<br>Texas Justice Democrats PAC   |  |
| 6 Amount (\$)<br>\$500.00                             | 7 Payee address; City; State; Zip Code<br>6333 Mockingbird Lane, Ste. 147 Box 800<br><br>Dallas, TX 75214 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense                   | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Advertising                 |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>03/21/2024                                    | Payee name<br>Texas Spice Restaurant  |  |
| Amount (\$)<br>\$43.00                                | Payee address; City; State; Zip Code<br>555 S Lamar St<br><br>Dallas, TX 75202                            |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Judicial Lunch              |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>05/15/2024                                    | Payee name<br>The Daily Grill   |  |
| Amount (\$)<br>\$60.92                                | Payee address; City; State; Zip Code<br>5085 Westheimer Rd.<br><br>Houston, TX 77056                      |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meal at Judicial Conference |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 26/28 Rpt: 29/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>05/03/2024                                  |  | 5 Payee name<br>The Mexican  |  |   |  |
| 6 Amount (\$)<br>\$132.26                             |  | 7 Payee address; City; State; Zip Code<br>1401 Turtle Creek Blvd<br><br>Dallas, TX 75207           |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Judicial Dinner  |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>03/19/2024                                    |  | Payee name<br>The National   |  |   |  |
| Amount (\$)<br>\$317.68                               |  | Payee address; City; State; Zip Code<br>120 N Robinson Ave<br><br>Oklahoma City, OK 73102          |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Conference Hotel |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>04/17/2024                                    |  | Payee name<br>USPS   |  |   |  |
| Amount (\$)<br>\$364.00                               |  | Payee address; City; State; Zip Code<br>475 FM 1382<br><br>Cedar Hill, TX 75104                    |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PO Box rental    |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1:<br>Sch: 27/28 Rpt: 30/33   |  | 2 FILER NAME<br>Taylor, Nicole   |  | 3 Filer ID  |  |
| 4 Date<br>05/21/2024                                  |  | 5 Payee name<br>Uber   |  |   |  |
| 6 Amount (\$)<br>\$65.15                              |  | 7 Payee address; City; State; Zip Code<br>1515 Third Street<br><br>San Francisco, CA 94158         |  |   |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation       |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>05/22/2024                                    |  | Payee name<br>Uber   |  |   |  |
| Amount (\$)<br>\$28.65                                |  | Payee address; City; State; Zip Code<br>1515 Third Street<br><br>San Francisco, CA 94158           |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation       |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |
| Date<br>02/06/2024                                    |  | Payee name<br>Walgreens  |  |   |  |
| Amount (\$)<br>\$20.33                                |  | Payee address; City; State; Zip Code<br>501 E Beltline Rd<br><br>Cedar Hill, TX 75104              |  |   |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Photos for Jury Room |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name  |  | Office sought Office held   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| 1 Total pages Schedule F1:<br>Sch: 28/28 Rpt: 31/33   | 2 FILER NAME<br>Taylor, Nicole   | 3 Filer ID   |
| 4 Date<br>04/29/2024                                  | 5 Payee name<br>Wayfair  |  |
| 6 Amount (\$)<br>\$346.39                             | 7 Payee address; City; State; Zip Code<br>2820 N. Interstate 35 E<br><br>Lancaster, TX 75134       |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Courtroom Furniture       |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>05/17/2024                                    | Payee name<br>Westin Houston Galleria  |  |
| Amount (\$)<br>\$522.71                               | Payee address; City; State; Zip Code<br>5060 W. Alabama St.<br><br>Houston, TX 77056               |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Judicial Conference Hotel |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>04/29/2024                                    | Payee name<br>Wingstop   |  |
| Amount (\$)<br>\$141.00                               | Payee address; City; State; Zip Code<br>418 S. Ervay St.<br><br>Dallas, TX 75201                   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Jury Meal                 |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held  |

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/2 Rpt: 32/33

2 FILER NAME  
Taylor, Nicole

3 Filer ID

|                      |   |                           |
|----------------------|---|---------------------------|
| 4 Date<br>01/12/2024 | 5 Name of person from whom amount is received<br>Amazon   | 8 Amount (\$)<br>\$112.99 |
|                      | 6 Address of person from whom amount is received; City; State; Zip Code<br>410 Terry Ave N<br><br>Seattle, WA 98109 |                           |
|                      | 7 Purpose for which amount is received<br>Merchant refund   |                           |

|                    |  |                        |
|--------------------|--|------------------------|
| Date<br>05/03/2024 | Name of person from whom amount is received<br>American Airlines   | Amount (\$)<br>\$90.90 |
|                    | Address of person from whom amount is received; City; State; Zip Code<br>P.O. Box 619616<br><br>DFW Airport, TX 75261-9616 |                        |
|                    | Purpose for which amount is received<br>Merchant refund  |                        |

|                    |  |                        |
|--------------------|--|------------------------|
| Date<br>02/23/2024 | Name of person from whom amount is received<br>Dallas County Texas   | Amount (\$)<br>\$85.00 |
|                    | Address of person from whom amount is received; City; State; Zip Code<br>600 Commerce Street<br><br>Dallas, TX 75202 |                        |
|                    | Purpose for which amount is received<br>Reimbursement for bail magistration CJE                                      |                        |

|                    |  |                         |
|--------------------|--|-------------------------|
| Date<br>03/08/2024 | Name of person from whom amount is received<br>Dallas County Texas   | Amount (\$)<br>\$200.00 |
|                    | Address of person from whom amount is received; City; State; Zip Code<br>600 Commerce Street<br><br>Dallas, TX 75202 |                         |
|                    | Purpose for which amount is received<br>Reimbursement for judicial registration                                      |                         |

|                    |  |                           |
|--------------------|--|---------------------------|
| Date<br>02/27/2024 | Name of person from whom amount is received<br>Office of the First Administrative Judicial Region                    | Amount (\$)<br>\$1,294.00 |
|                    | Address of person from whom amount is received; City; State; Zip Code<br>2100 Bloomdale Rd<br><br>McKinney, TX 75071 |                           |
|                    | Purpose for which amount is received<br>Reimbursement for judicial CLE and travel                                    |                           |

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 2/2 Rpt: 33/33

2 FILER NAME  
Taylor, Nicole

3 Filer ID

4 Date  
06/27/2024

5 Name of person from whom amount is received  
Texas Center for the Judiciary

8 Amount (\$)  
\$934.38

6 Address of person from whom amount is received; City; State; Zip Code  
1210 San Antonio Ste 800  
  
Austin, TX 78701

7 Purpose for which amount is received ☐ Check if political contribution returned to filer  
Reimbursement for conference

Date  
02/12/2024

Name of person from whom amount is received  
Uber Eats

Amount (\$)  
\$23.56

Address of person from whom amount is received; City; State; Zip Code  
1455 Market St #400  
  
San Francisco, CA 94103

Purpose for which amount is received ☐ Check if political contribution returned to filer  
Merchant refund