#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The JC/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Nicole NAME Date Received 8 **NICKNAME** LAST SUFFIX Taylor Date Hand-delivered of Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** Post Office Box 2121 MAILING Receipt # Amount **ADDRESS** Change of Address Cedar Hill, TX 75106 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** NAME **NICKNAME** LAST CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE REPORT TYPE 15th day after campaign treasurer appointment (officeholder only) 30th day before election January 15 Runoff Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit PERIOD Month Day Day Year Year COVERED **THROUGH** 12/31/2024 07/01/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other X Primary Runoff 03/03/2026 General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) Judge, County Court at Law 5, Dallas County Place Judge, County Court at Law 5, Dallas County Place 5 District County Dallas 5 District County **GO TO PAGE 2** Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 19

13 C / OH NAME	Taylor, Nicole	4 Filer ID				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the d officeholders are required to report this information of	e candidate's or officeho	older's knowledge or		
Additional Pages	COMMITTEE TYPE  GENERAL	COMMITTEE NAME				
	SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN F ES OF LOANS, OR CONTRIBUTIONS MADE ELECT		\$ 0.00		
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 4,303.16		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY OF THE	\$ 455.53		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	F THE LAST DAY	\$ 0.00		
JILLIAN TOWNSEND Notary ID #130579989 My Commission Expires March 11, 2028  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.  Signature of Candidate or Officeholder						
	Cribed before me, by the same, 20, to ca	Ilianle Toul	, this the 15 <sup>th</sup>	Lday		
0	er administering oath	Printed name of officer administering oath		dministering oath		

## SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

	3 of 19								
18 FILER NAME Taylor, Nicole  19 Filer ID									
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT								
1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JU	JDICIAL) \$								
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRI	BUTIONS \$								
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$								
4. SCHEDULE E(J): LOANS (JUDICIAL)	\$								
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL (	CONTRIBUTIONS \$ 4,303.16								
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$								
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICA	L CONTRIBUTIONS \$								
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$								
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL F	UNDS \$								
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS T	O A BUSINESS OF C/OH \$								
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL	L CONTRIBUTIONS \$								
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CO	NTRIBUTIONS RETURNED \$								

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense **EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		mmittee	Legal Services  The Instruction Gu			/ages	s/Contract Labor		OTHER (enter a cate	egory not listed above)
1	Total pages Schedule F1:	2	FILER NAME					I	3	Filer ID	
	Sch: 1/15 Rpt: 4/19		Taylor, Nico							January 1 Methodology College of the	
4	Date	5	Payee name								
L	12/05/2024		American A								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$77.00		PO Box 619	9616							
			DFW Airpor	t, TX 75261							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Travel Out	of District						de of Texas. Complete	
						- 1				officeholder living exp	
						- 1		ECourt Conie	rei	ice Las Vegas	
L		_									
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name	O	ffice sou	ght			Office held	
L		_									
	Date		Payee name								
	11/20/2024		Arts District	Mansion							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$5.00		2101 Ross	Avenue							
			Dallas, TX	75201							
	PURPOSE OF	(a)		ee Categories listed at the	e top of this sched	dule)	(b)	Description			
	EXPENDITURE		Travel In Di	strict						le of Texas. Complete officeholder living exp	
								Parking	175	omeendae nving exp	
								3			
$\vdash$	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office held	
	expenditure to benefit C/OI	Н									
Г	Date		Payee name								
	07/18/2024		ChickfilA								
$\vdash$	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$11.57		300 Hwy 67	•							
	18										
			Duncanville	, TX 75137							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sched	dule)	(b)	Description			
	OF EXPENDITURE		Food/Bever	age Expense						le of Texas. Complete	
									TX,	officeholder living expe	ense
								Staff Meal			
	Complete ONLY if direct	L_	andidata/Offi	ceholder name	01	ffice soug	tdr.			Office held	
	expenditure to benefit C/O		a luidate/Offi	cerioidei fiairie	Oi	mee soul	gi it			Office field	
_											
-0	rms provided by Texas F	Thic	c / ommicci	00 1404	w ethics st	STO TV III	C.			1/0	rsion V4.1.0.5dd2ace2

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/15 Rpt: 5/19	2 FILER NAME Taylor, Nicole 3 Filer ID
4 Date 09/19/2024	5 Payee name ChickfilA
6 Amount (\$) \$32.04	7 Payee address; City; State; Zip Code 300 Hwy 67  Duncanville, TX 75137
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Breakfast
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 09/26/2024	Payee name ChickfilA
Amount (\$) \$154.82	Payee address; City; State; Zip Code 300 Hwy 67  Duncanville, TX 75137
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Jury Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 08/21/2024	Payee name Costco Gas
Amount (\$) \$21.48	Payee address; City; State; Zip Code 250 Hwy 67
PURPOSE OF EXPENDITURE	Duncanville, TX 75137  (a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Forms provided by Texas E	thics Commission www.ethics.state.tx.us Version V4.1.0.5dd2ace2

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 3/15 Rpt: 6/19	2 FILER NAME Taylor, Nicole 3 Filer ID
4 Date 10/10/2024	5 Payee name Costco Gas
6 Amount (\$) \$66.71	7 Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 11/05/2024	Payee name Costco Gas
Amount (\$) \$41.09	Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 11/15/2024	Payee name Costco Gas
Amount (\$) \$29.52	Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 4/15 Rpt: 7/19	2 FILER NAME Taylor, Nicole 3 Filer ID
4 Date 11/21/2024	5 Payee name Costco Gas
6 Amount (\$) \$50.07	7 Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 12/04/2024	Payee name Costco Gas
Amount (\$) \$30.01	Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 08/06/2024	Payee name Costco
Amount (\$) \$265.59	Payee address; City; State; Zip Code 250 Hwy 67  Duncanville, TX 75137
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Jury Room Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 5/15 Rpt: 8/19	2 FILER NAME Taylor, Nicole	Filer ID
4	Date 08/21/2024	5 Payee name Dallas AFLCIO	
6	Amount (\$) \$130.00	7 Payee address; City; State; Zip Code 1408 N Washington Ave # 240 Dallas, TX 75204	
8	PURPOSE OF EXPENDITURE	Event Expense	de of Texas, Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 08/22/2024	Payee name Dallas Bar Association	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 2101 Ross Avenue  Dallas, TX 75201	
	PURPOSE OF EXPENDITURE	1 663	de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 07/12/2024	Payee name Doordash	
	Amount (\$) \$9.99	Payee address; City; State; Zip Code 303 2nd Avenue South Tower 8th Flr San Francisco, CA 94107	
	PURPOSE OF EXPENDITURE	rood/beverage Expense	de of Texas. Complete Schedule T. officeholder living expense ery Discount
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
For	ms provided by Texas E	nics Commission www.ethics.state.tx.us	Version V4.1.0.5dd2ace2

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials E Legal Services The Instruction Gu			/ages	s/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID
L	Sch: 6/15 Rpt: 9/19		Taylor, Nico	le						
4	Date	5	Payee name							
	09/20/2024		Doordash							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de			
	\$9.99		303 2nd Ave	enue South Tow	er 8th Flr					
			San Francis	co, CA 94107						
8	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description		
	EXPENDITURE		Food/Bevera	age Expense						de of Texas. Complete Schedule T. officeholder living expense
								Dashpass De		
										,
9	Complete ONLY if direct	(	Candidate/Offic	ceholder name	C	Office sou	ght			Office held
	expenditure to benefit C/O	Н								
	Date		Payee name							
	10/23/2024		Doordash							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de			
	\$9.99		303 2nd Ave	enue South Tow	er 8th Flr					
			San Francis	co, CA 94107						
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Food/Bevera	age Expense						de of Texas. Complete Schedule T. officeholder living expense
								Dashpass De		
$\vdash$	Complete ONLY if direct	(	Candidate/Offic	ceholder name	C	Office sou	ght			Office held
	expenditure to benefit C/OI	Н								
Г	Date		Payee name							
	11/22/2024		Doordash							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de			
	\$9.99		303 2nd Ave	enue South Tow	er 8th Flr					
			San Francis	co, CA 94107						
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Food/Bevera	age Expense						de of Texas. Complete Schedule T.
						1		Dashpass De		officeholder living expense
								Dashpass De	-110	o., 5,000 dr.
$\vdash$	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office held
	expenditure to benefit C/OI						- (C)			

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense F		se s/Contract Labor	Travel in Dist Travel Out of OTHER (ente	
1	Total pages Schedule F1:	2 FILER NAME	Ξ				3 Filer ID	
	Sch: 7/15 Rpt: 10/19	Taylor, Nico	ole					
4	Date	5 Payee name	5				•	
	07/03/2024	Extra Space	e Storage					
6	Amount (\$)	7 Payee addre	ss; City;	State;	Zip Code			
	\$126.00	303 E Hwy	67					
		Duncanville	e, TX 75137					
8	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedu	ule) (b)	Description		
	OF EXPENDITURE		head/Rental Expe					omplete Schedule T.
						Campaign St	n, TX, officeholder liv	ring expense
						Campaign	iorage	
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Offi	ice sought		Office	held
	expenditure to benefit C/O							
	Date	Payee name						
	08/12/2024	Extra Space	e Storage					
Г	Amount (\$)	Payee addre	ss; City;	State;	Zip Code			
	\$149.00	303 E Hwy	67					
		Duncanville	, TX 75137					
Г	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedu	ule) (b)	Description		
	OF EXPENDITURE		head/Rental Expe					omplete Schedule T.
						Campaign St	n, TX, officeholder liv	ring expense
						Campaign of	lorage	
$\vdash$	Complete ONLY if direct	Candidate/Offi	ceholder name	Offi	ice sought		Office	held
	expenditure to benefit C/O	1			3			
F	Date	Payee name						
	09/03/2024	Extra Space	e Storage					
H	Amount (\$)	Payee addres	ss; City;	State; 2	Zip Code			
	\$111.00	303 E Hwy			•			
		Duncanville	, TX 75137					
	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedu	ule) (b)	Description		
	OF EXPENDITURE		head/Rental Expe					omplete Schedule T.
						Campaign St	, TX, officeholder liv	ing expense
						Jumpaign 30	orage	
$\vdash$	Complete ONLY if direct	Candidate/Offi	ceholder name	Offi	ice sought		Office	held
	expenditure to benefit C/O				9.11			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memorials E Legal Services The Instruction Gui			ages.	s/Contract Labor	Travel Out of District OTHER (enter a categ	ory not listed above)
1	Total pages Schedule F1:	2	FILER NAME					T	3 Filer ID	
0.50	Sch: 8/15 Rpt: 11/19		Taylor, Nico							
_		_								
4	Date		Payee name							
	10/03/2024		Extra Space	Storage						
6	Amount (\$)	7	Payee address	ss; City;	State;	Zip Co	de			
	\$111.00		303 E Hwy 6	57						
			Duncanville,	TX 75137						
8	PURPOSE	-					(b)	Description		
0	OF			e Categories listed at the		edule)	(0)	Description  Check if travel o	utside of Texas. Complete 5	Schedule T
	EXPENDITURE		Office Overr	nead/Rental Exp	ense				TX, officeholder living expe	3/41/20/20/20/20/20/20
								Campaign Sto	orage	
9	Complete ONLY if direct	C	Candidate/Offic	ceholder name	0	office soug	aht		Office held	
	expenditure to benefit C/OI		,				,			
	Data	T					-			
	Date		Payee name	0.						
	11/04/2024		Extra Space	Storage						
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de			
	\$111.00		303 E Hwy 6	67						
			Duncanville,	TX 75137						
	PURPOSE OF	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description		
	EXPENDITURE	,	Office Overh	ead/Rental Exp	ense				utside of Texas. Complete 5	
	A SECURITION OF THE PERSONS					- 1		Campaign Sto	TX, officeholder living exper	ise
								Campaign Ste	rage	
_	Complete ONLY if direct	_	andidata/Offic	eholder name	0	ffine cours	, b.t		Office hold	
	expenditure to benefit C/O		andidate/Offic	enolder name	U	ffice soug	grit		Office held	
	The state of the s	_								
	Date		Payee name							
	12/03/2024		Extra Space	Storage						
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de			
	\$111.00		303 E Hwy 6	57						
			Duncanville,	TX 75137						
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	dule)	(b)	Description		
	OF EXPENDITURE	(	Office Overh	ead/Rental Exp	ense				utside of Texas. Complete S	
									TX, officeholder living exper	nse
						- 1		Campaign Sto	rage	
	SAVE TO SAVE THE SAVE								V-100	
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offic	eholder name	O	ffice soug	jht		Office held	
	experiulture to benefit C/Or									

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 9/15 Rpt: 12/19	2 FILER NAME Taylor, Nicole	Filer ID
4	Date 09/30/2024	5 Payee name Fuel City	
6	Amount (\$) \$12.05	7 Payee address; City; State; Zip Code 801 S Riverfront Dallas, TX 75207	
8	PURPOSE OF EXPENDITURE	Traver in District	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/27/2024	Payee name Hicks, Brandi	
	Amount (\$) \$588.63	Payee address; City; State; Zip Code 6821 Sunshade Ln Dallas, TX 75236	
	PURPOSE OF EXPENDITURE	Check if Austin, TX,	de of Texas. Complete Schedule T. officeholder living expense for Courtroom Updates
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 09/09/2024	Payee name JW Marriott	
	Amount (\$) \$685.89	Payee address; City; State; Zip Code 23803 Resort Pkwy  San Antonio, TX 78261	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outsi	de of Texas. Complete Schedule T. officeholder living expense Conference
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 10/15 Rpt: 13/19	Taylor, Nicole	
	5 Payee name	
11/22/2024	McDonalds	
	7 Payee address; City; State; Zip Code	
\$3.25	1000 Commerce St	
	Dallas, TX 75202	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	0	Check if Austin, TX, officeholder living expense
	Lun	ch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
07/18/2024	Meso Maya	
Amount (\$)	Payee address; City; State; Zip Code	
\$178.48	1611 McKinney Ave	
, , , , , , ,	,	
	Delles TV 75202	
	Dallas, TX 75202	
PURPOSE OF	a) Category (See Categories listed at the top of this schedule)     (b) Desc	ACC CANADA
EXPENDITURE	1 dod/beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	1 0	ch for Interns and Staff
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
12/06/2024	Pappadeaux	
Amount (\$)		
******	The state of the s	
\$56.39	3520 Oak Lawn Ave	
	Dallas, TX 75219	
PURPOSE (	a) Category (See Categories listed at the top of this schedule)     (b) Description	cription
OF EXPENDITURE	Food/Beverage Expense	check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	, <u>U</u>	check if Austin, TX, officeholder living expense
	Lun	сп
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OH		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 11/15 Rpt: 14/19	
	Taylor, Nicole
4 Date 09/30/2024	5 Payee name Rudy's Chicken
6 Amount (\$) \$49.54	7 Payee address; City; State; Zip Code 3115 S Lancaster Rd  Dallas, TX 75216
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Staff Lunch
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/23/2024	Southwest Airlines
Amount (\$) \$207.98	Payee address; City; State; Zip Code 2702 Love Field Dr  Dallas, TX 75235
PURPOSE	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Airfare for Judicial Conference
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/29/2024	Southwest Airlines
Amount (\$) \$5.00	Payee address; City; State; Zip Code 2702 Love Field Dr
	Dallas, TX 75235
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Airfare
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 12/15 Rpt: 15/19 Taylor, Nicole 4 Date 5 Payee name 09/04/2024 Southwest Airlines Payee address; Amount (\$) City; State; Zip Code \$45.00 2702 Love Field Dr Dallas, TX 75235 8 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Airfare Office held 9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/21/2024 State Bar of Texas Amount (\$) Payee address; City; State; Zip Code \$270.00 1414 Colorado St Austin, TX 78701 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Bar Dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/06/2024 Uber Amount (\$) Payee address; State; Zip Code \$28.04 1725 Third Street San Francisco, CA 94158 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Travel Judicial Conference Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)			
		Part manufacture and an annual		ins now to comp	olete this form.					
1 Total pages So		2 FILER NAM				3	Filer ID			
Sch: 13/15 R	pt: 16/19	Taylor, Nic	ole							
4 Date		5 Payee name	9							
09/09/2024		Uber								
6 Amount (\$)		7 Payee addre	ess; City; Sta	ate; Zip Code						
	\$29.71	1725 Third	Street							
		San Francisco, CA 94158								
8 PURPOSE		THE SHARE OF THE PERSONS OF	5450F30T300-E-18640F35 NO 2007 5-4344/946050F5	[//	N Description					
OF			(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas, Complete Schedule T.							
EXPENDITUR	RE	Haverin	istrict				officeholder living expense			
					Travel Judic	ial (	Conference			
9 Complete ONL	Y if direct	Candidate/Of	ficeholder name	Office sough	t		Office held			
expenditure to	benefit C/O	Н								
Date		Payee name	)							
10/28/2024		Uber								
Amount (\$)		Payee addre	ess; City; Sta	ate; Zip Code	n					
Amount (4)	\$58.76	1725 Third	STEEDER WAS AND STEEDER STEEDERS	ate, Zip Code						
	Ψ50.70	1723 111114	Street							
		S F	04 04150							
		San Franci	sco, CA 94158							
PURPOSE OF		The second secon	See Categories listed at the top of this	schedule) (b	) Description					
EXPENDITUR	RE	Travel In D	istrict		Check if travel outside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense					
					Travel Judic					
Complete ONL	Y if direct	Candidate/Of	ficeholder name	Office sough	t		Office held			
expenditure to										
Data.		T _								
Date		Payee name	)							
12/10/2024		Uber								
Amount (\$)		Payee addre		ate; Zip Code						
	\$29.07	1725 Third	Street							
		San Franci	sco, CA 94158							
PURPOSE		(a) Category (s	See Categories listed at the top of this	schedule) (b	) Description					
OF EXPENDITUR	DE .	Travel Out					de of Texas. Complete Schedule T.			
EXPENDITOR	V.C.				_		officeholder living expense			
					ECourt Confe	erer	nce Las Vegas			
					W	_				
Complete ONL expenditure to			ficeholder name	Office sough	t		Office held			
experience to	DOTTON C/O	•								

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Git/Awards/Memorials Expense Legal Services The Instruction Guide ex	Printir Salari		se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	
	Sch: 14/15 Rpt: 17/19	Taylor, Nico	ole						
4	Date	5 Payee name							
	07/17/2024	Walgreens							
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip	Code				
	\$23.28	501 Belt Lin	ie Rd						
		Cedar Hill,	TX 75104						
8	PURPOSE	(a) Category (Se	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expense					de of Texas. Complete Schedule T.	
	The state of the s					Jury Photos	, 17,	officeholder living expense	
						oul) i notoo			
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office s	ought		_	Office held	
	expenditure to benefit C/OI	4							
	Date	Payee name							
	08/20/2024	Walgreens							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$7.29	501 Belt Lin	e Rd						
		Cedar Hill,	TX 75104						
	PURPOSE	(a) Category (Se	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Office Over	head/Rental Expense					le of Texas. Complete Schedule T. officeholder living expense	
						Jury Photos	, 1,	oniceroder living expense	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held								Office held	
	expenditure to benefit C/OF	1							
	Date	Payee name							
	10/15/2024	Walgreens							
	Amount (\$)	Payee addres	ss; City;	State; Zip	Code				
	\$4.15	501 Belt Lin	e Rd						
		Cedar Hill,	TX 75104						
	PURPOSE	(a) Category (Se	ee Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE	Office Overl	nead/Rental Expense					le of Texas. Complete Schedule T. officeholder living expense	
						Jury Photos	, ,,,	omeenous wing expense	
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office s	ought			Office held	
	expenditure to benefit C/OH	1							

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment			Gitt/Awards/Memorials Legal Services The Instruction Gu			/ages	s/Contract Labor		OTHER (enter a category not liste	d above)
1	Total pages Schedule F1:	2						3	3	Filer ID	
L	Sch: 15/15 Rpt: 18/19		Taylor, Nico	le							
4	Date	5	Payee name								
	12/02/2024		Walgreens								
6	Amount (\$)	7	Payee address	s; City;	State;	Zip Co	de				
	\$50.66		501 Belt Lin	e Rd							
			Cedar Hill, 1	X 75104							
8	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Overl	nead/Rental Exp	ense					de of Texas. Complete Schedule T.	
						- 1		Jury Photos	IX, (	officeholder living expense	
								oury i notos			
9	Complete ONLY if direct		`andidate/Offic	ceholder name	0	Office soug	aht		_	Office held	
	expenditure to benefit C/O		zarididate/Oni	enoider name	O	mee sou	Ji K			Office field	
H	Date		Davis a name								
	08/23/2024		Payee name Walmart								
_	Amount (\$)	_	Payee address	s; City;	State:	Zip Co	do				
	\$46.13		621 Uptown	20 00 00 00 00 00 00 00 00 00 00 00 00 0	State,	Zip Coi	il.				
	Ψ40.13		ozi optown	Diva							
			Cedar Hill, 7	V 75104							
L	DUDDOCE	_					/ls\		_		
	PURPOSE OF			e Categories listed at th		edule)	(D)	Description Check if travel ou	ıtsid	de of Texas. Complete Schedule T.	
EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense											
	Courtroom Supplies										
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	0	office sou	ght			Office held	
		_									

## IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 19/19 2 FILER NAME 3 Filer ID Taylor, Nicole 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines 5 Contribution / Expenditure reported on: Schedule D Schedule A2 Schedule B Schedule B(J) Schedule C2 X Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Taylor, Nicole 8 Departure city or name of departure location 12/05/2024 Dallas 9 Destination city or name of destination location 12/05/2024 Las Vegas 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Travel to conference