

**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: 55		
3 CANDIDATE / OFFICEHOLDER NAME	FIRST Nicole			OFFICE USE ONLY Date Received JUAN F. WALKER COUNTY CLERK DALLAS COUNTY DEPUTY FILED 2026 JAN 16 PM 2:22		
	NICKNAME	LAST Taylor	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; Post Office Box 2121 455 Cedar Hill, TX 75106			ZIP CODE Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
5 CAMPAIGN TREASURER NAME	FIRST MI			BY JUAN F. WALKER COUNTY CLERK DALLAS COUNTY DEPUTY FILED 2026 JAN 15 PM 3:47		
6 CAMPAIGN TREASURER ADDRESS (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 checked="" 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) <input 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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) County Court at Law No. 5			12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

Title of officer administering oath

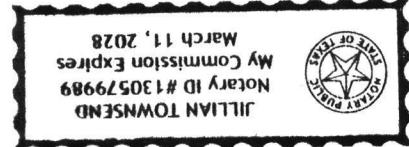
Printed name of officer administering oath

Signature of officer administering oath

Sworn to and subscribed before me, by the said MILLIAN TOWNSEND, this the 15th day of July, 2020, to certify which, witness my hand and seal of office.

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder



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.

17 AFFIDAVIT	
6. OUTSTANDING LOAN TOTALS	\$ 0.00
5. CONTRIBUTION BALANCE	\$ 178,669.59
4. TOTAL POLITICAL EXPENDITURES	\$ 41,196.38
3. EXPENDITURE TOTALS	\$ 0.00
2. TOTAL POLITICAL CONTRIBUTIONS	\$ 36,317.89
1. TOTAL CONTRIBUTION OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
COMMITTEE CAMPAIGN TREASURER ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE ADDRESS	
GENERAL	
SPECIFIC	
<input type="checkbox"/> ADDITIONAL PAGES <input type="checkbox"/> COMMITTEE(S) <input type="checkbox"/> FORM POLITICAL NOTICE	
<p>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 knowledge of the candidate/s or officeholder/s, or knowledge of the committee/s and officeholder/s are required to report this information only if they receive notice of such expenditures.</p> <p>Consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p>	
13 C / OH NAME	Taylor, Nicole
14 File ID	
2 of 55	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: FORM JC/OH COVER SHEET PG 2 SUPPORT & TOTALS



MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARRON, THOMAS 6 Contributor address; City; State; Zip Code 3227 McKinney Ave Apt 22C Dallas, TX 75204-2459	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BATTISTE CLEMENT PLLC Contributor address; City; State; Zip Code 2626 COLE AVE STE. 300 DALLAS, TX 75204	Amount of Contribution (\$) \$100.00
	Contributor's Principal Occupation	Contributor's Job Title
	Contributor's employer/law firm	Law firm of contributor's spouse (if any)
	If contributor is a child, law firm of parent(s) (if any)	
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, PORSHA Contributor address; City; State; Zip Code 1825 Market Center Blvd 500 Dallas, TX 75207	Amount of Contribution (\$) \$50.00
	Contributor's Principal Occupation	Contributor's Job Title
	Contributor's employer/law firm	Law firm of contributor's spouse (if any)
	If contributor is a child, law firm of parent(s) (if any)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bragalone, Jeff 6 Contributor address; City; State; Zip Code 901 Main St., Suite 3800 Dallas, TX 75202	7 Amount of Contribution (\$) \$5,000.00												
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney												
10 Contributor's employer/law firm Bragalone Olejko Saad, P.C.		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/08/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brauer, Alex Contributor address; City; State; Zip Code 14785 Preston Road Suite 1100 Dallas, TX 75254</td> <td>Amount of Contribution (\$) \$250.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Bailey Brauer PLLC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brauer, Alex Contributor address; City; State; Zip Code 14785 Preston Road Suite 1100 Dallas, TX 75254	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm Bailey Brauer PLLC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brauer, Alex Contributor address; City; State; Zip Code 14785 Preston Road Suite 1100 Dallas, TX 75254	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm Bailey Brauer PLLC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/08/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brown, Monique Contributor address; City; State; Zip Code 2132 Becky Lane Cedar Hill, TX 75104</td> <td>Amount of Contribution (\$) \$50.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Administrative Judge</td> <td>Contributor's Job Title Administrative Judge</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm USDA</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brown, Monique Contributor address; City; State; Zip Code 2132 Becky Lane Cedar Hill, TX 75104	Amount of Contribution (\$) \$50.00	Contributor's Principal Occupation Administrative Judge		Contributor's Job Title Administrative Judge	Contributor's employer/law firm USDA		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brown, Monique Contributor address; City; State; Zip Code 2132 Becky Lane Cedar Hill, TX 75104	Amount of Contribution (\$) \$50.00												
Contributor's Principal Occupation Administrative Judge		Contributor's Job Title Administrative Judge												
Contributor's employer/law firm USDA		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 09/24/2025	5 Full name of contributor COPELAND, DAVID 6 Contributor address; City; State; Zip Code 119 TENNYSON PL COPPELL, TX 75019	7 Amount of Contribution (\$) \$250.00												
8 Contributor's Principal Occupation Principal		9 Contributor's Job Title Principal												
10 Contributor's employer/law firm EDGE		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/23/2025</td> <td>Full name of contributor Chandler, Grady Contributor address; City; State; Zip Code 3308 Colgate Ave Dallas, TX 75225</td> <td>Amount of Contribution (\$) \$500.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Law offices of H Grady Chandler</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/23/2025	Full name of contributor Chandler, Grady Contributor address; City; State; Zip Code 3308 Colgate Ave Dallas, TX 75225	Amount of Contribution (\$) \$500.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm Law offices of H Grady Chandler		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2025	Full name of contributor Chandler, Grady Contributor address; City; State; Zip Code 3308 Colgate Ave Dallas, TX 75225	Amount of Contribution (\$) \$500.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm Law offices of H Grady Chandler		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/08/2025</td> <td>Full name of contributor Cortez, Carlos Contributor address; City; State; Zip Code 12801 N. Central Expy, Ste. 360 Cortez Law Firm, PLLC Dallas, TX 75243</td> <td>Amount of Contribution (\$) \$5,000.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Cortez Law Firm, PLLC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/08/2025	Full name of contributor Cortez, Carlos Contributor address; City; State; Zip Code 12801 N. Central Expy, Ste. 360 Cortez Law Firm, PLLC Dallas, TX 75243	Amount of Contribution (\$) \$5,000.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm Cortez Law Firm, PLLC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2025	Full name of contributor Cortez, Carlos Contributor address; City; State; Zip Code 12801 N. Central Expy, Ste. 360 Cortez Law Firm, PLLC Dallas, TX 75243	Amount of Contribution (\$) \$5,000.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm Cortez Law Firm, PLLC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dilbeck, Aaron 6 Contributor address; City; State; Zip Code 2000 McKinney Avenue Suite 1900 Dallas, TX 75201	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Munck Wilson Mandala, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Estes, Dawn Contributor address; City; State; Zip Code 3811 Turtle Creek Boulevard Suite 2000 Dallas, TX 75219	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Law Firm		Contributor's Job Title Law Firm
Contributor's employer/law firm Estes Thorne Ewing & Payne pLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HAYNES AND BOONE PAC Contributor address; City; State; Zip Code 2801 N. HARWOOD ST. STE 2300 DALLAS, TX 75201	Amount of Contribution (\$) \$3,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Taylor, Nicole	19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 36,317.89	
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 \$ 41,196.38	
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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HOEDEBECK, Charles 6 Contributor address; City; State; Zip Code 675 E ROYAL LN APT 1084 Irving, TX 75039	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Lawyer	9 Contributor's Job Title Lawyer	
10 Contributor's employer/law firm Charles L Hoedebeck PC	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HOLLAND AND KNIGHT TEXAS PAC Contributor address; City; State; Zip Code 1722 ROUTH ST STE 1500 DALLAS, TX 75201	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jones, Talemah Contributor address; City; State; Zip Code 2731 Castlecove Drive Grand Prairie, TX 75052	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Administration		Contributor's Job Title Administration
Contributor's employer/law firm Parkland		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 09/16/2025	5 Full name of contributor Kastl, Krisi 6 Contributor address; City; State; Zip Code 4144 N Central Expressway Suite 1000 Dallas, TX 75204	7 Amount of Contribution (\$) \$1,000.00												
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney												
10 Contributor's employer/law firm KASTL LAW, PC		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/16/2025</td> <td>Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 Dallas, TX 75230</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/16/2025	Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 Dallas, TX 75230	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2025	Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 Dallas, TX 75230	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/24/2025</td> <td>Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 DALLAS, TX 75230</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/24/2025	Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 DALLAS, TX 75230	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor LAW OFFICES OF CYNTHIA F. SOLIS Contributor address; City; State; Zip Code 11700 PRESTON RD STE. 660-522 DALLAS, TX 75230	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LAW OFFICES OF JEREMY W. MCKEY	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 2695 VILLA CREEK DR. STE. 155 DALLAS, TX 75234	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LAW OFFICES OF JEREMY W. MCKEY	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 2695 VILLA CREEK DR. STE. 155 DALLAS, TX 75234	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MACDONALD DEVIN MADDEN KENEFICK HARRIS PC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 12770 COIT ROAD STE. 1100 DALLAS, TX 75251	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/16/2025	5 Full name of contributor Martin, Ben	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 3500 Maple Avenue Suite 440 Dallas, TX 75219	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Ben Martin Law Group		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025	Full name of contributor McCullough, Jr, P. Michael	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 12222 Merit Drive Ste 1200 Dallas, TX 75251	
Contributor's Principal Occupation Mediator		Contributor's Job Title Mediator
Contributor's employer/law firm McCullough Mediation		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor NESBITT, EARL	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 780 SID RICH DR IRVING, TX 75039	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm RoggeDunn		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORTON ROSE FULBRIGHT US LLP TEXAS COMMITTEE 6 Contributor address; City; State; Zip Code 1550 LAMAR STE. 2000 HOUSTON, TX 77010	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olufemi, Rehema Contributor address; City; State; Zip Code 215 Kimberly Hill Palmer, TX 75152	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Educator		Contributor's Job Title Educator
Contributor's employer/law firm Dallas ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEVSNER, JOSEPH Contributor address; City; State; Zip Code 2901 CHAPMAN RD PLANO, TX 75093	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Partner		Contributor's Job Title Partner
Contributor's employer/law firm Holland & Knight		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Pullman, Richard 6 Contributor address; City; State; Zip Code 12700 Hillcrest Road Suite 125 Dallas, TX 75230	7 Amount of Contribution (\$) \$100.00												
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer												
10 Contributor's employer/law firm Richard D. Pullman		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 07/14/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Queenan, M. Kevin Contributor address; City; State; Zip Code 731 Station Drive Arlington, TX 76015 </td> <td>Amount of Contribution (\$) \$250.00 </td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Owner</td> <td>Contributor's Job Title Owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Queenan Law</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Queenan, M. Kevin Contributor address; City; State; Zip Code 731 Station Drive Arlington, TX 76015	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation Owner		Contributor's Job Title Owner	Contributor's employer/law firm Queenan Law		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Queenan, M. Kevin Contributor address; City; State; Zip Code 731 Station Drive Arlington, TX 76015	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation Owner		Contributor's Job Title Owner												
Contributor's employer/law firm Queenan Law		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/11/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rawson, Brian Contributor address; City; State; Zip Code 4721 Cherokee Trail Dallas, TX 75209 </td> <td>Amount of Contribution (\$) \$1,000.00 </td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Rawson Law, PLLC</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rawson, Brian Contributor address; City; State; Zip Code 4721 Cherokee Trail Dallas, TX 75209	Amount of Contribution (\$) \$1,000.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm Rawson Law, PLLC		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rawson, Brian Contributor address; City; State; Zip Code 4721 Cherokee Trail Dallas, TX 75209	Amount of Contribution (\$) \$1,000.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm Rawson Law, PLLC		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/14 Rpt: 14/55		
2 FILER NAME Taylor, Nicole		3 Filer ID		
4 Date 07/08/2025	5 Full name of contributor Reid, Brandon	6 Contributor address; City; State; Zip Code 510 North 22nd Street Richmond, VA 23223	7 Amount of Contribution (\$) \$2,500.00	
	8 Contributor's Principal Occupation Attorney			9 Contributor's Job Title Attorney
10 Contributor's employer/law firm ReidGoodwin		11 Law firm of contributor's spouse (if any)		
12 If contributor is a child, law firm of parent(s) (if any)				
Date 09/23/2025	Full name of contributor Schorr, Geoffrey		Amount of Contribution (\$) \$567.89	
	Contributor address; City; State; Zip Code 3114 Saint Johns Drive Dallas, TX 75205			
Contributor's Principal Occupation attorney		Contributor's Job Title attorney		
Contributor's employer/law firm schorr law firm pc		Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				
Date 07/01/2025	Full name of contributor Shkolnik, Hunter		Amount of Contribution (\$) \$1,000.00	
	Contributor address; City; State; Zip Code 200 dorado beach drive Wp#4212 Dorado 00646 Puerto Rico			
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer		
Contributor's employer/law firm Nspr law		Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Yasmin 6 Contributor address; City; State; Zip Code 3507 Crescent Ave Dallas, TX 75205	7 Amount of Contribution (\$) \$1,000.00												
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney												
10 Contributor's employer/law firm Morgan Lewis		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 08/05/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, COE, COUSINS & IRONS, LLP Contributor address; City; State; Zip Code 700 PEARL ST. 25TH FLOOR DALLAS, TX 75201</td> <td>Amount of Contribution (\$) \$1,000.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, COE, COUSINS & IRONS, LLP Contributor address; City; State; Zip Code 700 PEARL ST. 25TH FLOOR DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, COE, COUSINS & IRONS, LLP Contributor address; City; State; Zip Code 700 PEARL ST. 25TH FLOOR DALLAS, TX 75201	Amount of Contribution (\$) \$1,000.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/25/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLOTSON JOHNSON PATTON Contributor address; City; State; Zip Code 1201 MAIN ST STE. 1300 DALLAS, TX 75202</td> <td>Amount of Contribution (\$) \$5,000.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLOTSON JOHNSON PATTON Contributor address; City; State; Zip Code 1201 MAIN ST STE. 1300 DALLAS, TX 75202	Amount of Contribution (\$) \$5,000.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TILLOTSON JOHNSON PATTON Contributor address; City; State; Zip Code 1201 MAIN ST STE. 1300 DALLAS, TX 75202	Amount of Contribution (\$) \$5,000.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/55												
2 FILER NAME Taylor, Nicole		3 Filer ID												
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Taylor, Ben 6 Contributor address; City; State; Zip Code 2654 Lakeforest Court Dallas, TX 75214	7 Amount of Contribution (\$) \$100.00												
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney												
10 Contributor's employer/law firm Ted B. Lyon & Associates, P.C.		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/24/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Turner, Andrew Contributor address; City; State; Zip Code 6220 Chesley Ln Dallas, TX 75214</td> <td>Amount of Contribution (\$) \$250.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation mediator</td> <td>Contributor's Job Title mediator</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Turner ADR</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Turner, Andrew Contributor address; City; State; Zip Code 6220 Chesley Ln Dallas, TX 75214	Amount of Contribution (\$) \$250.00	Contributor's Principal Occupation mediator		Contributor's Job Title mediator	Contributor's employer/law firm Turner ADR		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Turner, Andrew Contributor address; City; State; Zip Code 6220 Chesley Ln Dallas, TX 75214	Amount of Contribution (\$) \$250.00												
Contributor's Principal Occupation mediator		Contributor's Job Title mediator												
Contributor's employer/law firm Turner ADR		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/24/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WONG KRAUSE, MICHELLE Contributor address; City; State; Zip Code 2201 MAIN ST. STE. 1140 DALLAS, TX 75201</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Attorney</td> <td>Contributor's Job Title Attorney</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm The Wong Krause Law Firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WONG KRAUSE, MICHELLE Contributor address; City; State; Zip Code 2201 MAIN ST. STE. 1140 DALLAS, TX 75201	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	Contributor's employer/law firm The Wong Krause Law Firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WONG KRAUSE, MICHELLE Contributor address; City; State; Zip Code 2201 MAIN ST. STE. 1140 DALLAS, TX 75201	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney												
Contributor's employer/law firm The Wong Krause Law Firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Date 09/16/2025	5 Full name of contributor Winful, Joel 6 Contributor address; City; State; Zip Code 1608 Flowers Drive Carrollton, TX 75007	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Joel K.B. Winful		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

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: Sch: 1/37 Rpt: 18/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 12/01/2025	5 Payee name 23RD TEJANO SENATORIAL DISTRICT DEMOCRATS	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 226534 DALLAS, TX 75222	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name 23RD TEJANO SENATORIAL DISTRICT DEMOCRATS	
Amount (\$) \$20.00	Payee address; City; State; Zip Code PO Box 226534 DALLAS, TX 75222	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name ADOBE	
Amount (\$) \$323.50	Payee address; City; State; Zip Code 345 Park Avenue SAN JOSE, CA 95110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SUBSCRIPTION FEES
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: Sch: 2/37 Rpt: 19/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 12/30/2025	5 Payee name AMAZON		
6 Amount (\$) \$58.44	7 Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SIGNAGE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/03/2025	Payee name AMAZON		
Amount (\$) \$99.91	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LANCASTER ISD CHRISTMAS GIFT DONATION SPONSOR	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/17/2025	Payee name AMAZON		
Amount (\$) \$112.65	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 3/37 Rpt: 20/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 09/16/2025	5 Payee name AMAZON	
6 Amount (\$) \$125.75	7 Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name AMAZON	
Amount (\$) \$72.21	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name AMAZON	
Amount (\$) \$14.06	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 4/37 Rpt: 21/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 08/28/2025	5 Payee name AMAZON		
6 Amount (\$) \$120.13	7 Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/29/2025	Payee name AMAZON		
Amount (\$) \$19.03	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/05/2025	Payee name AMAZON		
Amount (\$) \$14.06	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DIGITAL TECH	
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: Sch: 5/37 Rpt: 22/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/16/2025	5 Payee name AMAZON	
6 Amount (\$) \$51.52	7 Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name AMAZON	
Amount (\$) \$18.95	Payee address; City; State; Zip Code 410 Terry Ave N SEATTLE, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name AMERICAN AIRLINES	
Amount (\$) \$362.43	Payee address; City; State; Zip Code 1 SKYVIEW DRIVE FORT WORTH, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT TO NEW ORLEANS FOR CLE
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: Sch: 6/37 Rpt: 23/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 07/23/2025	5 Payee name AMERICAN AIRLINES		
6 Amount (\$) \$553.00	7 Payee address; City; State; Zip Code 1 SKYVIEW DRIVE FORT WORTH, TX 76115		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLIGHT TO CHICAGO FOR NBA CONVENTION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/13/2025	Payee name ARTS DISTRICT MANSION		
Amount (\$) \$37.01	Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JUDICIARY COMMITTEE LUNCHEON	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/13/2025	Payee name ARTS DISTRICT MANSION		
Amount (\$) \$5.00	Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PARKING	
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: Sch: 7/37 Rpt: 24/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/07/2025	5 Payee name BATH & BODY WORKS	
6 Amount (\$) \$109.87	7 Payee address; City; State; Zip Code 305 FM 1382 CEDAR HILL, TX 75104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name BEST BUY	
Amount (\$) \$193.78	Payee address; City; State; Zip Code 731 N HWY 67 CEDAR HILL, TX 75104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE PRINTER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name BEST BUY	
Amount (\$) \$38.96	Payee address; City; State; Zip Code 731 N HWY 67 CEDAR HILL, TX 75104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE ELECTRONICS
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: Sch: 8/37 Rpt: 25/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 10/15/2025	5 Payee name BEST BUY	
6 Amount (\$) \$43.29	7 Payee address; City; State; Zip Code 731 N HWY 67 CEDAR HILL, TX 75104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE ELECTRONICS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/06/2025	Payee name BEYOND THE SLOGAN CONSULTING	
Amount (\$) \$235.00	Payee address; City; State; Zip Code 2710 ROUTH CREEK #1102 RICHARDSON, TX 75082	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONSULTING AND COMMUNICATION SERVICES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name BURGER BAR CONGRESS	
Amount (\$) \$19.25	Payee address; City; State; Zip Code 110 E 2ND STREET AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEAL AT JUDICIAL CONFERENCE
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: Sch: 9/37 Rpt: 26/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 09/26/2025	5 Payee name COSTCO		
6 Amount (\$) \$183.18	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) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/14/2025	Payee name COSTCO		
Amount (\$) \$395.61	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/20/2025	Payee name COSTCO		
Amount (\$) \$157.21	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 10/37 Rpt: 27/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 08/20/2025	5 Payee name COSTCO		
6 Amount (\$) \$60.60	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) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/20/2025	Payee name COSTCO		
Amount (\$) \$53.02	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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/18/2025	Payee name DALLAS AFL-CIO		
Amount (\$) \$450.00	Payee address; City; State; Zip Code 1408 N. WASHINGTON AVE DALLAS, TX 75201		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LABOR DAY BREAKFAST SPONSOR	
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: Sch: 11/37 Rpt: 28/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 10/29/2025	5 Payee name DALLAS ALUMNAE	
6 Amount (\$) \$140.39	7 Payee address; City; State; Zip Code P.O. Box 222051 DALLAS, TX 75222	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FOUNDERS DAY LUNCHEON TICKET
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name DALLAS ASSOCIATION OF YOUNG LAWYERS	
Amount (\$) \$193.89	Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BOLTON BALL SPONSORSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/24/2025	Payee name DALLAS BAR ASSOCIATION	
Amount (\$) \$180.00	Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BAR DUES
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: Sch: 12/37 Rpt: 29/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 08/18/2025	5 Payee name DALLAS BAR ASSOCIATION	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BENCH BAR CONFERENCE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1414 N. Washington Ave. DALLAS, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN FILING FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1414 N. Washington Ave. DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TICKET
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/37 Rpt: 30/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 10/16/2025	5 Payee name DALLAS COUNTY DEMOCRATIC PARTY	
6 Amount (\$) \$1,032.70	7 Payee address; City; State; Zip Code 1414 N. Washington Ave. DALLAS, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/22/2025	Payee name DALLAS COUNTY DEMOCRATIC PARTY	
Amount (\$) \$220.00	Payee address; City; State; Zip Code 1414 WASHINGTON AVE DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LABOR DAY SPONSORSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name DALLAS EDUCATION FOUNDATION	
Amount (\$) \$103.61	Payee address; City; State; Zip Code 9400 N Central Expy DALLAS, TX 75231	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TICKET
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: Sch: 14/37 Rpt: 31/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 11/14/2025	5 Payee name DALLAS LGBT BAR ASSOCIATION	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 1717 MAIN STREET STE. 4200 DALLAS, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VISIBILITY BALL SPONSORSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name DALLAS LGBT BAR ASSOCIATION	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1717 MAIN STREET STE. 4200 DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VISIBILITY BALL TICKET
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name DALLAS WOMEN LAWYERS FOUNDATION	
Amount (\$) \$102.56	Payee address; City; State; Zip Code PO Box 700353 DALLAS, TX 75370	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2025 DWLA AWARDS DINNER TICKET
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: Sch: 15/37 Rpt: 32/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 10/22/2025	5 Payee name DEMOCRACY TOOLBOX		
6 Amount (\$) \$3,030.00	7 Payee address; City; State; Zip Code PO BOX 6250 MCKINNEY, TX 75071		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTING AND COMMUNICATION SERVICES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/11/2025	Payee name DEMOCRACY TOOLBOX		
Amount (\$) \$3,380.00	Payee address; City; State; Zip Code PO BOX 6250 MCKINNEY, TX 75071		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTING AND COMMUNICATION SERVICES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Donorbox		
Amount (\$) \$445.36	Payee address; City; State; Zip Code 620 Folsom St, Unit 100 San Francisco, CA 94107		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform fees	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/37 Rpt: 33/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/03/2025	5 Payee name EXTRA SPACE STORAGE	
6 Amount (\$) \$111.00	7 Payee address; City; State; Zip Code 303 E HWY 67 DUNCANVILLE, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/03/2025	Payee name EXTRA SPACE STORAGE	
Amount (\$) \$124.00	Payee address; City; State; Zip Code 303 E 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/03/2025	Payee name EXTRA SPACE STORAGE	
Amount (\$) \$124.00	Payee address; City; State; Zip Code 303 E 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
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: Sch: 17/37 Rpt: 34/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 10/03/2025	5 Payee name EXTRA SPACE STORAGE	
6 Amount (\$) \$124.00	7 Payee address; City; State; Zip Code 303 E HWY 67 DUNCANVILLE, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name EXTRA SPACE STORAGE	
Amount (\$) \$111.00	Payee address; City; State; Zip Code 303 E 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name EXTRA SPACE STORAGE	
Amount (\$) \$111.00	Payee address; City; State; Zip Code 303 E 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
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: Sch: 18/37 Rpt: 35/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/03/2025	5 Payee name EXTRA SPACE STORAGE	
6 Amount (\$) \$111.00	7 Payee address; City; State; Zip Code 303 E HWY 67 DUNCANVILLE, TX 75137	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN STORAGE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name GODADDY	
Amount (\$) \$210.90	Payee address; City; State; Zip Code 2156 E GoDaddy Way TEMPE, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE RENEWAL
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name GRAYSON, PAMELA	
Amount (\$) \$300.00	Payee address; City; State; Zip Code GROVEWOOD ST. DALLAS, TX 75210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSOR GET OUT THE VOTE BAGS
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: Sch: 19/37 Rpt: 36/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 12/24/2025	5 Payee name GREEN & GREEN	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 4100 Spring Valley Rd STE 475 DALLAS, TX 75244	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MLK LEGACY AWARDS LUNCHEON SPONSOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/19/2025	Payee name GREEN & GREEN	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 4100 Spring Valley Rd STE 475 DALLAS, TX 75244	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DEMOCRATIC PRIMARY GUIDE AD
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name GREEN & GREEN	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 4100 Spring Valley Rd STE 475 DALLAS, TX 75244	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DEMOCRATIC PRIMARY GUIDE SPONSOR
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: Sch: 20/37 Rpt: 37/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/25/2025	5 Payee name HIGHER HEIGHTS FOR AMERICA	
6 Amount (\$) \$12.50	7 Payee address; City; State; Zip Code 147 Prince Street, Suite 30 BROOKLYN, NY 11201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name HIGHER HEIGHTS FOR AMERICA	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 147 Prince Street, Suite 30 BROOKLYN, NY 11201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name HOUSTON BAR ASSOCIATION	
Amount (\$) \$10.40	Payee address; City; State; Zip Code DEPT. 192, P.O. BOX 4346 HOUSTON, TX 77210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONTINUING EDUCATION
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: Sch: 21/37 Rpt: 38/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/30/2025	5 Payee name HYATT REGENCY CHICAGO	
6 Amount (\$) \$7.99	7 Payee address; City; State; Zip Code 151 E Wacker Dr CHICAGO, IL 60601	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEAL AT NBA CONVENTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name HYATT REGENCY CHICAGO	
Amount (\$) \$2,217.19	Payee address; City; State; Zip Code 151 E Wacker Dr CHICAGO, IL 60601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HOTEL AT NBA CONVENTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name IRVING DEMOCRATIC CLUB	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 2911 Esters Rd IRVING, TX 75062	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
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: Sch: 22/37 Rpt: 39/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 09/11/2025	5 Payee name J.L. TURNER LEGAL ASSOCIATION	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PHYLLIS LISTER BROWN SCHOLARSHIP DONATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name KAUWUANE BURTON STUDIOS	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6025 COMMERCE DR. STE. 500 IRVING, TX 75063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHOTOS
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name KAUWUANE BURTON STUDIOS	
Amount (\$) \$1,082.73	Payee address; City; State; Zip Code 6025 COMMERCE DR. STE. 500 IRVING, TX 75063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHOTOS
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: Sch: 23/37 Rpt: 40/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 10/03/2025	5 Payee name LAKE HIGHLAND WHITE ROCK DEMOCRATS		
6 Amount (\$) \$290.00	7 Payee address; City; State; Zip Code PO Box 180598 DALLAS, TX 75218		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CHILI SUPPER SPONSOR	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/24/2025	Payee name LAMBDA LEGAL		
Amount (\$) \$100.00	Payee address; City; State; Zip Code 3500 OAK LAWN AVE, STE. 500 DALLAS, TX 75219		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUMINOSITY TICKET	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/29/2025	Payee name LAMBDA LEGAL		
Amount (\$) \$600.00	Payee address; City; State; Zip Code 3500 OAK LAWN AVE, STE. 500 DALLAS, TX 75219		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP	
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: Sch: 24/37 Rpt: 41/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 09/05/2025	5 Payee name MAC TAYLOR AMERICAN INNS OF COURT	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 225 Reinekers Lane, Suite 770 Alexandria, VA 22314	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name MEXICAN AMERICAN BAR ASSN OF DALLAS	
Amount (\$) \$220.00	Payee address; City; State; Zip Code 2101 Ross Ave DALLAS, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2025 MABA DALLAS GALA
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name MMS COMPANY AD SPECIALTIES, LLC	
Amount (\$) \$43.30	Payee address; City; State; Zip Code 217 N INTERSTATE 35 E DESOTO, TX 75115	
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NAME BADGES
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: Sch: 25/37 Rpt: 42/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 11/12/2025	5 Payee name NATIONAL ASSOCIATION OF BLACK PROSECUTORS - DFW CHAPTER	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1507 East 53rd Street, Suite 108 CHICAGO, IL 60615	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION TO CRAIG WATKINS SCHOLARSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name NATIONAL ASSOCIATION OF WOMEN JUDGES	
Amount (\$) \$170.00	Payee address; City; State; Zip Code P.O. BOX 335 HEBER CITY, UT 84032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name NBA JUDICIAL COUNCIL	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1816 12th St. NW 4th Floor WASHINGTON, DC 20009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JUDICIAL COUNCIL DUES
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: Sch: 26/37 Rpt: 43/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 07/28/2025	5 Payee name NBA LINKS		
6 Amount (\$) \$125.00	7 Payee address; City; 1816 12th St. NW 4th Floor WASHINGTON, DC 20009		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCHEON AT NBA	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/27/2025	Payee name NORTH DALLAS SUBURBAN ALUMNAE		
Amount (\$) \$359.01	Payee address; City; P.O. Box 830604 RICHARDSON, TX 75083		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DFW FOUNDERS DAY TICKETS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/02/2025	Payee name NORTH TEXAS ASIAN DEMOCRATS		
Amount (\$) \$250.00	Payee address; City; 2201 Main Street, Suite 1140 DALLAS, TX 75202		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP	
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: Sch: 27/37 Rpt: 44/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 11/25/2025	5 Payee name NORTH TEXAS FOOD BANK	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 4500 S. COCKRELL HILL DALLAS, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense THANKSGIVING DONATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name PAPPADEAUX	
Amount (\$) \$85.33	Payee address; City; State; Zip Code 800 E Hwy 67 DUNCANVILLE, TX 75137	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF LUNCH
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name PAPPADEAUX	
Amount (\$) \$142.43	Payee address; City; State; Zip Code 3520 OAK LAWN DALLAS, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF LUNCH
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: Sch: 28/37 Rpt: 45/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 08/21/2025	5 Payee name PAPPADEAUX	
6 Amount (\$) \$61.45	7 Payee address; City; State; Zip Code 800 E 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF LUNCH
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/16/2025	Payee name PAPPADEAUX	
Amount (\$) \$151.09	Payee address; City; State; Zip Code 800 E Hwy 67 DUNCANVILLE, TX 75137	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMMUNITY LUNCHEON HOSTED IN COURTROOM
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name PAPPADEAUX	
Amount (\$) \$209.46	Payee address; City; State; Zip Code 3520 OAK LAWN DALLAS, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF LUNCH
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: Sch: 29/37 Rpt: 46/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 11/25/2025	5 Payee name PRESTON HOLLOW DEMOCRATS	
6 Amount (\$) \$285.00	7 Payee address; City; State; Zip Code P.O. Box 670631 DALLAS, TX 75367	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PHD MEMBERSHIP AND MEETING SPONSOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name REILLY ECHOLS PRINTING	
Amount (\$) \$1,242.54	Payee address; City; State; Zip Code 1710 S HARWOOD ST. DALLAS, TX 75215	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MATERIALS PRINTING
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name SOUTHWEST DALLAS COUNTY ALUMNAE CHAPTER	
Amount (\$) \$90.00	Payee address; City; State; Zip Code P.O. BOX 670 DESOTO, TX 75123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GENESIS WOMENS SHELTER DONATION
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: Sch: 30/37 Rpt: 47/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 07/21/2025	5 Payee name SOUTHWEST DALLAS COUNTY ALUMNAE CHAPTER	
6 Amount (\$) \$106.15	7 Payee address; City; State; Zip Code P.O. BOX 670 DESOTO, TX 75123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPONSORSHIP
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/16/2025	Payee name STATE BAR OF TEXAS	
Amount (\$) \$295.00	Payee address; City; State; Zip Code 1210 San Antonio Ste. 800 AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LICENSE TRANSCRIPT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name STATE BAR OF TEXAS	
Amount (\$) \$288.00	Payee address; City; State; Zip Code 410 Terry Ave N AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BAR DUES
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: Sch: 31/37 Rpt: 48/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 09/15/2025	5 Payee name STONEWALL DEMOCRATS		
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code PO Box 192305 DALLAS, TX 75219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPONSORSHIP	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Stripe		
Amount (\$) \$653.27	Payee address; City; State; Zip Code 3180 18th St San Francisco, CA 94110		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name TAYLOR, NICOLE		
Amount (\$) \$7,641.69	Payee address; City; State; Zip Code P.O. BOX 455 CEDAR HILL, TX 75106		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REIMBURSEMENT OF PERSONAL FUND EXPENSES NOTED ON EARLIER REPORTS	
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/37 Rpt: 49/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 12/03/2025	5 Payee name TEXAS CENTER FOR JUDICIARY	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 1210 San Antonio Ste. 800 AUSTIN, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CONTINUING EDUCATION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name TEXAS CENTER FOR JUDICIARY	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 1210 San Antonio Ste. 800 AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SUBSCRIPTION FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/10/2025	Payee name TEXASLATINOPRIDE.ORG	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 710 S.Edgefield Avenue DALLAS, TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FESTIVAL SPONSORSHIP
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: Sch: 33/37 Rpt: 50/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 08/18/2025	5 Payee name THE WIRE GREEK		
6 Amount (\$) \$81.19	7 Payee address; City; State; Zip Code 1150 Malabar Rd SE STE 111 #205 Palm Bay, FL 32907		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense AI TECH SUMMIT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name U.S. POST OFFICE		
Amount (\$) \$29.20	Payee address; City; State; Zip Code 475 E FM 1382 CEDAR HILL, TX 75104		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/07/2025	Payee name U.S. POST OFFICE		
Amount (\$) \$29.20	Payee address; City; State; Zip Code 475 E FM 1382 CEDAR HILL, TX 75104		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE	
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: Sch: 34/37 Rpt: 51/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 11/12/2025	5 Payee name U.S. POST OFFICE	
6 Amount (\$) \$271.00	7 Payee address; City; State; Zip Code 475 FM 1382 CEDAR HILL, TX 75104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIN P.O. BOX
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name U.S. POST OFFICE	
Amount (\$) \$73.00	Payee address; City; State; Zip Code 475 FM 1382 CEDAR HILL, TX 75104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name U.S. POST OFFICE	
Amount (\$) \$29.20	Payee address; City; State; Zip Code 475 FM 1382 CEDAR HILL, TX 75104	
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE
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: Sch: 35/37 Rpt: 52/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 07/01/2025	5 Payee name WALGREENS		
6 Amount (\$) \$22.88	7 Payee address; City; State; Zip Code 501 E BELT LINE RD CEDAR HILL, TX 75104		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JUROR PHOTOS	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/14/2025	Payee name WALMART		
Amount (\$) \$56.10	Payee address; City; State; Zip Code 820 Belt Line Rd. CEDAR HILL, TX 75104		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURTROOM SUPPLIES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/17/2025	Payee name WALMART		
Amount (\$) \$41.73	Payee address; City; State; Zip Code 820 Belt Line Rd. CEDAR HILL, TX 75104		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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: Sch: 36/37 Rpt: 53/55	2 FILER NAME Taylor, Nicole	3 Filer ID
4 Date 10/29/2025	5 Payee name WAYFAIR	
6 Amount (\$) \$94.15	7 Payee address; City; State; Zip Code 4 Copley Place, 7th Floor BOSTON, MA 02116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE FURNITURE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name WAYFAIR	
Amount (\$) \$137.47	Payee address; City; State; Zip Code 4 Copley Place, 7th Floor BOSTON, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COURT FURNITURE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name WILLIAMS CHICKEN PARTNERS IN EDUCATION	
Amount (\$) \$383.11	Payee address; City; State; Zip Code 2831 E Ledbetter Dr DALLAS, TX 75216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CHARITY GOLF SPONSORSHIP
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: Sch: 37/37 Rpt: 54/55	2 FILER NAME Taylor, Nicole	3 Filer ID	
4 Date 08/01/2025	5 Payee name WINGSTOP		
6 Amount (\$) \$15.79	7 Payee address; City; State; Zip Code 418 S ERVAY ST. DALLAS, TX 75201		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LUNCH WITH CONSTITUENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/1 Rpt: 55/55
2 FILER NAME Taylor, Nicole		3 Filer ID
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee AMERICAN AIRLINES		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
6 Dates of Travel	7 Name of person(s) traveling Taylor, Nicole	
	8 Departure city or name of departure location Dallas	
	9 Destination city or name of destination location New Orleans	
10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) CLE in New Orleans	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee AMERICAN AIRLINES		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel	Name of person(s) traveling Taylor, Nicole	
	Departure city or name of departure location Dallas	
	Destination city or name of destination location Chicago	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) NBA Convention	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee HYATT REGENCY CHICAGO		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel	Name of person(s) traveling Taylor, Nicole	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event) HOTEL AT NBA CONVENTION	