

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 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 11
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR M.R. NICKNAME	FIRST ALEXANDER LAST	MI # SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address			OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Date Processed Date Imaged
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR M.R. NICKNAME	FIRST TOM LAST	MI # SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)			STATE: TARRANT COUNTY CITY: TARRANT COUNTY STATE: TARRANT COUNTY ZIP CODE: TARRANT COUNTY FEB - 3 PM 4:20 FILED ELECTIONS ADMINISTRATION
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2014 THROUGH 02/03/2014		
11 ELECTION	ELECTION DATE Month Day Year 03/04/2014	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) N/A	13 OFFICE SOUGHT (if known) JUDGE, TARRANT CRIMINAL COURT #3	
GO TO PAGE 2			

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

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

14 C/OH NAME Alexander Kim **15 ACCOUNT # (Ethics Commission Filers)**

16 NOTICE FROM POLITICAL COMMITTEE(S)

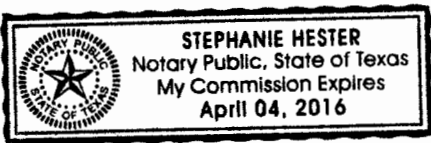
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME	FILED TARRANT COUNTY 2014 FEB -3 PM 4:20 STEVEN R. BOHR ELECTIONS ADMINISTRATOR
	<input type="checkbox"/>	COMMITTEE ADDRESS	
	<input type="checkbox"/>	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>4750⁰⁰</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>14,927³⁴</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>4657³⁰</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>20,000⁰⁰</u>

18 AFFIDAVIT

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



Alex Kim
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Alexander Kim, this the 3rd day of Feb, 20 14, to certify which, witness my hand and seal of office.

Stephanie Hester
Signature of officer administering oath

Stephanie Hester
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 2	
2 FILER NAME Alexander Kim		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/23/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSEPH BUTLOR	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 14 Key West Court Weston, FL 33326		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation SOFTWARE CONSULTANT		10 Contributor's job title CONSULTANT	
11 Contributor's employer/law firm RED HAT		12 Law firm of contributor's spouse (if any) N/A	
13 If contributor is a child, law firm of parent(s) (if any) N/A			
Date 1/14/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDREA Kim	Amount of contribution (\$) \$1000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4008 MARQUETTE DALLAS, TX 75225		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation PSYCHIATRIST		Contributor's job title PSYCHIATRIST	
Contributor's employer/law firm N/A SELF		Law firm of contributor's spouse (if any) N/A	
If contributor is a child, law firm of parent(s) (if any) N/A			
Date 1/29/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETER HOO	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 215 W. WASHINGTON # 2310 CHICAGO, IL 60606		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation CONSULTING MANAGER		Contributor's job title MANAGER	
Contributor's employer/law firm ACCENTURE		Law firm of contributor's spouse (if any) N/A	
If contributor is a child, law firm of parent(s) (if any) N/A			

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 TARRANT COUNTY
 CLERK OF COURTS

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 2	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/31/2014	5 Full name of contributor <input type="checkbox"/> but-of-state PAC (ID#: _____) ESTHER CHOO	7 Amount of contribution (\$) \$ 150.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 24 MUTUAL PLACE PROVIDENCE, RI 02906		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation PHYSICIAN		10 Contributor's job title PHYSICIAN	
11 Contributor's employer/law firm SELF		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any) N/A			

Date 1/25/14	Full name of contributor <input type="checkbox"/> but-of-state PAC (ID#: _____) YUNG K. CHOO	Amount of contribution (\$) \$ 3000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 235 6th St. PROVIDENCE, RI 02906		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation RETIRED		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	Full name of contributor <input type="checkbox"/> but-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
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)			

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 STEVEN R. BARR
 ELECTIONS ADMINISTRATOR

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 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 2
2 FILER NAME Alexander Kim		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$ Ø
5 Date of loan 1/23/14	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander Kim	9 Loan Amount (\$) 5000
6 Is lender a financial institution? Y <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code 2601 Summit View DR. BEDFORD, TX 76021	10 Interest rate
		11 Maturity date
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm Kim & Andrews		15 Law Firm of lender's spouse (if any) N/A
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 Check if personal funds were deposited into political account <input type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor N/A	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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 STEVE ANSON
 ELECTIONS ADMINISTRATOR

LOANS (JUDICIAL)

SCHEDULE E (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 2
2 FILER NAME Alexander Kim		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ 0
5 Date of loan 1/23/14	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander Kim	9 Loan Amount (\$) 5000
6 Is lender a financial institution? Y <input checked="" type="checkbox"/>	8 Lender address; City; State; Zip Code 7601 Summit View Bedford, TX 76021	10 Interest rate
		11 Maturity date
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Attorney
14 Lender's Employer/Law Firm Kim B Anderson		15 Law Firm of lender's spouse (if any) N/A
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor N/A	FILED TARRANT COUNTY 2014 FEB -3 PM 4:20 STATE CLERK ELECTIONS ADMINISTRATOR
21 Guarantor address; City; State; Zip Code		
23 Guarantor's Principal Occupation		
24 Guarantor's Job Title		
25 Guarantor's Employer/Law Firm		
26 Law Firm of guarantor's spouse (if any)		
27 If guarantor is child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Alexander Kim</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/2/14</i>		5 Payee name <i>AMERICAN GREETINGS CORPORATION</i>			
6 Amount (\$) <i>\$399</i>		7 Payee address; City; State; Zip Code <i>ONE AMERICAN ROAD CLEVELAND, OH, 44114</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>ONLINE CARDS</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>1/2/14</i>		Payee name <i>TOWES</i>			
Amount (\$) <i>\$1937.68</i>		Payee address; City; State; Zip Code <i>770 GRAPVINE HWY HURST, TX 76054</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>		Description (If travel outside of Texas, complete Schedule T) <i>POSTS</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>1/13/14</i>		Payee name <i>CONROVILLE LIONS CLUB</i>			
Amount (\$) <i>91.00</i>		Payee address; City; State; Zip Code <i>5301 RIVERWALK DR. CONROVILLE, TX 76034</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>FEES</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>1/10/14</i>		Payee name <i>TOWES</i>			
Amount (\$) <i>56.33</i>		Payee address; City; State; Zip Code <i>770 GRAPVINE HWY HURST, TX 76054</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>ADVERTISING EXPENSE</i>		Description (If travel outside of Texas, complete Schedule T) <i>SIGN TIES</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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 STEVE SANDRA
 ELECTIONS ADMINISTRATION

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME ALEXANDER Kim		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/14/14		5 Payee name FACEBOOK.COM			
6 Amount (\$) \$6.99		7 Payee address; City; State; Zip Code 1601 WILLOW RD MONTE PARK, CA 94025			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSES		(b) Description (If travel outside of Texas, complete Schedule T) ONLINE BOOST	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1.17.14		Payee name JEFF DAVIS			
Amount (\$) \$1190.75		Payee address; City; State; Zip Code 2002 LATTAN AUSTON CITY, TX 76117			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) AD PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) T-SHIRTS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/22/14		Payee name REPUBLICAN WOMEN ARLINGTON			
Amount (\$) \$20.00		Payee address; City; State; Zip Code P.O. 14317 ARLINGTON, TX 76094			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FEES		Description (If travel outside of Texas, complete Schedule T) LUNCHEON / CANDIDATE FORUM	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/23/14		Payee name COWTOWN MEDIA			
Amount (\$) \$3925.00		Payee address; City; State; Zip Code 1224 US. 377 ROANOKE, TX 76262			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING		Description (If travel outside of Texas, complete Schedule T) ADVERTISING	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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 BY:

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME ALEXANDER KIM	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11/9/14	5 Payee name COPY HQ
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6 Amount (\$) \$6000 ⁰⁰	7 Payee address; City; State; Zip Code 14150 TRINITY # 750 FW, TX 76155
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) PRINTING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) SIGNS
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/21/14	Payee name LOWES
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Amount (\$) \$1162.41	Payee address; City; State; Zip Code 770 GRAPENINE HWY HURST, TX 76054
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) POSTS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/24/14	Payee name AMERICAN GREETINGS
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Amount (\$) \$399	Payee address; City; State; Zip Code ONE AMERICAN RD. CLEVELAND OH 44114
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING	Description (If travel outside of Texas, complete Schedule T) ONLINE CARDS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/30/14	Payee name COWTOWN MEDIA
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Amount (\$) \$529 ⁰⁰	Payee address; City; State; Zip Code 1224 US 377 ROANOKE, TX 76262
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) PRINTING	Description (If travel outside of Texas, complete Schedule T) CARDS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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 TARRANT COUNTY
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 STEVE LAMONTAGNA
 ELECTIONS ADMINISTRATOR

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

2 FILER NAME

Alexander Kim

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

Alexander Kim

5 Lender address; City; State; Zip Code

2601 Summit View
Bedford, TX 76021

GUARANTOR INFORMATION

6 Name of guarantor

N/A

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

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ELECTIONS ADMINISTRATOR
BY:

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The Instruction Guide explains how to complete this form.

1 Total pages Schedule M:

2 FILER NAME

Alexander Kim

3 ACCOUNT # (Ethics Commission Filers)

4 Description of Asset

T-POSSES

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

Description of Asset

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STEVE NABORN
ELECTIONS ADMINISTRATOR

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