JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction G	Buide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	DOWAL C	\mathcal{R}^{M}	OFFICE USE ONLY		
NAME	DON PAST	SUFFIX	Date Received By CT 2		
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	TARRAN I		
Change of Address			1 3 3 3 3 5 5 6 7 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delinened or Date Position Floor		
6 CAMPAIGN TREASURER NAME	Patty	м1	Date Processed		
NAME	NICKNAME LAST WISK	SUFFIX	Date Imaged		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO. DO. DON PLEASE); APT /	SUITE #; CITY; STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	July 15 30th day before	_	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THR	OUGH 12 / 31 /	Year		
11 ELECTION	ELECTION DATE Month Day Year Primary General	Description			
12 OFFICE	Judge, Court Con	13 OFFICE SOUGHT (if known	n)		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME	1		15 Filer ID (Ethics Commission Filers)		
	02 (16	RSON	The first is (Earlies 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 ON IN THE THEY RESERVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME COMMITTEE ADDRESS	AN II PA		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	PM I2: 33 LIPS RISTRATOR		
Additional Pages		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 \$ - 0 -				
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ -0			\$ -0-		
TOTALS 3. TOTAL POLIUNLESS ITE		POLITICAL EXPENDITURES OF \$100 OR LESS, BITEMIZED	\$		
	4. TOTAL	\$ Z, 081			
BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 42, 936		\$ 42, 936 The state of the stat		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 3 9, 50		THE \$ 39,500		
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 tile 15, Election Code. CARLA PHELPS My Commission Expires					
Signature of Candidate or Officeholder					
Sworn to and subscribed before me, by the said, this the,					
day of					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	Ell ED MARS		
19 FILER NAME ON IECSON 20 Filer ID (Ethics Com			nmission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		
3.	3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$ 2,081 =
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	. CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUND	os	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	ONS RETURNED	\$
		84:	20 ELE
			TARRA 016 JAN ECTIONS
			RA RAT

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

FILED TARRANT COSSINEDULE F1

		2016 141 1 1 0010 01		
EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	pense Travel Out Of District ages/Contract Labor Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME ON PERSON	3 Filer ID (Ethics Commission Filers)		
4 Date 7 2 /1	5 Payee name	Mahor In of Comt		
6 Amount (\$)	7 Payee address; City; State; Zip Code 134 CALLONN St.	15t work 1x 76102		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
P. 7. 11	J. Brash			
Amount (\$)	Payee address; City; State; Zip Code 2 F16 W Lawrytw	Ave Fort Work 70107		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) the Judge I dat, from the	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date $\{\cdot, \cdot\}$	Payee name Arlington Republica	er Clus.		
Amount (\$)	Payee address; City; State; Zip Code P. O . B ~ 14051	Arlington 761 se		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

POLITICAL EXPENDITURES MADE FILED FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) FRANK PHILLIPS Troan Henry Memburgerent Troffice Out The Authorities Properties Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Contributions/Donations Made By Gift/Awards/Memorials Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services BY: Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 1315 Calhour St. Fort Worth (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** EVAL EXPLORE Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name TX Aupe Co. Cow to a digrey ayee address; City; State; Zip Code 10.20.11 Amount (\$) 1210 San Anton # 800 Auntin 78701 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date 11.16.15 Amount (\$) 100-Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EVENT EXPONSE EXPENDITURE Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FILED FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) ELECTION OF THE LIPS Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Transportation Equipment & Related Expense Consulting Expense Polling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Contributions/Donations Made By Travel Out Of District Candidate/Officeholder/Political Committee Credit Card Payment Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME " 6 Amount (\$) SA Congress # 1755 Austin (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. can to Sution Check if Austin, TX, officeholder living expense OF EXPENDITURE Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name U. S. Post master Amount (\$) 76147 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense OF EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Experie - clark **PURPOSE EXPENDITURE** Office sought Office held Complete ONLY if direct

expenditure to benefit C/OH