| JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT | | | | FORM JC/OH Cover Sheet pg 1 | |
|--|---|---|---|--|--|
| | | | 1 ACCOUNT # (Ethics Commission filers) | 2 PAGE # 1 of 6 | |
| 3 | CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST Mr. Carey NICKNAME LAST Walker | MI SUFFIX | Date Received FRAANT COUN Date Received FRAANT COUN ANT COUNNESS ADMINISTRA Det Det Det Det PRAANT RECEIVED | |
| 4 | CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX; APT / SUITE #; (| CITY; STATE; ZIP CODE | | |
| | Change of Address | | | JAN 1 5 2015 Receipt # Amount | |
| 5 | CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST Mr. Carey | MI | Date Processed Date Imaged | |
| | | Walker | | | |
| 6 | CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUI | ITE #; CITY; STATE; | ZIP CODE | |
| 7 | CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER | EXTENSION | | |
| 8 | REPORT TYPE | X January 15 30th day before elec | _ | 15th day after campaign treasurer appointment (officeholder only) | |
| | | July 15 8th day before electi | ion Exceeded \$500 limit | Final report (Attach C/OH - FR) | |
| 9 | PERIOD COVERED | Month Day Year THRO | | Year | |
| | | 10/26/2014 | 12/31/20 | 14 | |
| 10 | ELECTION | ELECTION DATE ELECTION TY Month Day Year Primar | | General Special | |
| 11 | OFFICE | OFFICE HELD (if any) Judge, County Criminal Court 2, Tarrant | 12 OFFICE SOUGHT (if known) |) | |
| | GO TO PAGE 2 | | | | |

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: FORM JC/OH SUPPORT & TOTALS COVER SHEET PG 2 13 C/OH NAME Walker, Carey (Mr.) 14 ACCOUNT # (Ethics Commission filers) This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may **15 NOTICE** have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this FROM information only if they receive notice of such expenditures. ... POLITICAL COMMITTEE NAME COMMITTEE TYPE COMMITTEE(S) EC GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME PH 12: LIPS INSTR additional pages ATOR COMMITTEE CAMPAIGN TREASURER ADDRESS **16 CONTRIBUTION** TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN 1. 0.00 \$ PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTALS 2. TOTAL POLITICAL CONTRIBUTIONS \$ 1,173.10 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED 3. \$ TOTALS 35.00 4. TOTAL POLITICAL EXPENDITURES S 661.30 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE 5. S 8,772.85 BALANCE LAST DAY OF THE REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 68,350.48 **17 AFFIDAVIT** I swear, or affirm, under penalty of perjury, that the accompanying report



is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

nauson

OWIN

Signature of officer administering oath

this the dav

to certify which, witness my hand and seal of office.

naissin Print name of officer administering oath

Title of office administering oath

Electronic Filing Version 3.4.6

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| The INSTRUCTION GUIDE explains how to complete this form. | | | 1 PAGE # Schedule: 1/2 Report: 3/6 | | |
|--|--|--|--|---|--|
| 2 FILER NAME Walker, Carey (Mr.) | | | 3 ACCOUNT # (Ethics Commission filers) | | |
| 4 Date 11/15/2014 | 5 Full name of contributor in out-of-state PAC (ID# Bonner, Ginnie 6 Contributor address; City; State; Zip Code 7501 Bancroft Circle Fort Worth, TX 76120 |) | 7 Amount of contribution (\$) \$223.10 | 8 In-kind contribution description (if applicable) Printing of note cards | |
| | | | (If travel outside of | Texas, complete Schedule T) | |
| 9 Contributor's p Owner | principal occupation | 10 Contributor's job Owner | title | | |
| 11 Contributor's e One Stop Pr | əmployer / law firm inting | 12 Law firm of cont | ributor's spouse (if a | ny) | |
| 13 If contributor is | s a child, law firm of parent(s) (if any) | <u></u> | | | |
| Date | Full name of contributor 🔲 out-of-state PAC (ID# Henderson, Richard | ŧ) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 10/31/2014 | Contributor address; City; State; Zip Code 100 Throckmorton Suite 540 Fort Worth, TX 76102 | • • • • • • • • • • • • • • • • • • • | \$250.00 | I I Texas, complete Schedule T) | |
| Contributor's p | Drincipal occupation | Contributor's job | 1 | | |
| Attorney | | Attorney | | | |
| Contributor's employer / law firm Richard Henderson, PC | | Law firm of cont | 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 D out-of-state PAC (ID# | t) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 12/29/2014 | Medlin, Gary L. Contributor address; City; State; Zip Code 1300 S. University Drive Ste. 602 Fort Worth, TX 76107 | •••••••••••••••••••••••••••••••••••••• | \$250.00 | Textes complexeSchedule T) | |
| Contributor's principal occupation Attorney | | Contributor's job Attorney | | ARRAI | |
| Contributor's employer / law firm Gary L. Medlin, Attorney at Law | | Law firm of cont | ributor's spouse (if a | | |
| If contributor is | s a child, law firm of parent(s) (if any) | | | IPS TRATOR Electronic Filing Version 3.4.6 | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| The INSTRUCTION GUIDE explains how to complete this form. | | | | 0 Decent 4/0 | |
|--|--|---|---|---|--|
| 2 FILER NAME Walker, Carey (Mr.) | | | Schedule: 2/2 Report: 4/6 3 ACCOUNT # (Ethics Commission filers) | | |
| | | | | | |
| 4 Date | 5 Full name of contributor i out-of-state PAC (ID#) Michel, Thomas | | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| 12/22/2014 | 6 Contributor address; City; State; Zip Code 153 Crest Canyon Drive Fort Worth, TX 76108 | ••••• | \$250.00 | | |
| | | | (If travel outside o | f Texas, complete Schedule T) | |
| 9 Contributor's p Attorney | principal occupation | 10 Contributor's job Attorney | title | | |
| 11 Contributor's e Griffith, Jay | employer / law firm & Michel, LLP | 12 Law firm of conti | ributor's spouse (if a | any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | | | |
| Date | Full name of contributor D out-of-state PAC (ID# Varghese, Benson | ·) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 10/31/2014 | Contributor address; City; State; Zip Code 420 Throckmorton Street | | \$100.00 | | |
| | Suite 200 | | | | |
| | Fort Worth, TX 76102 | | (if travel outside o | f Texas, complete Schedule T) | |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | | | |
| Contributor's e Varghese & | employer / law firm Smith, PLLC | 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 🔲 out-of-state PAC (ID# Walker, Jearl | !) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| 12/01/2014 | Contributor address; City; State; Zip Code 6917 Bal Lake Drive Fort Worth, TX 76116 | | \$100.00 | | |
| 0 | | | L | | |
| Contributor's principal occupation Retired | | Contributor's job Retired | title | FIL RANT AN 20 DNS AD | |
| Contributor's employer / law firm | | Law firm of contr | ributor's spouse (i a | PHILLIP: | |
| If contributor is | If contributor is a child, law firm of parent(s) (if any) | | | | |

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Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

| POLITICAL | EXPENDITURES |
|-----------|---------------------|
|-----------|---------------------|

SCHEDULE F

| Advertising Expe Accounting/Bank Consulting Exper | ng Legal Services Solicitatio | Vages/Contract Labor Loan Repayment/Reimbursement n/Fundraising Expense Transportation Equipment & Related Expense |
|---|---|---|
| Event Expense | Polling Expense Travel Ou | t Of District Candidate/Officeholder/Political Committee |
| Fees | | erhead/Rental Expense OTHER (enter a category not listed above) ns how to complete this form. |
| 1 PAGE # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
| Schedule: 1/2 Re | - Maller Corry (Mr.) | |
| 4 Date | 5 Payee name | |
| 11/25/2014 | Campaign Partners | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | |
| \$29.00 | 16 Dudley Street Fitchburg, MA 01420 | |
| • | | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedul Advertising Expense | e) (b) Description (If travel outside of Texas, complete Schedule T) Internet/Website expense |
| OF | | |
| EXPENDITURE | | Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if | Candidate / Officeholder name | Office sought: Office held: |
| direct expenditure to benefit C/OH | | |
| | Pavee name | |
| Date 12/22/2014 | Payee name Campaign Partners | |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$29.00 | 16 Dudley Street | |
| φ 2 9.00 | Fitchburg, MA 01420 | |
| | | |
| | Category (See Categories listed at the top of this schedul | |
| PURPOSE OF | Advertising Expense | Internet/Website expense |
| EXPENDITURE | | |
| | Candidate / Officeholder name | Check if Austin, TX, officeholder living expense Office sought: Office held: |
| Complete ONLY if direct expenditure | | |
| to benefit C/OH | | |
| Date | Payee name | |
| 10/31/2014 | Mail Chimp | |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$50.00 | 512 Means Street Suite 404 | |
| | Atlanta, GA 30318 | |
| | Category (See Categories listed at the top of this schedul | e) Description (If travel outside of Texas, complete Schedule T) |
| PURPOSE | Solicitation/Fundraising Expense | Online messaging distributor |
| | | |
| EXTENDITORE | | Check If Austin, TX, officeholder living expense |
| Complete ONLY if | Candidate / Officeholder name | Office sought: |
| direct expenditure to benefit C/OH | | 8Y: 201 |
| Date | Payee name | |
| 11/25/2014 | Mail Chimp | JAN JAN |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$50.00 | 512 Means Street | |
| φ30.00 | Suite 404 | |
| | Atlanta, GA 30318 | |
| | Category (See Categories listed at the top of this schedul | |
| PURPOSE OF | Solicitation/Fundraising Expense | Online Messaging Distributer 🙄 ≺ |
| EXPENDITURE | | |
| | One didate / Office helder = === | Check if Austin, TX, officeholder living expense Office sought: Office held: |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

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P.O.Box 12070

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

| POL | ITICAL | EXP | ENDI | TURES |
|-----|--------|-----|------|-------|
| | | | | |

SCHEDULE F

| Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees | ing Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D | Contract Labor Loan Re draising Expense Transpor t Contribut istrict Candi J/Rental Expense OTHER (| payment/Reimbursement tation Equipment & Related Expense ions/Donations Made By date/Officeholder/Political Committee enter a category not listed above) | |
|---|---|---|--|--|
| 1 PAGE # Schedule: 2/2 Re | 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (TEC filers) | |
| | | | | |
| 4 Date 11/12/2014 | 5 Payee name Manzano, Elena | | | |
| 6 Amount (\$) \$150.00 | 7 Payee address City; State; Zip Code 728 Lynda Drive River Oaks, TX 76114 | | | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description (If travel ou Delivery Service | utside of Texas, complete Schedule T) | |
| EXPENDITURE | | | | |
| | | Check if Austin, TX, office | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: | |
| Date 12/31/2014 | Payee name PayPal | | | |
| Amount (\$) | Payee address City; State; Zip Code | | | |
| \$18.30 | 2211 North First Street San Jose, CA 95131 | | | |
| | Category (See Categories listed at the top of this schedule) | Description (If travel or | utside of Texas, complete Schedule T) | |
| PURPOSE OF | Fees | Fees/Charges incurre | d in online payment processing | |
| EXPENDITURE | | | | |
| | | Check if Austin, TX, office | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: | |
| Date | Payee name | | | |
| 11/12/2014 | Woodfin, James | | | |
| Amount (\$) | Payee address City; State; Zip Code | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| \$300.00 | 5800 Wales Avenue Fort Worth, TX 76133 | | | |
| PURPOSE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description (If travel ou Putting out signs | itside of Texas, complete Schedule T) | |
| | | | | |
| | | Check If Austin, TX, office | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: | |
| | | | FILED TARRANT COUNTY 2015 JAN 20 PH 12: 54 ELECTIONS ADMINISTRATOR | |
| | | | Electronic Filing Version 3.4.6 | |

