JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

			T
The JC/OH Instruction Ga	INDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 PAGE # 1 of 32
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Carey NICKNAME LAST Walker	MI	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	Date Hand delivered or Date Postmarked Receipt #
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr. Carey NICKNAME LAST Walker	MI SUFFIX	Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / S	SUITE #; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
8 REPORT TYPE	January 15 30th day before el		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year THI 02/23/2014	Month Day ROUGH 05/17/20	Year
10 ELECTION	ELECTION DATE ELECTION Month Day Year Print 05/27/2014	F	General Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known Judge, County Crim) inal Court N o. 2, Tarrant County, TX
GO TO PAGE 2			

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

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME	15 ACC	OUNT # (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.				
COMMITTEE(C)	COMMITTEE TYPE COMMITTEE NAME DFW Conservative Voters PAC				
	GENERAL COMMITTEE ADDRESS P. D. BOX 173065 SPECIFIC HYLINGTON, TX 76005				
additional pages	Lane, Stvart				
	COMMITTEE CAMPAIGN TREASURER ADDRESS Arlington, TX 76003				
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,680.70			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00			
	4. TOTAL POLITICAL EXPENDITURES	\$52,995.72			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	s 4,448.57			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,350 48			
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 18 Election Code.

of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Print name of officer administering oath

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

		_	
			1 PAGE#
I ne i NSTRUCTIO	The Instruction Guide explains how to complete this form.		Schedule: 1/22 Report: 3/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Full name of contributor	<u> </u>)	7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)
04/09/2014	6 Contributor address; City; State; Zip Code 619 W Main Street Arlington, TX 76010		\$100.00
			(If travel outside of Texas, complete Schedule T)
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	title
	employer / law firm f Lateph Adeniji	12 Law firm of contr	ributor's spouse (if any)
13 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	<u> </u>	Amount of In-kind contribution contribution (\$) description (if applicable)
05/01/2014	Contributor address; City; State; Zip Code 701 West Belknap Street Fort Worth, TX 76102		\$250.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p Attorneys	principal occupation	Contributor's job Attorneys	title
Contributor's e Baker & Dan	employer / law firm neron LLC	Law firm of contr	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	!)	Amount of In-kind contribution contribution (\$) description (if applicable)
05/15/2014	Contributor address; City; State; Zip Code 4025 Woodland Park Blvd Suite 100		\$250.00
	Arlington, TX 76013		(If travel outside of Texas, complete Schedule T)
Contributor's p Attorney	principal occupation	Contributor's job Attorney	title
Contributor's e Ball & Hase,	employer / law firm PC	Law firm of contr	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

			-	·
The learning	Ours avalable how to complete this form		1 PAGE#	
The Instruction Guide explains how to complete this form.		Schedule: 2/22	2 Report: 4/32	
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT# (E	Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Barrow, Wade)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/01/2014	6 Contributor address; City; State; Zip Code 1824 8th Avenue Fort Worth, TX 76110		\$50.00 	
			(If travel outside of T	exas, complete Schedule T)
9 Contributor's p Attorney	orincipal occupation	10 Contributor's job Attorney	title	
11 Contributor's e Law Offices	employer / law firm of Steven C,. Laird, PC	12 Law firm of contr	ributor's spouse (if any	y)
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/06/2014	Contributor address; City; State; Zip Code 2303 Lavon Creek Lane Arlington, TX 76006		\$250.00 	
	, <u></u>		(If travel outside of T	Texas, complete Schedule T)
Contributor's p Attorney	principal occupation	Contributor's job Attorney	title	
Contributor's e Blumberg &	employer / law firm Bagley, LLP	Law firm of contr	ributor's spouse (if any	y)
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/07/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 1400 Fort Worth, TX 76102		\$250.00 	
	Foll Worth, 17 70102		(If travel outside of T	Texas, complete Schedule T)
Contributor's p Attorney	principal occupation	Contributor's job Attorney	title	
Contributor's e Bourland & F	employer / law firm Kirkland	Law firm of conti	ributor's spouse (if any	у)
If contributor is	s a child, law firm of parent(s) (if any)		-	

The Instruction	ON Guide explains how to complete this form.	_	1 PAGE#
2 FILER NAME	Wolker Carey (Mr.)		Schedule: 3/22 Report: 5/32
Z FILEN NAIVIL	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Full name of contributor Out-of-state PAC (ID4	#)	7 Amount of 8 In-kind contribution
	Bridges, David (Mr.)		contribution (\$) description (if applicable)
05/06/2014			\$200.00
	6 Contributor address; City; State; Zip Code 600 Commerce Street		Ψ200.00
	Suite 200		1
	Dallas, TX 75202		(If travel outside of Texas, complete Schedule T)
9 Contributor's p Justice	principal occupation	10 Contributor's jo	ob title
Justic e		Justice	
11 Contributor's e	• •	12 Law firm of cor	ntributor's spouse (if any)
State of Texa	as		
13 If contributor is	s a child, law firm of parent(s) (if any)		
10 II continuator a	s a chilid, law intili di parenigoj (ii ariy)		
Date	Full name of contributor ut-of-state PAC (ID#	ŧ)	Amount of In-kind contribution contribution (\$) description (if applicable)
	Burt, Sue		contribution (\$) uescription (ii applicable)
04/16/2014			\$100.00
•	Contributor address; City; State; Zip Code 828 Hackamore Street		, ,
	Fort Worth, TX 76108		1
			(If travel outside of Texas, complete Schedule T)
Contributor's p	orincipal occupation	Contributor's jo Clerk	ob title
Clerk		Clerk	
Contributor's e	employer / law firm	Law firm of cor	ntributor's spouse (if any)
Walmart			
If contributor is	s a child, law firm of parent(s) (if any)		
II ooniingata	sa come, and more or personally in early,		
Date	Full name of contributor ut-of-state PAC (ID#	ŧ)	Amount of In-kind contribution contribution (\$) description (if applicable)
	Campbell, Bill		Continuation (a)
04/24/2014			\$100.00
0-1/2 1/20 1	Contributor address; City; State; Zip Code 2403 Oak Shadow Court		1
	Arlington, TX 76107		'
			(If travel outside of Texas, complete Schedule T)
	principal occupation	Contributor's jo	b title
Attorney		Attorney	
Contributor's €	employer / law firm	I aw firm of cor	ntributor's spouse (if any)
Self Employe	, ,	Law min or so.	minuted a aposase (ii arry)
		<u> </u>	
If contributor is	s a child, law firm of parent(s) (if any)		

	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	22. Papart 6/22
2	FILER NAME	Walker, Carey (Mr.)				22 Report: 6/32 (Ethics Commission filers)
	TIGE!!!	Walker, Carey (Mr.)			3 ACCOUNT# (Ethics Commission illers)
4	Date	5 Full name of contributor	#)	7 Amount of	8 In-kind contribution
		Canas, Eduardo			contribution (\$)	description (if applicable)
	- : //	1				
(04/22/2014	6 Contributor address; City; State; Zip Code			\$200.00	ı
		600 N. Main Street				i
		Fort Worth, TX 76106				
					<u> </u>	Texas, complete Schedule T)
9	•	principal occupation	1	ontributor's job	title	
	Attorney		At	torney		
11	Contributor's e	employer / law firm	12 La	w firm of contr	ributor's spouse (if ar	nv)
		of Eduardo Canas			,	7)
13	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	#)	Amount of	In-kind contribution
	Duito	Cantrell, William		/	contribution (\$)	description (if applicable)
						i
(04/15/2014	Contributor address; City; State; Zip Code			\$250.00	1
		124 N. Main				l
		Weatherford, TX 76086				_
					(If travel outside of	Texas, complete Schedule T)
	•	principal occupation	1	ontributor's job	title	
	Attorney	·	At	torney		
	Contributor's 6	employer / law firm	La	w firm of contr	ributor's spouse (if ar	nv)
		antrell, Attorney at Law			ibuto: 5 species (c	37
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	#)	Amount of	In-kind contribution
	Date	Chaisson, Mary L.	*		contribution (\$)	description (if applicable)
		J. J				1
1	04/28/2014	Contributor address; City; State; Zip Code			\$250.00	ı
		728 Lynda Road				1
		River Oaks, TX 76114				·
					(If travel outside of	Texas, complete Schedule T)
		orincipal occupation		ontributor's job	title	
	Hospice		Ua	aseworker		
	Contributor's e	employer / law firm	La	w firm of contr	ributor's spouse (if ar	nv)
	Vitas	inpoyo			,	-1/
					·	
	If contributor is	s a child, law firm of parent(s) (if any)				
						·

P.O. Box 12070

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	22 Report: 7/32
2 FILER NAME	Walker, Carey (Mr.)			
·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		S ACCOUNT #	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID4	#)	7 Amount of	8 In-kind contribution
	Cofer, Cody		contribution (\$)	description (if applicable)
05/45/0044				i
05/15/2014	6 Contributor address; City; State; Zip Code		\$500.00	İ
	111 N Houston Street Fort Worth, TX 76102			·
	1010 110101, 17, 70102			
		C		Texas, complete Schedule T)
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	title	
Attorney		Alloniey		
11 Contributor's e	employer / law firm	12 Law firm of contr	ributor's spouse (if a	ny)
Cody Cofer 8	& Associates	Tarrant County		
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor ut-of-state PAC (ID#	f)	Amount of	In-kind contribution
	Conine, Casey (Mr.)		contribution (\$)	description (if applicable)
04/24/2014	Contributor address; City; State; Zip Code		\$100.00	
	1312 Amber Court			1 .
	Keller, TX 76248			_
			(If travel outside of	Texas, complete Schedule T)
	principal occupation	Contributor's job		
Judge		Associate Jude	ge	
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if ar	nv)
State of Texa	· ·		,	"
If contributor is	s a child, law firm of parent(s) (if any)			·
Date	Full name of contributor	ŧ)	Amount of	In-kind contribution
2	Cravens, Tom		contribution (\$)	description (if applicable)
04/23/2014	Contributor address; City; State; Zip Code		\$250.00	1
	501 S Fielder Road			•
	Arlington, TX 76010			<u> </u>
	<u> </u>		(If travel outside of	Texas, complete Schedule T)
	principal occupation	Contributor's job	title	
Retired		Retired		
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if ar	nv)
	,		,	.,,
If contributor is	s a child, law firm of parent(s) (if any)			

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
				2 Report: 8/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT# (I	Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#	<u> </u>	7 Amount of	8 In-kind contribution
	Curran, Patrick		contribution (\$)	description (if applicable)
00/00/0014			250.00	
02/23/2014	6 Contributor address; City; State; Zip Code		\$50.00	
	2101 Moneda Street Fort Worth, TX 76117		j	
	Foll Words, 12 70117			
			<u> </u>	Texas, complete Schedule T)
	principal occupation	10 Contributor's job	title	
Attorney	·	Attorney		
11 Contributor's e	employer / law firm	12 Law firm of contr	ributor's spouse (if ar	ıv)
Self Employe			,	"
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor)	Amount of	In-kind contribution
	Davis, Cameron	,	contribution (\$)	description (if applicable)
			ĺ	
04/09/2014	Contributor address; City; State; Zip Code		\$150.00	, I
	3725 Washburn Avenue			
	Fort Worth, TX 76107			
			(If travel outside of	Texas, complete Schedule T)
	principal occupation	Contributor's job	title	
Attorney		Staff Attorney		
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if an	ועו
2nd Court of	, -		y District Attorneys	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor ut-of-state PAC (ID#	f)	Amount of	In-kind contribution
Date	Davis, Fred W.		contribution (\$)	description (if applicable)
	Barro, 1 to 11.			
04/14/2014	Contributor address; City; State; Zip Code		\$100.00	
	P.O. Box 13663			
	Arlington, TX 76094			
			(If travel outside of	Texas, complete Schedule T)
•	orincipal occupation	Contributor's job		
Retired Judg	,e	Retired Judge		
Contributor's e	employer / law firm	l aw firm of contr	ributor's spouse (if an	nv)
Retired Judg		Luii IIII VI VIIII	ibutor o operate (137
If contributor is	s a child, law firm of parent(s) (if any)			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
			Schedule: 7/22	
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Et	thics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dickson, Craig P.	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/07/2014	6 Contributor address; City; State; Zip Code 2408 Montgomery Street Fort Worth, TX 76107		\$250.00	exas, complete Schedule T)
9 Contributor's p		40. Occivilente de la la	L	xas, complete schedule 1)
Attorney	principal occupation	10 Contributor's job Attorney	title	
	employer / law firm of Craig P. Dickson	12 Law firm of contr	ributor's spouse (if any))
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
05/06/2014	Contributor address; City; State; Zip Code 401 Belknap Street Fort Worth, TX 76196		\$500.00 	
	Tott Hotel, 17,70165		(if travel outside of Te	exas, complete Schedule T)
Contributor's p Court Coordi	orincipal occupation inator	Contributor's job Court Coordina		
Contributor's e Tarrant Cour	employer / law firm nty, Texas	Law firm of contr	ributor's spouse (if any))
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/01/2014	Contributor address; City; State; Zip Code 555 S. Summit Fort Worth, TX 76104		\$1,000.00	
	Totalis, increase		(If travel outside of Te	exas, complete Schedule T)
Contributor's p Attorney	principal occupation	Contributor's job Attorney	<u> </u>	
Contributor's e Haslam & Ga	employer / law firm allagher	Law firm of contri	ributor's spouse (if any))
If contributor is	s a child, law firm of parent(s) (if any)			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/22 Report: 10/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Full name of contributor uut-of-state PAC (III Goodson, Dorene)#)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
05/01/2014	6 Contributor address; City; State; Zip Code 2627 Buffalo Court Arlington, TX 76013		\$100.00
9 Contributor's p Retired	L principal occupation	10 Contributor's job Retired	L'
11 Contributor's	employer / law firm	12 Law firm of cont	ributor's spouse (if any)
13 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor)#)	Amount of In-kind contribution contribution (\$) description (if applicable)
05/01/2014	Contributor address; City; State; Zip Code 2627 Buffalo Court Arlington, TX 76013		\$100.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p Retired	principal occupation	Contributor's job Retired	title
Contributor's e	employer / law firm	Law firm of cont	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor)#)	Amount of In-kind contribution contribution (\$) description (if applicable)
04/07/2014	Contributor address; City; State; Zip Code 1214 Oakcrest Drive Arlington, TX 76012	• • • • • • • • • • • • • • • • • • • •	\$100.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p Retired	principal occupation	Contributor's job Retired	title
Contributor's 6 N/A	employer / law firm	Law firm of conti	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

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The Instruction	Guide explains how to complete this form.		1 PAGE # Schedule: 9/2	2 Report: 11/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT# (E	Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Haddad, Mojy)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/25/2014	6 Contributor address; City; State; Zip Code 3024 Shadow Drive Arlington, TX 76006		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Contributor's p Real Estate	principal occupation	10 Contributor's job Real Estate	title	
11 Contributor's e Self Employe	employer / law firm ed	12 Law firm of contr	ibutor's spouse (if an	ıy)
13 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/23/2014	Contributor address; City; State; Zip Code		\$250.00	
	5001 Highway 287 Suite 100			I
	Arlington, TX 76017		(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's job	title	
Businessma	n	President		,
	employer / law firm lembers Service Service Group	Law firm of contr	ributor's spouse (if ar	ny)
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/14/2014	Contributor address; City; State; Zip Code 100 Throckmorton		\$100.00	1
	Suite 540 Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's job Attorney	title	
Contributor's e Richard Hen	employer / law firm derson, PC	Law firm of contr	ributor's spouse (if ar	ny)
If contributor is	s a child, law firm of parent(s) (if any)			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/22 Report: 12/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Full name of contributor)	7 Amount of sontribution (\$) In-kind contribution description (if applicable)
02/24/2014	6 Contributor address; City; State; Zip Code 800 West Weatherford Street Fort Worth, TX 76102		\$250.00
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	
11 Contributor's e The Law Offi	employer / law firm ice of Daniel C. Hernandez	12 Law firm of contr	ributor's spouse (if any)
13 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor)	Amount of In-kind contribution contribution (\$) description (if applicable)
03/26/2014	03/26/2014 Contributor address; City; State; Zip Code 800 West Weatherford Street Fort Worth, TX 76102		\$250.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's job Attorney	title
	employer / law firm fice of Daniel C. Hernandez	Law firm of contr	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	ŧ)	Amount of In-kind contribution contribution (\$) description (if applicable)
03/05/2014	Contributor address; City; State; Zip Code P.O. Box 626 Frankston, TX 75763		\$75.00
Contributor's p Attorney	principal occupation	Contributor's job Assistant Coun	
	employer / law firm County Attorney's Office	Law firm of contr	ributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#		
	THE INSTRUCTION	W Golde explains now to complete this form.			Schedule: 11/22 Report: 13/32		
2	FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT# (Ethics Commission filers)	
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of	8 In-kind contribution	
		Hicks, Sam			contribution (\$)	description (if applicable)	
	04/25/2014				\$75.00	l	
	04/25/2014	6 Contributor address; City; State; Zip Code P.O. Box 626			φ/5.00		
		Frankston, TX 75763				1	
					(If travel outside of	Texas, complete Schedule T)	
9	Contributor's p	rincipal occupation	10	Contributor's job	title		
	Attorney			Assistant Cour			
_							
11		employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)	
	neriderson C	County Attorney's Office					
13	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
		Kerilledy, Jeli			, ,]	
	05/01/2014	Contributor address; City; State; Zip Code			\$500.00	l I	
		9125 Belshire Drive				! 1	
		Ste. 200 N Richland Hills, TX 76182				ı	
		7771071107111107 777702			(If travel outside of	Texas, complete Schedule T)	
		rincipal occupation		Contributor's job	title		
	Attorney			Attorney			
	Contributor's e	employer / law firm	Law firm of contributor's spouse (if any)				
	Law Office o	f Jeff C. Kennedy					
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
		Laird, Steven (Mr.)			contribution (\$)	description (if applicable) Food and event expense	
					\$504.70	1 ood and event expense	
	05/16/2014	Contributor address; City; State; Zip Code			\$564.70	l	
		1824 8th Avenue Fort Worth, TX 76110				l	
		,			(If travel outside of	Texas, complete Schedule T)	
	Contributor's r	orincipal occupation		Contributor's job		Toward, complete contract ()	
	Attorney	milicipal occupation		Attorney	uue		
		employer / law firm		Law firm of contr	ributor's spouse (if a	ny)	
	Law Offices	of Steven C. Laird, PC					
	If contributor is	a child, law firm of parent(s) (if any)					

The Instruction	The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 12/22 Report: 14/32		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Co			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Luce, Jerry)		kind contribution ription (if applicable)		
04/09/2014	6 Contributor address; City; State; Zip Code P.O. Box 13249 Arlington, TX 76094		\$1,000.00	nplete Schedule T)		
9 Contributor's p Retired	principal occupation	10 Contributor's job Retired	title			
11 Contributor's e N/A	employer / law firm	12 Law firm of contr	ibutor's spouse (if any)			
13 If contributor is a child, law firm of parent(s) (if any)						
Date	Full name of contributor	<u> </u>		kind contribution ription (if applicable)		
04/12/2014	Contributor address; City; State; Zip Code 777 Main Street Suite. 1300		\$50.00 			
	Fort Worth, TX 76123		(If travel outside of Texas, con	nplete Schedule T)		
Contributor's p Attorney	orincipal occupation	Contributor's job Attorney	title			
Contributor's e McDonald Sa	employer / law firm anders, PC	Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor)		kind contribution ription (if applicable)		
05/01/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 1445 Fort Worth, TX 76102		\$200.00	nplete Schedule T)		
Contributor's p Real Estate	principal occupation	Contributor's job title Senior Vice President, Business Development				
Contributor's e Republic Title	employer / law firm B	Law firm of contr	ibutor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#		
				Schedule: 13/22 Report: 15/32		
2 FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT# (I	Ethics Commission filers)	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
04/03/2014	6 Contributor address; City; State; Zip Code 1205 North Main Street Fort Worth, TX 76164			\$1,000.00		
					Texas, complete Schedule T)	
9 Contributor's p Attorney	principal occupation		ntributor's job orney	title		
	employer / law firm of Avery McDaniel, PC	12 Law	v firm of contri	ibutor's spouse (if ar	ıy)	
13 If contributor is	13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/21/2014	Contributor address; City; State; Zip Code 3044 Elm River Drive Fort Worth, TX 76116			\$100.00	 	
	Tolk Front			(If travel outside of	Texas, complete Schedule T)	
Contributor's p Retired	principal occupation		ntributor's job tired	title		
Contributor's e	employer / law firm	Law	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/01/2014	Contributor address; City; State; Zip Code 4106 Shady Valley Drive			\$200.00	 	
	Arlington, TX 76013	-		(If travel outside of	Texas, complete Schedule T)	
Contributor's p Doctor	principal occupation		ntributor's job ctor	title		
Contributor's e Mullanax De	employer / law firm ermatology	Law	i firm of contri	ibutor's spouse (if an	ıy)	
If contributor is	s a child, law firm of parent(s) (if any)				,	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	/00 Demant 40/00	
2 FILER NAME	Walker, Carey (Mr.)		Schedule: 14/22 Report: 16/32 3 ACCOUNT # (Ethics Commission filers)		
	Trainer, sarely (in)		3 ACCOUNT# (Etnics Commission Hiers)	
4 Date	E Sull some of contributes III out of state DAC (ID				
4 Date	5 Full name of contributor out-of-state PAC (ID: Nevarez, Raul	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	Nevalez, naui		(.,	- Andrews (alphanasa)	
04/17/2014	Continue of the continue of th		\$100.00	1	
	6 Contributor address; City; State; Zip Code 4004 FM 5			1	
	Aledo, TX 76008			i	
			/If travel outside of	Texas, complete Schedule T)	
9 Contributor's r	principal occupation	10 Contributor's job		Texas, complete schedule 1/	
Attorney	Thicipal occupation	Attorney) title		
	,				
11 Contributor's		12 Law firm of conti	ributor's spouse (if ar	ny)	
Raul Nevare	z, P.C.				
do Waratabadaa					
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	# \	Amount of	In-kind contribution	
Date	Noteboom, Charles	T	contribution (\$)	description (if applicable)	
	Holosom, Shanos			1	
03/11/2014	Contributor address; City; State; Zip Code		\$666.00		
	669 Airport Freeway				
	Ste. 100			l	
	Hurst, TX 76053		(If travel outside of	Texas, complete Schedule T)	
Contributor's p	principal occupation	Contributor's job title			
Attorney		Attorney			
Contributor's e	employer / law firm	Law firm of contributor's spouse (if any)			
The Noteboo	om Law Firm				
If contributor is	s a child, law firm of parent(s) (if any)				
	, 4 4				
Date	Full name of contributor ut-of-state PAC (ID#	#)	Amount of	In-kind contribution	
	Orth, D. Gerry		contribution (\$)	description (if applicable)	
	.		4500.00		
05/01/2014	Contributor address; City; State; Zip Code		\$500.00	1	
	2501 Parkview Drive			1.	
	Suite 123 Fort Worth, TX 76102				
			(If travel outside of	Texas, complete Schedule T)	
	principal occupation	Contributor's job	title		
Attorney		Attorney			
Contributor's	employer / law firm	Law firm of cont	ributor's spouse (if ar	n1	
Orth, Walker		Law IIIII oi cond	moutoi s spouse (ii ai	19)	
o.u.,	u 5/11/1/22				
If contributor is	s a child, law firm of parent(s) (if any)			, , , , , , , , , , , , , , , , , , , ,	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	22 Report: 17/32	
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)	
Z FILLITONIA	Walker, Carey (Will)		2.0000	Itilios Commission more,	
4 Date 03/25/2014	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
			(If travel outside of T	Texas, complete Schedule T)	7
9 Contributor's p Attorney	I principal occupation	10 Contributor's job Attorney			
11 Contributor's e Parker Law F		12 Law firm of contr	ributor's spouse (if any	у)	
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/01/2014	Contributor address; City; State; Zip Code 3703 Dustin Trail		\$100.00		
	Dalworthington Gardens, TX 76016		(If travel outside of 1	Texas, complete Schedule T)]
Contributor's p Engineer	principal occupation	Contributor's job Engineer	title		
Contributor's e Electrotech	employer / law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
03/31/2014	Contributor address; City; State; Zip Code 211 S Rusk Street Weatherford, TX 76086		\$50.00	 	
			(if travel outside of 7	Texas, complete Schedule T)]
Contributor's p Attorney	principal occupation	Contributor's job Attorney) title		
Contributor's e Self Employe	employer / law firm ed	Law firm of contr	ributor's spouse (if an	y)	
If contributor is	s a child, law firm of parent(s) (if any)				

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE #	/22 Report: 18/32		
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID# Podell, Mark M.	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
04/25/2014	6 Contributor address; City; State; Zip Code 850 Knob Hill Road Boyd, TX 76023		\$100.00	 -		
				Texas, complete Schedule T)		
9 Contributor's p Aircraft Asse	principal occupation embler	10 Contributor's job Aircraft Assem				
11 Contributor's e Bell Helicopt		12 Law firm of contr	ributor's spouse (if ar	ıy)		
13 If contributor is a child, law firm of parent(s) (if any)						
Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/24/2014	Contributor address; City; State; Zip Code 3750 Kelly Road Aledo, TX 76008		\$50.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Contributor's p Veterinarian	principal occupation	Contributor's job title Veterinarian				
Contributor's e Self Employe	employer / law firm ed	Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/18/2014	Contributor address; City; State; Zip Code 2206 Wood Cliff Court		\$250.00	 		
	Arlington, TX 76012		(If travel outside of	Texas, complete Schedule T)		
Contributor's p Sheriff's Dep	principal occupation outy	Contributor's job Sheriff's Deput				
Contributor's e Tarrant Cour	employer / law firm nty, Texas	Law firm of contr	ributor's spouse (if ar	ıy)		
If contributor is	s a child, law firm of parent(s) (if any)					

The Instruction	ON GUIDE explains how to complete this form.	1 PAGE#			
			Schedule: 17/22 Report: 19/32		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)		
4 Date	5 Full name of contributor	#)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)		
04/18/2014	6 Contributor address; City; State; Zip Code 4400 Murwick Drive Arlington, TX 76016		\$100.00		
9 Contributor's p Attorney	orincipal occupation	10 Contributor's job Attorney	title		
11 Contributor's e Self Employe	• •	12 Law firm of contr	ributor's spouse (if any)		
13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable)		
04/20/2014	Contributor address; City; State; Zip Code 3911 Gaspar Drive Dallas, TX 75220		\$250.00		
	·		(If travel outside of Texas, complete Schedule T)		
Contributor's p Domestic Er	orincipal occupation gineer	Contributor's job title Domestic Engineer			
Contributor's e Self Employe	employer / law firm ed	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable)		
04/30/2014	Contributor address; City; State; Zip Code 514 Franklin Drive Arlington, TX 76011		\$100.00 		
	·		(If travel outside of Texas, complete Schedule T)		
Contributor's principal occupation Teacher		Contributor's job title Teacher			
	employer / law firm lependent School District	Law firm of conti	ributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/22 Report: 20/32		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID#) Steward, Jeff		7 Amount of sontribution (\$) In-kind contribution description (if applicable)		
04/21/2014	6 Contributor address; City; State; Zip Code 150 Boland Street #202 Fort Worth, TX 76107		\$100.00		
9 Contributor's p Attorney	orincipal occupation	10 Contributor's job Attorney	title		
11 Contributor's employer / law firm Jeffrey S. Stewart, P.C. 12 Law firm of o		12 Law firm of contr	ributor's spouse (if any)		
13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor)	Amount of In-kind contribution contribution (\$) description (if applicable)		
05/07/2014	Contributor address; City; State; Zip Code 9330 LBJ Freeway Dallas, TX 75243		\$50.00 		
	Julius, IXIOZIO		(If travel outside of Texas, complete Schedule T)		
Contributor's p	orincipal occupation	Contributor's job title Attorney			
Contributor's e The Stradley	employer / law firm / Law Firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<u> </u>	Amount of In-kind contribution contribution (\$) description (if applicable) Event and Food expense		
05/16/2014	Contributor address; City; State; Zip Code 3900 Grapevine Mills Parkway #316 Grapevine, TX 76051		\$1,500.00		
	I principal occupation	Contributor's job Surgeon			
Surgeon		Surgeon			
Contributor's e Retired	employer / law firm	Law firm of contr	ributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				

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The instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/22 Report: 21/32		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)		
			The service of the se		
4 Date	5 Full name of contributor)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)		
03/18/2014	6 Contributor address; City; State; Zip Code 901 Lake Street Fort Worth, TX 76102		\$500.00 		
			(If travel outside of Texas, complete Schedule T)		
9 Contributor's p Attorneys	principal occupation	10 Contributor's job Attorneys	title		
11 Contributor's employer / law firm The Fillmore Law Firm, LLP		ributor's spouse (if any)			
13 If contributor is	13 If contributor is a child, law firm of parent(s) (if any)				
Date	Full name of contributor	!	Amount of In-kind contribution contribution (\$) description (if applicable)		
04/16/2014	Contributor address; City; State; Zip Code 5005 Cockrell Avenue Fort Worth, TX 76133		\$100.00 		
	Tort World, 17 70100		(If travel outside of Texas, complete Schedule T)		
Contributor's p	principal occupation	Contributor's job Retired	title		
Contributor's e	employer / law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	·)	Amount of In-kind contribution contribution (\$) description (if applicable)		
02/24/2014	Contributor address; City; State; Zip Code 6917 Bal Lake Drive Fort Worth, TX 76116		\$100.00 I		
			(If travel outside of Texas, complete Schedule T)		
Contributor's p Retired	principal occupation	Contributor's job Retired	title		
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	
			Schedule: 20/22 Report: 22/32		/22 Report: 22/32
2 FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT# ((Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Walker, J.D.	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/01/2014	6 Contributor address; City; State; Zip Code 6917 Bal Lake Drive Fort Worth, TX 76116			\$100.00	! !
				(If travel outside of	Texas, complete Schedule T)
9 Contributor's p Retired	orincipal occupation	10	Contributor's job Retired	title	
11 Contributor's e	employer / law firm	12	Law firm of contr	ributor's spouse (if ar	ny)
13 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2014	Contributor address; City; State; Zip Code 1201 E Belknap Street Fort Worth, TX 76102			\$250.00	
				(If travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation		Contributor's job Attorney	title	
	employer / law firm of Wayne Ward		Law firm of contributor's spouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/14/2014	Contributor address; City; State; Zip Code 912 W. Belknap Fort Worth, TX 76102			\$500.00	!
	Toltword, 12 70102			(if travel outside of	Texas, complete Schedule T)
Contributor's p Attorney	I principal occupation		Contributor's job title Attorney		
	employer / law firm od, Attorney at Law		Law firm of contr	ributor's spouse (if ar	וער)
If contributor is	s a child, law firm of parent(s) (if any)				

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	D. D
				2 Report: 23/32
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Et	hics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#	<u> </u>)		8 In-kind contribution
	Wooten, Coby		contribution (\$)	description (if applicable)
			i	
03/27/2014	6 Contributor address; City; State; Zip Code		\$500.00	
	4909 Riverbend Drive		i	
	Fort Worth, TX 76109		'	
			(If travel outside of Te	xas, complete Schedule T)
9 Contributor's p	principal occupation	10 Contributor's job	title	
Attorney		Attorney		
11 Contributor's	-	12 Law firm of conti	ributor's spouse (if any))
Self Employe	ed			
12 If contributor is	s a child, law firm of parent(s) (if any)			
13 If Contributor is	s a child, law littl of parefuls) (if any)			
Date	Full name of contributor ut-of-state PAC (ID#	,	Amount of	In-kind contribution
	Wright, Susan		contribution (\$)	description (if applicable)
			i :	
05/06/2014	Contributor address; City; State; Zip Code		\$100.00	
	5505 Overridge Drive		1	
	Arlington, TX 76017		'	
			(If travel outside of Te	exas, complete Schedule T)
Contributor's p	orincipal occupation	Contributor's job	title	
			de la la la casa de la casa	
	employer / law firm ution Administration	Law firm of contributor's spouse (if any)		
reueral Avia	MON Administration			
If contributor is	s a child, law firm of parent(s) (if any)			
,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 2 0 may (any man or parameter) (a any)			
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	Wylie, David		contribution (\$)	description (if applicable)
05/03/2014	Contributor address; City; State; Zip Code		\$100.00	
	4717 Crest Drive		i i	
	Arlington, TX 76017		İ	
			(If travel outside of Te	exas, complete Schedule T)
Contributor's	principal occupation	Contributor's job	title	
Programmer	•	Programmer		
			the dealers and the second	
	employer / law firm	Law firm of cont	ributor's spouse (if any)
Self Employe	ou .			
If contributor is	s a child, law firm of parent(s) (if any)			

			- (00010)			
	The Instruction Guide explains how to complete this form.			1 PAGE#		
	The INSTRUCTION Goide explains now to complete this form.			Schedule: 22/2	22 Report: 24/32	
2	FILER NAME Walker, Carey (Mr.)			3 ACCOUNT # (E	Ethics Commission filers)	
4	Date 5 Full name of contributor ☐ out-of-state PAC (ID	#)	7 Amount of	8 In-kind contribution	
	Wynn, WM Reagan			contribution (\$)	description (if applical	bie)
	04/09/0044			\$150.00 l		i
	04/08/2014 6 Contributor address; City; State; Zip Code			\$150.00		
	3100 West 7th Street Ste. 420			ļ		
	Fort Worth, TX 76107			(If travel outside of 1	Texas, complete Schedule T	ا ٦٠
9	Contributor's principal occupation	10	Contributor's job			
Ĭ	Attorney	"	Attorney			
		_				
11	Contributor's employer / law firm	12	Law firm of contr	ibutor's spouse (if an	y)	
	Kearney Wynn					
13	If contributor is a child, law firm of parent(s) (if any)					$\neg \neg$
						ļ
						ĺ
						İ
				•		

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 **LOANS (JUDICIAL)** SCHEDULE E (J) 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 1/2 Report: 25/32 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Walker, Carey (Mr.) 4 **TOTAL OF UNITEMIZED LOANS: \$\$\$\$\$\$**\$ out-of-state PAC(ID# Name of lender Loan Amount (\$) 5 Date of loan Walker, Carey \$11,600.00 02/26/2014 Is lender a 8 Lender address; City; State: Zip Code 10 Interest rate financial Institution? 2501 Parkview Drive Suite 123 Fort Worth, TX 76102 11 Maturity date No 12 Lender's Principal Occupation Attorney 13 Lender's Job Title Attorney 14 Lender's Employer/Law Firm Law Office of Carey F. Walker 15 Law Firm of lender's spouse (if any) 16 If lender is child, law firm of parent(s) (if any) 17 Description of Collateral 18 Check if personal funds were deposited into political account ☑ none X **19 GUARANTOR** 20 Name of guarantor 22 Amount Guaranteed (\$) INFORMATION 21 Guarantor address; City; State: Zip Code IX not applicable 23 Guarantor's Principal Occupation 24 Guarantor's Job Title 26 Law Firm of guarantor's spouse (if any) 25 Guarantor's Employer/Law Firm 27 If guarantor is child, law firm of parent(s) (if any)

Texas Ethics Commission P.O. Box 12070 (512)463-5800 TDD 1-800-735-2989 Austin, Texas 78711-2070 LOANS (JUDICIAL) SCHEDULE E (J) 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 2/2 Report: 26/32 3 ACCOLINT # (Ethics Commission filers) 2 FILER NAME Walker, Carey (Mr.) 4 **TOTAL OF UNITEMIZED LOANS: 44444** Date of loan Name of lender out-of-state PAC(ID# 9 Loan Amount (\$) Walker, Carey 05/16/2014 \$16,750.48 6 Is lender a Lender address; City; State; Zip Code 10 Interest rate financial Institution? 0 2501 Parkview Drive Suite 123 11 Maturity date No Fort Worth, TX 76102 13 Lender's Job Title Attorney 12 Lender's Principal Occupation Attorney 14 Lender's Employer/Law Firm Law Office of Carey F. Walker 15 Law Firm of lender's spouse (if any) 16 If lender is child, law firm of parent(s) (if any) 17 Description of Collateral 18 Check if personal funds were deposited into political account X none 19 GUARANTOR 20 Name of guarantor 22 Amount Guaranteed (\$) INFORMATION 21 Guarantor address; City; State; Zip Code IX not applicable 24 Guarantor's Job Title 23 Guarantor's Principal Occupation 26 Law Firm of guarantor's spouse (if any) 25 Guarantor's Employer/Law Firm 27 If guarantor is child, law firm of parent(s) (if any)

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed shove)

OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Walker, Carey (Mr.) Schedule: 1/4 Report: 27/32 4 Date 5 Payee name Danwal, Inc. 04/15/2014 6 Amount (\$) Payee address City; State; Zip Code 12424 Hwy 155 South Tyler, TX 75703 \$1,609.79 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Solicitation/Fundraising Expense Road signs OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Mail Chimp 03/13/2014 Amount (\$) Payee address City; State; Zip Code 512 Means Street \$50.00 Suite 404 Atlanta, GA 30318 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Solicitation/Fundraising Expense Online Message Distributor OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date Mail Chimp 04/13/2014 Payee address City; State; Zip Code Amount (\$) 512 Means Street \$50.00 Suite 404 Atlanta, GA 30318 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Solicitation/Fundraising Expense Online Message Distributor OF **EXPENDITURE** Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name 05/12/2014 Metroplex Republican Women's PAC City; State; Zip Code Amount (\$) Payee address 1244 Brookside Drive \$100.00 Hurst, TX 76053 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE Advertising Advertising Expense OF **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

PURPOSE

OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES

P.O.Box 12070

SCHEDULE F

EXPENDITURE CATEGORIES								
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Cor ing Legal Services Solicitation/Fundrais	ntract Labor Loan Repayme ring Expense Transportation Contributions/D ct Candidate/O ontal Expense OTHER (enter	nt/Reimbursement Equipment & Related Expense Jonations Made By ffficeholder/Political Committee a category not listed above)					
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)					
Schedule: 2/4 Re	port: 28/32 Walker, Carey (Mr.)							
4 Date 02/26/2014	5 Payee name One-Stop Printing							
6 Amount (\$)	7 Payee address City; State; Zip Code							
\$7,610.52	611 University Drive Fort Worth, TX 76107							
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Texas, complete Schedule T)					
PURPOSE OF	Printing Expense	Postcards and mailers						
EXPENDITURE								
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:					
Date	Payee name							
02/26/2014	One-Stop Printing							
Amount (\$)	Payee address City; State; Zip Code							
\$11,583.07	611 University Drive Fort Worth, TX 76107							
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)					
PURPOSE OF EXPENDITURE	Advertising Expense	Postage						
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:					
Date	Payee name							
03/21/2014	One-Stop Printing							
Amount (\$)	Payee address City; State; Zip Code							
\$836.93	611 University Drive Fort Worth, TX 76107							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside Mailers/Flyers	of Texas, complete Schedule T)					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:					
Date	Payee name							
04/23/2014	One-Stop Printing							
Amount (\$)	Payee address City; State; Zip Code							
\$784.72	611 University Drive Fort Worth, TX 76107							

Description

Postage and Handling

Office sought:

Category (See Categories listed at the top of this schedule)

Advertising Expense

Candidate / Officeholder name

(If travel outside of Texas, complete Schedule T)

Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

Fees	Printing Expense Office Overhead/ The Instruction Guide explains how		er a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 3/4 Re	[
4 Date	5 Payee name		
05/14/2014	One-Stop Printing		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$4,653.36	611 University Drive		
¥ ·,	Fort Worth, ŤX 76107		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		de of Texas, complete Schedule T)
OF	Printing Expense	Postcards and mailers	
EXPENDITURE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		-	
Date	Payee name One-Stop Printing		
05/16/2014	One-Stop Printing Payee address City; State; Zip Code		
Amount (\$)			
\$16,052.48	611 University Drive Fort Worth, TX 76107		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	de of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Postage and mailers	
EXPENDITURE			
	2 31.12%		00 - 5-14.
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		, , , , , , , , , , , , , , , , , , , ,
04/10/2014	Ownby, Craig		
Amount (\$)	Payee address City; State; Zip Code		
\$1,000.00	7106 Lighthouse Road		
	Arlington, TX 76002		
	Catagony (See Catagories listed at the top of this schedule)	Description (If travel outside	de of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Consulting	LI (. Bullete Schedule)
OF	Consulting Expense	Conducting	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
05/14/2014	Ownby, Craig		
Amount (\$)	Payee address City; State; Zip Code		
\$1,000.00	7106 Lighthouse Road		
+ · , · · ·	Arlington, TX 76002		
PURPOSE	Category (See Categories listed at the top of this schedule)	·	de of Texas, complete Schedule T)
OF	Consulting Expense	Consulting	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		•	

Austin, Texas 78711-2070

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

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense
UCTION GUIDE explains how to complete

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

	THE INSTRUCTION GOIDE EXPIRITIS HOW	w to complete this form.
1 PAGE # Schedule: 4/4 Re	eport: 30/32 FILER NAME Walker, Carey (Mr.)	3 ACCOUNT # (TEC filers)
4 Date	5 Payee name	
05/17/2014	PayPal	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$41.38	2211 North First Street San Jose, CA 95131	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Fees	Charges/Fees incurred in online payment processing
EXPENDITURE		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
04/28/2014	Saigon Dallas Media LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$1,000.00	10935 Estate Lane Suite 180 Dallas, TX 75238	
51153005	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Advertising
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
02/27/2014	TCGOP	
Amount (\$)	Payee address City; State; Zip Code	
\$400.00	2415 Gravel Drive Fort Worth, TX 76118	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Advertising in program for SD#10 Convention
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
03/17/2014	TCGOP	
Amount (\$)	Payee address City; State; Zip Code	
\$100.00	2405 Gravel Drive Fort Worth, TX 76118	
DUDDOOF.	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Advertising in program for SD#9 Convention
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 31/32

2 FILER NAME
Walker, Carey (Mr.)

3 ACCOUNT # (TEC filers)

4 Date
05/14/2014
5 Payee name
One-Stop Printing

5 Payer fiame
05/14/2014 One-Stop Printing
6 Amount (\$) 7 Payee address City; State; Zip Code
\$6,123.47
Reimbursement from political contributions intended
7 Payee address City; State; Zip Code
611 University Drive Fort Worth, TX 76107

(a) Category (See Categories listed at the top of this schedule)
(b) Description (If travel outside

8
PURPOSE
OF
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Advertising Expense

) Description (If travel outside of Texas, complete Schedule T)
Postage

INTEREST EARNED, OTHER CREDITS/GAINS/

SCHEDULE K

Date 5 Name of person from whom amount is received Tarrant County Republican Party 6 Address of person from whom amount is received; City; State; Zip Code 2405 Gravel Drive Fort Worth, TX 76118	 	Schedule: 1/1 ACCOUNT #		Amount (\$)
Tarrant County Republican Party 3/23/2014 6 Address of person from whom amount is received; City; State; Zip Code 2405 Gravel Drive Fort Worth, TX 76118			8	(\$)
6 Address of person from whom amount is received; City; State; Zip Code 2405 Gravel Drive Fort Worth, TX 76118				
7 Purpose for which amount is received				
Reimbursement for 1/2 Candidate Table				
·				