

# 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:  9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST  Leo	MI  Everett
	NICKNAME	LAST  Young	SUFFIX  Jr.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE  1102
	5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST  J.	MI  Warren
	NICKNAME	LAST  St. John	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 07 / 01 / 14		THROUGH Month Day Year 12 / 31 / 14
11 ELECTION	ELECTION DATE Month Day Year 03 / 04 / 14		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE	13 OFFICE SOUGHT (if known)	
	OFFICE HELD (if any) District Judge, 297 <sup>th</sup> Judicial District Court of Texas (In 2014)		Judge, County Criminal Court No. 1 Tarrant County, Texas (In 2014)

**OFFICE USE ONLY**

Date Received

BY: **F. PHILLIPS**

**ELECTIONS ADMINISTRATOR**

Date Hand-delivered or Postmarked: **2015 JAN 15 PM 1:28**

Date Processed: \_\_\_\_\_

Date Imaged: \_\_\_\_\_

**FILED TARRANT COUNTY**

**GO TO PAGE 2**

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

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

**14 CJOH NAME** Leo Everett Young Jr. **15 ACCOUNT # (Ethics Commission Filers)** 1

**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.

GENERAL  
 SPECIFIC

additional pages

COMMITTEE TYPE: NIA  
COMMITTEE NAME: NIA  
COMMITTEE ADDRESS: NIA  
COMMITTEE CAMPAIGN TREASURER NAME: NIA  
COMMITTEE CAMPAIGN TREASURER ADDRESS: NIA

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FRANK PHILLIPS  
ELECTIONS ADMINISTRATOR

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1.14
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,801.14
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 421.37
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,682.56
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,513.63
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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.

Leo Everett Young Jr.  
Signature of Candidate or Officeholder

AFFIX ROTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Leo Everett Young, Jr., this the 13<sup>th</sup> day of January, 20 15, to certify which, witness my hand and seal of office.

Risa Carlton Lisa Carlton Deputy District Clerk  
Signature of officer administering oath Print name of officer administering oath 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):

4

2 FILER NAME

Leo Everett Young, Jr.

3 ACCOUNT # (Ethics Commission File #)

1

4 Date

7-1-14

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Roderick C. White

7 Amount of contribution (\$)

\$ 100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

316 Hemphill Street  
Fort Worth, Texas 76104

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Attorney at Law

10 Contributor's job title

Attorney at Law

11 Contributor's employer/law firm

Roderick C. White, Attorney at Law

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

7-1-14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

D. Blaine Scheideman

Amount of contribution (\$)

\$ 200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2501 Museum Way # 1102  
Fort Worth, Texas 76107

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Retired

Contributor's job title

Retired

Contributor's employer/law firm

Retired

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

7-1-14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

William T. Ellis

Amount of contribution (\$)

\$ 100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6421 Camp Bowie Blvd, Suite 302  
Fort Worth, Texas 76116-5421

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Commercial & Investment Real Estate

Contributor's job title

Broker

Contributor's employer/law firm

Ellis & Tinsley, Inc.

Law firm of contributor's spouse (if any)

N/A

If contributor is a child, law firm of parent(s) (if any)

N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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 TARRANT COUNTY  
 2015 JAN 9 PM 1:28  
 FRANK HILLIPS  
 ELECTIONS ADMINISTRATOR

**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) **4**

2 FILER NAME

**Leo Everett Young, Jr.**

3 ACCOUNT # (Ethics Commission File #) **1**

4 Date

**7-1-14**

5 Full name of contributor  but-of-state PAC (ID#: \_\_\_\_\_)

**Harry N. Harris III**

7 Amount of contribution (\$)

**\$ 150.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

**2245 North Main Street  
Fort Worth, Texas 76164**

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

**Attorney at Law**

10 Contributor's job title

**Attorney at Law**

11 Contributor's employer/law firm

**Harry N. Harris III Attorney at Law**

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

**7-1-14**

Full name of contributor  but-of-state PAC (ID#: \_\_\_\_\_)

**Ronald W. Roberts**

Amount of contribution (\$)

**\$ 200.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**2709 Stonehenge Lane  
Flower Mound, Texas 75028-5120**

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

**Attorney at Law**

Contributor's job title

**Attorney at Law**

Contributor's employer/law firm

**Ronald W. Roberts, Attorney at Law**

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

**7-1-14**

Full name of contributor  but-of-state PAC (ID#: \_\_\_\_\_)

**Brett D. Boone**

Amount of contribution (\$)

**\$ 100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**P.O. Box 3467  
Fort Worth, Texas 76113**

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

**Attorney at Law**

Contributor's job title

**Attorney at Law**

Contributor's employer/law firm

**Brett D. Boone, Attorney at Law**

Law firm of contributor's spouse (if any)

**N/A**

If contributor is a child, law firm of parent(s) (if any)

**N/A**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

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 TARRANT COUNTY  
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 FRANK R. IPSI  
 ELECTIONS ADMINISTRATOR

# 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):

4

2 FILER NAME

Leo Everett Young, Jr.

3 ACCOUNT # (Ethics Commission Plus)

1

4 Date

7-1-14

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Rose Anna Salinas

6 Contributor address; City; State; Zip Code

3001 West 5<sup>th</sup> Street, Suite 250  
Fort Worth, Texas 76107

7 Amount of contribution (\$)

\* 250.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Attorney at Law

10 Contributor's job title

Attorney at Law

11 Contributor's employer/law firm

Rose Anna Salinas, Attorney at Law

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

7-1-14

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Brad Clark

Contributor address; City; State; Zip Code

101 Summit Avenue, Suite 1020  
Fort Worth, Texas 76102-2617

Amount of contribution (\$)

\* 200.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Attorney at Law

Contributor's job title

Attorney at Law

Contributor's employer/law firm

Brad Clark Attorney at Law

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

7-2-14

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

William Reagan Wynn

Contributor address; City; State; Zip Code

3100 West 7<sup>th</sup> Street Suite 420  
Fort Worth, Texas 76107

Amount of contribution (\$)

\* 250.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Attorney at Law

Contributor's job title

Attorney at Law

Contributor's employer/law firm

Wm. Reagan Wynn Attorney at Law

Law firm of contributor's spouse (if any)

Shelia Wynn - DA's Office Tarrant County

If contributor is a child, law firm of parent(s) (if any)

N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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TARRANT COUNTY  
2015 JAN 15 PM 1:28  
FRANK PHILLIPS  
ELECTIONS ADMINISTRATOR

**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): <b>4</b>	BY: <b>FRANK PHILLIPS</b> ELECTIONS ADMINISTRATOR 2015 JAN 15 PM 1:28 TARRANT COUNTY FILED
2 FILER NAME <b>Leo Everett Youngs, Jr.</b>		3 ACCOUNT # (Ethics Commission #): <b>-</b>	
4 Date <b>7-2-14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Don Bodenhamer</b>	7 Amount of contribution (\$) <b>\$250.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>P.O. Box 2520 Glen Rose, Texas 76043</b>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <b>Attorney at Law</b>		10 Contributor's job title <b>Attorney at Law</b>	
11 Contributor's employer/law firm <b>Don Bodenhamer, Attorney at Law</b>		12 Law firm of contributor's spouse (if any) <b>N/A</b>	
13 If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor's principal occupation		Contributor's job title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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)			

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

# POLITICAL EXPENDITURES

## 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.

SCHEDULE T  
 ELECTIONS  
 FRANCHISE  
 TARRANT COUNTY  
 FILED  
 2015 JAN 15 PM 1:29  
 BY:

1 Total pages Schedule F: <b>2</b>	2 FILER NAME <b>Leo Everett Youngs, Jr.</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>7-3-14</b>	5 Payee name <b>Vidalias - Renaissance Worthington Hotel</b>
-------------------------	---

6 Amount (\$) <b>\$383.47</b>	7 Payee address; City; State; Zip Code <b>200 Main Street, Fort Worth, Texas 76102</b>
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Food/ Beverage Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Grand Jury Luncheon - 7-3-14</b>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>NIA</b>	Office sought	Office held
---	---	---------------	-------------

Date <b>7-19-14</b>	Payee name <b>Everett Youngs</b>
------------------------	-------------------------------------

Amount (\$) <b>\$210.00</b>	Payee address; City; State; Zip Code <b>% J. Warren St. John, 801 Cherry Street, Unit 5, Fort Worth, Texas 76102</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Reimbursement</b>	Description (If travel outside of Texas, complete Schedule T) <b>Political Expenditures Reimbursement - Made from Personal Funds</b>
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>NIA</b>	Office sought	Office held
---	---	---------------	-------------

Date <b>8-21-14</b>	Payee name <b>Tarrant County Bar Association</b>
------------------------	---

Amount (\$) <b>\$105.00</b>	Payee address; City; State; Zip Code <b>1315 Calhoun Street, Fort Worth, Texas 76102</b>
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description (If travel outside of Texas, complete Schedule T) <b>Membership Fee 2014-2015</b>
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>NIA</b>	Office sought	Office held
---	---	---------------	-------------

Date <b>11-7-14</b>	Payee name <b>Risky's BBQ</b>
------------------------	----------------------------------

Amount (\$) <b>\$150.58</b>	Payee address; City; State; Zip Code <b>300 Main Street, Fort Worth, Texas 76102</b>
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Food/ Beverage Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Judges Luncheon</b>
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>NIA</b>	Office sought	Office held
---	---	---------------	-------------

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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: <b>2</b>	2 FILER NAME <b>Leo Everett Young, Jr.</b>	3 ACCOUNT # (Ethics Commission Filers) <b>-</b>
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4 Date <b>12-20-14</b>	5 Payee name <b>Everett Young</b>
---------------------------	--------------------------------------

6 Amount (\$) <b>\$ 412.14</b>	7 Payee address; City; State; Zip Code <b>% J. Warren St. John, 801 Cherry Street, Unit 5, Fort Worth, Texas 76102</b>
-----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Reimbursement</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Political Expenditures Reimbursement - Made from Personal Funds</b>
--------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>N/A</b>	Office sought	Office held
---	---	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

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 TARRANT COUNTY  
 2015 JAN 15 PM 1:29  
 FRANK PHILLIPS  
 ELECTIONS ADMINISTRATOR



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### 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 Candidate/Officeholder/Political Committee |
| Event Expense       | Polling Expense               | Travel Out Of District           | OTHER (enter a category not listed above)                                  |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: 1	<b>2</b> FILER NAME Leo Everett Young, Jr.	<b>3</b> ACCOUNT NO. (Ethics Commission Filers)
<b>4</b> Date 12-14-14	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$ 82.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 4400 Bryant Irvin Road, Fort Worth, Texas 76132	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Food and Refreshments - Retirement Party <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Date</b> 12-15-14	<b>Payee name</b> Party City	
<b>Amount (\$)</b> \$18.35 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address; City; State; Zip Code</b> 4826 Southwest Loop 820, Fort Worth, Texas 76109	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Event Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) Supplies for Retirement Party <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Date</b> 12-17-14	<b>Payee name</b> Walmart	
<b>Amount (\$)</b> \$12.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address; City; State; Zip Code</b> 6300 Oakmont Blvd., Fort Worth, Texas 76132	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Event Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) Supplies for Retirement Party <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Date</b> 12-17-14	<b>Payee name</b> Target - Cityview	
<b>Amount (\$)</b> \$298.35 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address; City; State; Zip Code</b> Cityview Blvd., Fort Worth, Texas 76132 (5700 Overton Ridge Blvd.)	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Food/Beverage Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) Food and Refreshments - Retirement Party <input type="checkbox"/> Check if Austin, TX, officeholder living expense

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED