

# 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:  
2014 JAN 10 PM 4:01  
TARRANT COUNTY  
FILED  
SIVELABORN  
ELECTIONS ADMINISTRATION

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

MRS.  
NICKNAME

Jamie  
LAST

L  
SUFFIX

Cummings

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Postmarked

Receipt #      Amount

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE

change of address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE      PHONE NUMBER      EXTENSION

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr.  
NICKNAME

Trent  
LAST

SUFFIX

Loftin

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

- January 15       30th day before election       Runoff       15th day after campaign treasurer appointment (officeholder only)
- July 15       8th day before election       Exceeded \$500 limit       Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month      Day      Year      THROUGH      Month      Day      Year  
7 / 1 / 13      12 / 31 / 13

11 ELECTION

ELECTION DATE      ELECTION TYPE

Month      Day      Year       Primary       Runoff       General       Special

3 / 4 / 14

12 OFFICE

OFFICE HELD (if any)      13 OFFICE SOUGHT (if known)

Judge Criminal Court #5  
Tarrant County TX

GO TO PAGE 2

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

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

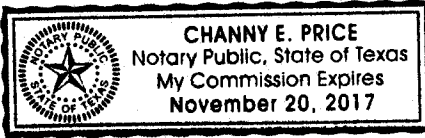
<b>14 C/OH NAME</b>	<b>15 ACCOUNT #</b> (Ethics Commission Filers)
---------------------	--

<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	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 TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS	ELECTIONS ADMINISTRATOR STEVE ARBORN JAN 10 PM 4:01 TARRANT COUNTY FILED

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 300.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3776.78
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1245.79
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

**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.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

[Signature]

Sworn to and subscribed before me, by the said Jamie Cummings, this the 10<sup>th</sup> day of Jan., 20 14, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Channy E. Price

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): 1

2 FILER NAME *Janie Cummings* 3 ACCOUNT # (Ethics Commission Filers)

4 Date <i>11/21/2013</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William H. Ray</i>	7 Amount of contribution (\$) <i>300.00</i>	8 In-kind contribution description (if applicable) <i>FILED COUNTY WARRANT JAN 10 PM 1:01 STEVEN DEAN ELECTIONS ADMINISTRATOR</i>
6 Contributor address; City; State; Zip Code <i>512 Main St #308 Port Worth, TX 76102</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

13 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#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			

Contributor's principal occupation Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

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

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

Contributor's principal occupation Contributor's job title

Contributor's employer/law firm Law firm of contributor's spouse (if any)

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

**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

# 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>JAMIE CUMMINGS</b>	3 ACCOUNT # (Ethics Commission Filer)
---------------------------------------	---------------------------------------	---------------------------------------

4 Date <b>7/24/2013</b>	5 Payee name <b>Alliance Printing + Design</b>
----------------------------	---

6 Amount (\$) <b>308.51</b>	7 Payee address; City; State; Zip Code <b>5412 Catlow Valley Ft. Worth TX 76137</b>
--------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>signing party event</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>t-shirts + jar openers</b>
--------------------------	--	--

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

Date <b>7/19/2013</b>	Payee name <b>Tarrant County Bar Association</b>
--------------------------	---

Amount (\$) <b>120.00</b>	Payee address; City; State; Zip Code <b>1375 Calhoun St Ft. Worth TX 76102</b>
------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>other</b>	Description (If travel outside of Texas, complete Schedule T) <b>local bar dues</b>
------------------------	--	--

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

Date <b>7/31/2013</b>	Payee name <b>Gordon Boswell Flowers</b>
--------------------------	---

Amount (\$) <b>75.52</b>	Payee address; City; State; Zip Code <b>1220 Pennsylvania Ft. Worth TX 76104</b>
-----------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>other</b>	Description (If travel outside of Texas, complete Schedule T) <b>funeral flowers in terms father</b>
------------------------	--	---

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

Date <b>12/9/2015</b>	Payee name <b>Tarrant County Republican Party</b>
--------------------------	--

Amount (\$) <b>2500.00</b>	Payee address; City; State; Zip Code <b>2405 Gravel Dr Ft. Worth TX 76118</b>
-------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>filing fee</b>	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
---	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**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.

<b>1</b> Total pages Schedule F: <u>2</u>		<b>2</b> FILER NAME		<b>3</b> ACCOUNT # (Ethics Commission Files)	
<b>4</b> Date <u>12/3/2013</u>		<b>5</b> Payee name <u>Sweet Shoppe</u>			
<b>6</b> Amount (\$) <u>359.01</u>		<b>7</b> Payee address; City; State; Zip Code <u>5800 Camp Bowie Ft. Worth, TX 76107</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule)		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>Christmas gifts</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> <u>10/15/2013</u>		<b>Payee name</b> <u>Jamie Cummings</u>			
<b>Amount (\$)</b> <u>211.91</u>		<b>Payee address; City; State; Zip Code</b> <u>8009 Redwood Trail Ft. Worth, TX 76137</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <u>reimbursement re. we. Lou's going away party</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> <u>10/15/2013</u>		<b>Payee name</b> <u>Jamie Cummings</u>			
<b>Amount (\$)</b> <u>44.87</u>		<b>Payee address; City; State; Zip Code</b> <u>8009 Redwood Trail Ft. Worth, TX 76137</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <u>reimbursement for Lou's party</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> <u>10/15/2013</u>		<b>Payee name</b> <u>Jamie Cummmup</u>			
<b>Amount (\$)</b> <u>136.56</u>		<b>Payee address; City; State; Zip Code</b> <u>8009 Redwood Trail Ft. Worth, TX 76137</u>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <u>reimbursement for Lou's retirement present</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED