JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

FORM JC/OH COVER SHEET PG 1

	1 ACCOUNT # (Ethics Commission filers)	2 PAGE # 1 of 34		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST MI Mr. Carey	OFFICE USE ONLY		
NAME	NICKNAME LAST SUFFIX Walker	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked		
Change of Address		Receipt # Amount		
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST MI	Date Processed		
NAME	Mr. Carey	Date Imaged		
	NICKNAME LAST SUFFIX Walker			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION			
8 REPORT TYPE	X January 15	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)		
9 PERIOD				
COVERED	Month Day Year Month Day THROUGH 09/30/2013 12/31/20	Year 013		
10 ELECTION	ELECTION DATE Month Day Year 03/04/2014 ELECTION TYPE X Primary Runoff	General Special		
11 OFFICE	OFFICE HELD (if any) 12 OFFICE SOUGHT (if know) Judge, County Crin	n) ninal Court 2 , Tarrant County, TX		
GO TO PAGE 2				

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:

FORM JC/OH

SUPPORT &	IOIALS		COVER	SHEET PG Z
13 C/OH NAME Walk	er, Carey (Mr.)		14 ACCOUNT # (Et	hics Commission filers)
15 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the content the candidate's or officeholder's knowledge or consent. Candidately receive notice of such expenditures.	andidate / officeholder. The	ese expenditures may
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	100	JAN F
	GENERAL	COMMITTEE ADDRESS		3 20
G additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	ATOR	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		I POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	215.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	17,195.00
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	11,603.83
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	10,765.89
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
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. HEATHER ANN KAUTZ MY COMMISSION EXPIRES JANUARY 9, 2017 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said of January 1, 20 1 4, to certify which, witness my hand and seal of office.				
Signature of officer adm	inistering oath	Print name of officer administering oath	Notary Putitle of officer adminis	stering oath

The Instruction Guide explains how to complete this form.		1 PAGE # Schedule: 1/26 Report: 3/34		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date 10/28/2013	Adeniji, Lateph		7 Amount of contribution (\$) 8 In-kind contribution (if applicable) \$100.00)
	619 W Main Street Arlington, TX 76010		(If travel outside of Texas, complete Schedule 7)	n D
9 Contributor's p Attorney	principal occupation	10 Contributor's join Attorney	bb title	<i>ב</i>
	employer / law firm f Lateph Adeniji	12 Law firm of con	ntributor'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))
12/13/2013	Contributor address; City; State; Zip Code 7908 Morning Lane Fort Worth, TX 76123		\$100.00	
			(If travel outside of Texas, complete Schedule T)	
Contributor's p Attorney	orincipal occupation	Contributor's jo Attorney	b title	
	employer / law firm Adkins Strall & Elam LLP	Law firm of con	ntributor'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)
12/02/2013	Contributor address; City; State; Zip Code 5750 E. University Blvd Suite 1028		\$100.00	
	Dallas, TX 75206		(If travel outside of Texas, complete Schedule T)	
Contributor's p Attorney	principal occupation	Contributor's jo Attorney	bb title	
	employer / law firm f Randall Isenberg	Law firm of con	ntributor'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: 2/2	6 Report: 4/34
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/20/2013	6 Contributor address; City; State; Zip Code 701 West Belknap Street Fort Worth, TX 76102		\$250.00	T) ELE
			(If travel outside of	Texas, complete Schedule 10
9 Contributor's p Attorneys	principal occupation	10 Contributor's job Attorneys	title	89 3 AT
11 Contributor's 6	employer / law firm	12 Law firm of cont	ributor's spouse (if ar	
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)
11/20/2013	Contributor address; City; State; Zip Code 206 E. Eighth Street #201		\$100.00	
	Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)
Contributor's r	orincipal occupation	Contributor's job	title	
Attorney	onicipal occupation	Attorney		
1	employer / law firm f Dabney Bassell	Law firm of cont Bassell & Wild	ributor's spouse (if ar cox, PLLC	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)
12/05/2013	Contributor address; City; State; Zip Code 1304 Land Rush Drive		\$25.00	!
	Arlington, TX 76012		(If travel outside of	Texas, complete Schedule T)
Contributor's p	I principal occupation	Contributor's jot Retired	o title	
Contributor's	employer / law firm	Law firm of cont	tributor's spouse (if ar	ny)
If contributor i	s a child, law firm of parent(s) (if any)			

				-	
The I NSTRUCTI	ON GUIDE explains how to complete this form.			1 PAGE#	
2 FILER NAME	Wolker Cores (Mr.)				26 Report: 5/34
Z TIZERTNAME	Walker, Carey (Mr.)			3 ACCOUNT#((Ethics Commission filers)
4 Date	5 Full name of contributor)#	.)	7 Amount of	8 In-kind contribution
	Black, Jon C.		,	contribution (\$)	description (if applicable)
					1 1
12/06/2013	6 Contributor address; City; State; Zip Code 1307 Woodbine Street Arlington, TX 76012	· · · · ·		\$100.00	' -
				(If travel outpide of	Texas, complete Schedule Ti
9 Contributor's r	I principal occupation	140 6	Daniello da da 1-1-	L	rexas, complete schedule 13
Retired	initial occupation		Contributor's job Retired	title	
		1 '	letiled		हिंदी में मिन
11 Contributor's	employer / law firm	12 L	aw firm of conti	ributor's spouse (if ar	iv) C1
N/A					
13 If contributor is	s a child, law firm of parent(s) (if any)	····			F. 5.
					a a a
Date	Full name of contributor	#)	Amount of	In-kind contribution
	Blumberg, Daniel E.		,	contribution (\$)	description (if applicable)
12/08/2013	Contributor address; City; State; Zip Code			\$200.00	
	Contributor address; City; State; Zip Code 2303 Lavon Creek Lane Arlington, TX 76006				
				(If travel outside of	Texas, complete Schedule T)
Contributor's p Attorney	rincipal occupation	I .	Contributor's job Attorney	title	:
Contributor's e	mployer / law firm	L	aw firm of contr	ibutor's spouse (if an	ıv)
Blumberg & I				iodioi o opodoc (ii dii	,,,
If contributor is	a child, law firm of parent(s) (if any)			, , , , , , , , , , , , , , , , , , , ,	
Date	Full name of contributor	#)	Amount of	In-kind contribution
_	Bourland, Richard		,	contribution (\$)	description (if applicable)
12/02/2013	Contributor address; City; State; Zip Code			\$250.00	
	201 Main Street Suite 1400			ĺ	
	Fort Worth, TX 76102			//4 hours 1 marks 1 ma	
		T			Texas, complete Schedule T)
Contributor's p	rincipal occupation	ł .	ontributor's job ttorney	title	
Contributor's e Bourland & K	mployer / law firm irkland	Lá	aw firm of contri	butor's spouse (if an	у)
If contributor is a child, law firm of parent(s) (if any)					

						
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#			
2 FILER NAME	Walker Corey (Mr.)			Schedule: 4/26 Report: 6/34		
2 FICER TYAIVE	Walker, Carey (Mr.)		3 ACCOUNT#	(Ethics Commission filers)		
4 Date	5 Full name of contributor	#)	7 Amount of	8 In-kind contribution		
	Bridges, David (Mr.)		contribution (\$)	description (if applicable)		
10/00/0010			1	i		
10/23/2013	6 Contributor address; City; State; Zip Code		\$100.00	lo ra N		
	600 Commerce Street Suite 200			S E S		
	Dallas, TX 75202		İ	30 - 3		
			(If travel outside of	Texas, complete Schedule 1)		
	principal occupation	10 Contributor's job	title	7-0 7 7-		
Justice		Justice		i ka off		
11 Contributor's	pmployor / low firm	40				
State of Tex		12 Law firm of conti	ributor's spouse (if ar	ny)		
01410 01 1011						
13 If contributor is	s a child, law firm of parent(s) (if any)			3 9		
				*		
Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>)	Amount of	In-kind contribution		
	Burke & Devine, PLLC		contribution (\$)	description (if applicable)		
				I		
11/20/2013	Contributor address; City; State; Zip Code		\$25.00	1		
	4604 Park Springs Blvd.			, 		
	Arlington, TX 76017			•		
			(If travel outside of	Texas, complete Schedule T)		
Contributor's p	orincipal occupation	Contributor's job	title			
Contributada	malayer How from	l and firm of an at-	ib. toda ana. an /if an	\		
Contributors e	employer / law firm	Law firm of contr	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		
	Butler, Frank E.		contribution (\$)	description (if applicable)		
			4-00-00	1		
12/24/2013	Contributor address; City; State; Zip Code		\$500.00			
	P.O. Box 508 Graham, TX 76450			I		
	Gianam, 17.70450					
			(If travel outside of	Texas, complete Schedule T)		
	rincipal occupation	Contributor's job	title			
Oil Productio	n	Owner				
Contributor's e	mployer / law firm	Law firm of contr	ibutor's spouse (if ar	nv)		
Self Employe	, ,	Law IIIII of Colli	ibutoi o opoudo (ii ai	•11		
If contributor is	a child, law firm of parent(s) (if any)					

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#		
			Schedule: 5/2	6 Report: 7/34	
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID:	#)	7 Amount of	8 In-kind contribution	
	Campbell, William (Mr.)		contribution (\$)	description (if applicable)	
11/20/2013	6 Contributor address; City; State; Zip Code 1101 W Randol Mill Road Arlington, TX 76012		\$100.00		
9 Contributor's r	principal occupation	10 Contribute de la late		Texas, complete Schedule T)	
Attorney	micipal occupation	10 Contributor's job Attorney	title		
	employer / law firm ampbell, Attorney at Law	12 Law firm of contr	ributor's spouse (if an	y) 35 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
13 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	
	Canas, Eduardo		contribution (\$)	description (if applicable)	
12/13/2013	Contributor address; City; State; Zip Code 600 N. Main Street Fort Worth, TX 76106		\$200.00 		
			(if travel outside of 1	Texas, complete Schedule T)	
Contributor's p Attorney	rincipal occupation	Contributor's job Attorney			
	mployer / law firm of Eduardo Canas	Law firm of contr	ributor's spouse (if an	y)	
If contributor is	a child, law firm of parent(s) (if any)				
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
	Cantrell, William		contribution (\$)	description (if applicable)	
12/03/2013	Contributor address; City; State; Zip Code		\$500.00		
	124 N. Main Weatherford, TX 76086		!		
	Woulding, 17, 70000		(if travel outside of 1	Texas, complete Schedule T)	
Contributor's p Attorney	rincipal occupation	Contributor's job Attorney	title		
	mployer / law firm antrell, Attorney at Law	Law firm of contr	ributor's spouse (if an	y)	
If contributor is	If contributor is a child, law firm of parent(s) (if any)				

The Instruction Quice explains how to complete this form. 1 PAGE # Schedule: 6/26 Report: 8/34 2 FILER NAME Walker, Carey (Mr.) 3 ACCOUNT # (Ethics Commission filters) 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of Chalsson, Mary L. 1/20/2013 6 Contributor address: City, State; Zip Code S500.00 City Chalsson, Mary L. (if travel outside or Texas, complete Schedule 1) 1/20/2013 6 Contributor's principal occupation 10 Contributor's spouse (if any) (if travel outside or Texas, complete Schedule 1) 1/20/2013 (if travel outside or Texas, complete Schedule 1) 1/20/2013 (if travel outside or Texas, complete Schedule 1) 1/20/2013 Contributor's employer / law firm 1/2 Law firm of contributor's spouse (if any) 1/20/2013 Contributor out-of-state PAC (ID# Amount of Chalk, John Allen Amount of Chalk, John Allen Contributor's principal occupation Contributor's principal				- (00Di0	·····	
Piller NAME Walker, Carey (Mr.) 3 ACCOUNT # (Ethics Commission filers)	The I NSTRUCT	ON GUIDE explains how to complete this form.			1	
4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of Chalsson, Mary L. 11/20/2013 6 Contributor address: City; State; Zip Code S500.00 3 3 3 3 3 3 3 3 3	9 FILED				Schedule: 6/2	26 Report: 8/34
Chaisson, Mary L. 11/20/2013 6 Contributor address; City; State; Zip Code River Oaks, TX 76114 10 Contributor's principal occupation Hospice 11 Contributor's employer / law firm Vitas 12 Law firm of contributor's spouse (if any) 13 If contributor's employer / law firm Chalk, John Allen 12/03/2013 13 Contributor's principal occupation Chalk, John Allen 14 Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Attorney 15 Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Contributor's principal occupation Attorney Contributor's employer / law firm Attorney Contributor's employer / law firm Attorney Law firm of contributor's spouse (if any)	2 FILER NAME	walker, Carey (Mr.)			3 ACCOUNT#	(Ethics Commission filers)
Chaisson, Mary L. 11/20/2013 6 Contributor address; City: State; Zip Code River Oaks, TX 76114 9 Contributor's principal occupation Hospice 10 Contributor's principal occupation Vitas 11 Contributor's employer / law firm Vitas 12 Law firm of contributor's spouse (if any) Date Full name of contributor Chaik, John Allen 12/03/2013 Contributor address: City: State; Zip Code S601 Verda Vista Court W Altorney Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chaik, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor is a child, law firm of parent(s) (if any) Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chaik, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Contributor's principal occupation Contributor's employer / law firm Whitaker, Chaik, Swindle & Schwartz, PLLC If contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Contributor's employer / law firm Whitaker, Chaik, Swindle & Schwartz, PLLC If contributor's principal occupation Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Contributor's principal occupation Attorney Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)	4 Date	5 Full name of contributor ut-of-state PAC (ID	#)	7 Amount of	8 In-kind contribution
11/20/2013 6 Contributor address; City; State; Zip Code Road River Oaks, TX 76114 9 Contributor's principal occupation Hospice 10 Contributor's principal occupation Hospice 11 Contributor's employer / law firm / Vitas 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 Octate PAC (ID# Octate		Chaisson, Mary L.		,	contribution (\$)	description (if applicable)
6 Contributor address: City: State: Zip Code 728 Lynda Road River Oaks, TX 76114 9 Contributor's principal occupation Hospice 10 Contributor's principal occupation Hospice 11 Contributor's employer / law firm Vitas 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 Chalk, John Allen 12/03/2013 Contributor address: City: State: Zip Code Altorney Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Cochran, Mark S. Contributor address: City: State: Zip Code Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) In-kind contribution (if applicable) Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any) Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)	11/00/0010					
Pliver Oaks, TX 76114 (If travel outside of Texas, complete Schedule 7) 1 1 1 1 1 1 1 1 1	11/20/2013	6 Contributor address; City; State; Zip Code			\$500.00	1 = 20 = 2
9 Contributor's principal occupation Hospice 10 Contributor's pib title Caseworker 11 Contributor's employer / law firm /Vitas 12 Law firm of contributor's spouse (if any) 13 If contributor is a child, law firm of parent(s) (if any) 14 Contributor is a child, law firm of parent(s) (if any) 15 Contributor is a child, law firm of parent(s) (if any) 16 Contributor is a child, law firm of parent(s) (if any) 17 Contributor is a child, law firm of parent(s) (if any) 18 Contributor is a child, law firm of parent(s) (if any) 18 Contributor is a child, law firm of parent(s) (if applicable) 18 Contributor is a child, law firm of parent(s) (if any) 18 Contributor's principal occupation 19 Contributor's		728 Lynda Road		·		हिंदी हिंग
9 Contributor's principal occupation Hospice 11 Contributor's employer / law firm Vitas 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 Challk, John Allen Contributor address; City; State; Zip Code 3601 Verda Vista Court W Aledo, TX 76008 Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Contributor is a child, law firm of parent(s) (if any) Contributor is a child, law firm of parent(s) (if any) Contributor is a child, law firm of parent(s) (if any) Contributor is a child, law firm of parent(s) (if any) Contributor is a child, law firm of parent(s) (if any) Contributor's principal occupation Arilington, TX 76011 Contributor's principal occupation Attorney Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)		Aiver Oaks, 1X 70114				
Hospice Caseworker 11 Contributor's employer / law firm / Vitas 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 Chalk, John Allen 12/03/2013 Contributor address; City; State; Zip Code 3601 Verda Vista Court W Aledo, TX 76008 Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#					(If travel outside of	
11 Contributor's employer / law firm Vitas 12 Law firm of contributor's spouse (if any) 13 If contributor is a child, law firm of parent(s) (if any) Date		principal occupation	10	•	title	
Date	Hospice			Caseworker		F 19 14
Date	11 Contributor's	employer / law firm	12	Low firm of contr	ributada anausa (if a	
Date Full name of contributor out-of-state PAC (ID#) Amount of Chalk, John Allen In-kind contribution (\$) description (if applicable)		mpoyer, and min	12	Law IIIII OI COIII	ibutor's spouse (ii ai	(y)
Date Full name of contributor out-of-state PAC (ID#) Amount of Chalk, John Allen In-kind contribution (\$) description (if applicable)						ŧ
Chalk, John Allen Contribution (S) description (if applicable) Contributor address; City; State; Zip Code 3601 Verda Vista Court W Aledo, TX 76008 Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor occupation Cochran, Mark S. Contributor of contributor occupation Attorney Date Full name of contributor occupation Cochran, Mark S. Contributor of parent(s) (if any) Amount of contribution (S) In-kind contribution occupation (If applicable) Amount of contribution (S) In-kind contribution occupation (If applicable) Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any)	13 If contributor is	s a child, law firm of parent(s) (if any)				
Chalk, John Allen Contribution (S) description (if applicable) Contributor address; City; 3601 Verda Vista Court W Aledo, TX 76008 Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor occupation Cochran, Mark S. Contributor of parent(s) (if any) Date Full name of contributor occupation Cochran, Mark S. Contributor of parent(s) (if any) Amount of contribution (if applicable) Amount of contribution (if applicable) Contributor of parent(s) (if any) Contributor of parent(s) (if applicable) Law firm of contributor's spouse (if any)						
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12/03/2013 Contributor address; City; State; Zip Code \$100.00	Date)		
Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor occupation Contributor is a child, law firm of parent(s) (if any) Date Full name of contributor occupation Cochran, Mark S. Contributor address: City: State: Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's spouse (if any) In-kind contribution contribution (s) description (if applicable) In-kind contribution occupation (if applicable) In-kind contribution occupation (if applicable) In-kind contribution occupation (if applicable) In-kind contribution occupation (if applicable) In-kind contribution occupation (if applicable) In-kind contribution (s) description (if applicable)		Char, John Allen			``'	
Contributor's principal occupation Attorney Contributor's employer / law firm of contributor Contributor's spouse (if any) Date Full name of contributor Out-of-state PAC (ID#	12/03/2013	Contributor address City State 7in Code	• • •		\$100.00	<u>.</u>
Aledo, TX 76008 Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor ochributor cochran, Mark S. Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Amount of contribution (\$) In-kind contribution description (if applicable) \$100.00 (if travel outside of Texas, complete Schedule T) Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)					,	i •
Contributor's principal occupation Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#) Cochran, Mark S. 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's principal occupation Attorney Law firm of contributor's spouse (if any) Contributor's spouse (if any) Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)						
Attorney Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Pull name of contributor out-of-state PAC (ID#					(If travel outside of	Texas, complete Schedule T)
Contributor's employer / law firm Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#	Contributor's p	rincipal occupation		Contributor's job	title	
Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date	Attorney			Attorney		
Whitaker, Chalk, Swindle & Schwartz, PLLC If contributor is a child, law firm of parent(s) (if any) Date	Contributore	mployer / law firm		Law firm of contr	ibutor's spause (if ar	21/1
If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#) Cochran, Mark S. 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law In-kind contribution contribution (\$) In-kind contribution description (if applicable) Contributor \$\frac{1}{2}\$ \$\fr				Law min or contr	ibutor o spouse (ir ai	'37
Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution description (if applicable) 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 (If travel outside of Texas, complete Schedule T) Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Law firm of contributor's spouse (if any)		, -				
Cochran, Mark S. 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contribution (\$) description (if applicable) \$100.00 (If travel outside of Texas, complete Schedule T)	If contributor is	s a child, law firm of parent(s) (if any)				
Cochran, Mark S. 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contribution (\$) description (if applicable) \$100.00 (If travel outside of Texas, complete Schedule T)						
Cochran, Mark S. 11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contribution (\$) description (if applicable) \$100.00 (If travel outside of Texas, complete Schedule T)						
11/20/2013 Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contributor's spouse (if any) Law firm of contributor's spouse (if any)	Date					
Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contributor State; Zip Code I (If travel outside of Texas, complete Schedule T) (If travel outside of Texas, complete Schedule T) Law firm of contributor's spouse (if any)		Cochian, Mark S.			, ,	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contributor State; Zip Code I (If travel outside of Texas, complete Schedule T) (If travel outside of Texas, complete Schedule T) Law firm of contributor's spouse (if any)	11/20/2013	Ocabilla to and document Office Otaba 770 Ocaba			\$100.00	1
Suite 110 Arlington, TX 76011 Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contributor's spouse (if any)		, , , , , ,				l
Contributor's principal occupation Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Contributor's principal occupation Attorney Law firm of contributor's spouse (if any)		Suite 110				I
Attorney Contributor's employer / law firm Mark S. Cochran, Attorney at Law Attorney Law firm of contributor's spouse (if any)		Arlington, 1X 76011			(If travel outside of	Texas, complete Schedule T)
Contributor's employer / law firm Law firm of contributor's spouse (if any) Mark S. Cochran, Attorney at Law	Contributor's p	rincipal occupation		Contributor's job	title	Market Control of the
Mark S. Cochran, Attorney at Law	Attorney			Attorney		
Mark S. Cochran, Attorney at Law	O-state to d	and one / low form		1 au 6	ibutada annua (if	
				Law firm of contr	ibutor's spouse (ii ar	iy)
If contributor is a child, law firm of parent(s) (if any)	3. 300	, . money we man				
	If contributor is	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: 7/2	6 Report: 9/3	4
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT# (Ethics Commiss	sion filers)
4 Date	5 Full name of contributor out-of-state PAC (ID=	<u> </u>	7 Amount of contribution (\$)	8 In-kind of description	contribution (if applicable)
10/16/2013	6 Contributor address; City; State; Zip Code 1312 Amber Court Keller, TX 76248		\$100.00	ELECTIONS STEELS	ZO TARRET
9 Contributor's p Judge	principal occupation	10 Contributor's job Associate Judg	title		
11 Contributor's e State of Texa		12 Law firm of conti	ributor's spouse (if an	iy)	51 -<
13 If contributor is a child, law firm of parent(s) (if any)					
Date	Full name of contributor)	Amount of contribution (\$)		ontribution (if applicable)
11/20/2013	Contributor address; City; State; Zip Code 3725 Washburn Avenue Fort Worth, TX 76107		\$100.00		
			(If travel outside of 1	Texas, complete	Schedule T)
Contributor's p Attorney	rincipal occupation	Contributor's job Staff Attorney	title		
Contributor's e 2nd Court of	mployer / law firm Appeals		ributor's spouse (if an District Attorneys	• •	
If contributor is	a child, law firm of parent(s) (if any)				
Date	Full name of contributor)	Amount of contribution (\$)		ontribution (if applicable)
11/20/2013	Contributor address; City; State; Zip Code P.O. Box 13663 Arlington, TX 76094		\$200.00		
			(If travel outside of 1	Texas, complete	Schedule T)
Contributor's p Retired Judg	rincipal occupation e	Contributor's job Retired Judge	title	4.1	
Contributor's e Retired Judg	mployer / law firm e	Law firm of contr	ributor's spouse (if an	y)	
If contributor is	a child, law firm of parent(s) (if any)				

The Instructi	ON GUIDE explains how to complete this form.			1 PAGE#			
2 FILER NAME	Walker Corey (Mr.)				26 Report: 10		
2 TILLITINAIVIE	Walker, Carey (Mr.)			3 ACCOUNT#	(Ethics Commis	sion filers)	
4 Date	5 Full name of contributor			<u> </u>			
Date	5 Full name of contributor □ out-of-state PAC (ID: Deegan, Michael D.	#)	7 Amount of contribution (\$)	8 rtn-kind description	contribution (ff applicable)	١
				()	2		,
11/20/2013	6 Contributor address; City; State; Zip Code			\$100.00			~~
·	101 Summit Avenue #104				1 72/10	G = 1	
	Fort Worth, TX 76102			<u>'</u>	52	0	7]
				(If travel outside of	Texas, complete	Schedule T)	旦
9 Contributor's p Attorney	principal occupation	10	Contributor's job	title		19 <u>=</u>	
Attorney			Attorney			5 <	
	employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny)		
Michael D. D	eegan, Attorney at Law				- 1		
13 If contributor is	s a child, law firm of parent(s) (if any)						
	a sing an initial parametry (ii any)						
					·		
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)		contribution (if applicable)	
	Dickson, Craig P.			CONTIDUTION (\$)	description	(ii applicable)	, .
11/20/2013				\$100.00	1		
	Contributor address; City; State; Zip Code 2408 Montgomery Street			************	,		
	Fort Worth, TX 76107				Ī		
				(If travel outside of	Texas, complete	Schedule T)	
	rincipal occupation		Contributor's job	title			
Attorney			Attorney				
Contributor's e	mployer / law firm		Law firm of contr	ributor's spouse (if a	ny)		
Law Office o	f Craig P. Dickson						
If contributor is	a child, law firm of parent(s) (if any)						
ii continutor s	s a critic, law firm of parefuls) (if any)						
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)		contribution (if applicable)	
	Easton, Darl E.			CONTRIBUTION (W)	description	(ii applicable)	
11/20/2013				\$50.00	1		
– –	Contributor address; City; State; Zip Code 1005 Fayette Drive						
	Euless, TX 76039				i		
				(If travel outside of	Texas, complete	Schedule T)	
	rincipal occupation		Contributor's job	title			
Retired			Retired				
Contributor's e	mployer / law firm		Law firm of contr	ibutor's spouse (if a	ny)		
N/A				-			
If contributor in	a child, law firm of parent(s) (if any)						
ii cominador is	i a Gina, iaw iiiii or paierii(s) (ii arry)						

The Instruction	GUIDE explains how to complete this form.		1 PAGE#		
			Schedule: 9/26 Report: 11/34		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT# (Ethics Commission filers)	
4 Date	5 Full name of contributor out-of-state PAC (ID#	<u> </u>	7 Amount of	8 In-kind contribution	
	Ebert, David		contribution (\$)	description (if applicable)	
				.BY .	
11/19/2013	6 Contributor address; City; State; Zip Code		\$100.00	TAF 2014. ELECT	
	1726 Chadwick Court		,	54 5 3	
	#100 Hurst, TX 76054			35 2 37	
	Hulst, 17 70034		(If travel outside of	Texas, complete Schedule II.	
9 Contributor's r	principal occupation	10 Contributor's job	title		
Attorney		Attorney			
				10	
11 Contributor's		12 Law firm of contr	ributor's spouse (if ar	Arron Telephone	
Ebert & Eber	rt	Ebert & Ebert		ह्र ज	
19 If contributor is	a abild low firm of parents) /if an A				
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	
Date	Evans, Lance		contribution (\$)	description (if applicable)	
	Evans, Earlos			! !	
11/20/2013	Contributes address City States 7to Onde		\$200.00	!	
	Contributor address; City; State; Zip Code 115 W. Second				
	Suite 202	•		I	
	Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)	
Contributor's r	I principal occupation	Contributor's job	<u> </u>		
Attorney	micipal occupation	Attorney	, uno		
,		,			
Contributor's	employer / law firm	Law firm of cont	ributor's spouse (if ar	ny)	
Evans, Danie	el, Moore, Evans & Lazarus				
If contributor is	s a child, law firm of parent(s) (if any)				
5.1.	Enthance of contributes III and of other DAG (ID)	,	Amount of	In-kind contribution	
Date	Full name of contributor out-of-state PAC (ID:	·)	Amount of contribution (\$)	description (if applicable)	
	Faulkner, Lonnie			!	
11/22/2013			\$250.00		
11/22/2010	Contributor address; City; State; Zip Code		1	l	
	8018 Webby Lynn Road Grand Prairie, TX 75052			l	
			(If travel outside of	Texas, complete Schedule T)	
O-Albatata		Contributordo inh	<u> </u>		
	principal occupation Dic Accountant	Contributor's job Certified Public			
Octanieu i de		2304 1 05			
Contributor's e	employer / law firm	Law firm of cont	ributor's spouse (if ar	ту)	
VSPR			-		
,					
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	Walker, Carey (Mr.)	·	Schedule: 10/26 Report: 12/34
	wallon, Jaroy (Mil.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Full name of contributor		7
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Fenton, James R.)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
	Sincing Burnes y II.		
11/20/2013	6 Contributor address; City; State; Zip Code		\$500.00
	179 Annetta Road		
	Willow Park, TX 76087		'
			(If travel outside of Texas, complete Schedule T)
	principal occupation	10 Contributor's job	title Z
Manager		Manager	
11 Contributor's 6	amplayor / Jaw firm	10 I am firm of cont	
Lockheed M	· ·	12 Law IIIII OI COIN	
	•		
13 If contributor is	s a child, law firm of parent(s) (if any)		
			igni 🤥 🖫
Date	Full name of contributor ut-of-state PAC (ID#		Amount of In-kind coatribution
Date	Fusilier, Nancy		contribution (\$) description (if applicable)
	,		1
11/20/2013	Contributor address; City; State; Zip Code		\$75.00
	10817 Pebblecreek Court		' I
	Benbrook, TX 76126		
			(If travel outside of Texas, complete Schedule T)
	principal occupation	Contributor's job Domestic Engi	
Domestic En	girieer	Domestic Engi	lileei
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if any)
Self			
If contributor in	a child law firm of parent(s) (if any)		
ii contributor s	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor)	Amount of In-kind contribution
	Gage, Steven L (Mr.)		contribution (\$) description (if applicable)
10/00/0010			\$1,000.00
10/09/2013	Contributor address; City; State; Zip Code		\$1,000.00
	4801 Overton Woods Drive Fort Worth, TX 76109		1
			(If travel outside of Texas, complete Schedule T)
Contributor's r	brincipal occupation	Contributor's job	
Entrepreneu	· · · · · · · · · · · · · · · · · · ·	Owner	
Contributor's e Self Employe	employer / law firm	Law firm of contr	ributor's spouse (if any)
Gen Employe			
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#				
<u> </u>	EU EO MANE	Well-			Schedule: 11/26 Report: 13/34				
2	FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT#((Ethics Commi	ssion file	rs)	
4	Date	5 Full name of contributor ut-of-state PAC (ID	‡)	7 Amount of		d contribu		
		Gallagher, J. Patrick			contribution (\$)	description	on (if app	licable)	
	11/20/2013				#200 00	1			
	11/20/2013	6 Contributor address; City; State; Zip Code			\$200.00	1			
		555 S. Summit Fort Worth, TX 76104				1			
					/If travel outside of	Toyas comple	ta Sabadu	[]	
9	Contributor's n	principal occupation	10	Contributorio inh	(If travel outside of	regas, comple	CC)	<u> </u>	
3	Attorney	листрат оссираноп	10	Contributor's job Attorney	title		A COMM	133	
				rationity		52	2.5	20	
11		employer / law firm	12	Law firm of contr	ributor's spouse (if a	ny) こうこう	Wildram .	ir I	
	Haslam & Ga	allagher				Es	CT		
13	If contributor is	s a child, law firm of parent(s) (if any)				+		-30	
	ii ooriii batar ii	a dima, law initi of parent(s) (ii any)				1 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	63	5 m	
							s. c.		
	Date	Full name of contributor	ŧ)	Amount of		contribu		
		Gardner, Terry			contribution (\$)	description	on (if app	licable)	
10/14/0040				****	1				
	12/11/2013	Contributor address; City; State; Zip Code			\$250.00	l			
777 Taylor Street Suite 1130			1						
		Fort Worth, TX 76102			(If travel outside of	Toyan comple	to Sobodu	ьт П	
	Contributor's n	rincipal occupation		Contributor's job		Texas, comple	- Conedo		
	Attorney	micipal occupation	Attorney						
		employer / law firm	Law firm of contributor's spouse (if any)						
	Gardner Aldr	ICH LLP							
	If contributor is	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor out-of-state PAC (ID#	ŧ)	Amount of contribution (\$)	In-kind description	l contribu		
		Gray, David			(4)		(,	
	12/03/2013				\$100.00	!			
	.2,00,20.0	Contributor address; City; State; Zip Code 1214 Oakcrest Drive			V				
		Arlington, TX 76012				1			
					(If travel outside of	Texas, comple	te Schedu	le T)	
	Contributor's p	principal occupation		Contributor's job	title				
	Retired			Retired					
0.17.1.1				Low firm of ocat-	ributor's spouse (if ar	nu)			
	N/A	mployer / law firm		Law min or contr	ibutoi s spouse (ii ai	iiy <i>)</i>			
	If contributor is	a child, law firm of parent(s) (if any)							

The Instruction Guide explains how to complete this form.			1 PAGE#			
2 FILER NAME	Walker, Carey (Mr.)		* **	Schedule: 12/26 Report: 14/34 3 ACCOUNT # (Ethics Commission filers)		
L TILLITIANIE	THEET TO WILL THE WILLIAM TO THE			3 ACCOUNT# (Ethics Commission filers)	
4 Date	E Ciliana (carina E					
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	Guilli, Monida			, , ,	1	
12/17/2013	6 Contributor address; City; State; Zip Code			\$100.00	1	
	2707 Pin Oak Lane				l 1	
	Arlington, TX 76012				1	
				(If travel outside of	Texas, complete Schedule T)	
	principal occupation		Contributor's job	title		
Retired		F	Retired			
11 Contributor's	employer / law firm	12 L	aw firm of contr	ributor's spouse (if ar	nv)	
					co m	
12 16	a shild law for a factor May (if any)	<u> </u>			χ LF 20	
13 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	
	Hall, Tom			contribution (\$)	description (if applicable)	
12/17/2013				¢500.00		
12/11/2013	Contributor address; City; State; Zip Code			\$500.00		
	1700 Thames Trail Colleyville, TX 76034				! § 5 ≺	
				(If travel outside of	Texas, complete Schedule T)	
Contributor's p	principal occupation		Contributor's job			
Attorney			attorney			
Contributorio	pmplayor / law firm	 	ou firm of contr	ibutada anguas (if a	24	
Law Office o	employer / law firm f Tom Hall		aw iiiii oi coiii	ibutor's spouse (if ar	iy)	
					· · · · · · · · · · · · · · · · · · ·	
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	#	,	Amount of	In-kind contribution	
24.0	Haltom City Bikes	"	/	contribution (\$)	description (if applicable)	
					I	
12/18/2013	Contributor address; City; State; Zip Code		,	\$300.00		
	5719 Airport Freeway Haltom City, TX 76117				I	
	Hallom Oily, 12 70117			(Manual autoida of	Texas, complete Schedule T)	
Ocatally to do			\\		Texas, complete scriedule 1)	
Attorney	principal occupation		ontributor's job Owner	uue		
	employer / law firm	Law firm of contributor's spouse (if any)				
Factor & Car	npbell		actor & Camp	DUCII		
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: 13/26 Report: 15/34		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT #	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID#	#)	7 Amount of	8 In-kind contribution	
	Hanson, Mark (Dr.)	·	contribution (\$)	description (if applicable)	
				1	
11/20/2013	6 Contributor address; City; State; Zip Code		\$100.00	1	
	2705 Butler Drive			1	
	Arlington, TX 76012		·		
			(If travel outside of	Texas, complete Schedule T)	
	orincipal occupation	10 Contributor's job	title	W	
Optometrist		Optometrist			
44 0-14-1-1				71 (17)	
11 Contributor's e Insight Vision		12 Law firm of contr	ributor's spouse (if a		
maignt vision				TAT	
13 If contributor is	s a child, law firm of parent(s) (if any)			5 5	
	, a sine, p(s) (a),				
				C.F. may	
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind configution	
	Hayes, Steve		contribution (\$)	description (if applicable)	
11/18/2013	Contributor address; City; State; Zip Code		\$250.00	1 3 5 <	
	500 Main Street				
	Suite 340 Fort Worth, TX 76102			f	
	Total Total		(If travel outside of	Texas, complete Schedule T)	
Contributor's p	principal occupation	Contributor's job	title		
Attorney		Attorney			
O-stributorio o		Low firm of contributorio consum (if only)			
	employer / law firm f Steven K. Hayes	Law firm of contributor's spouse (if any)			
LEW OILOG G	oleven K. Hayes				
If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor)	Amount of	In-kind contribution	
	Hicks, Sam		contribution (\$)	description (if applicable)	
11/12/2013	Contributor address; City; State; Zip Code		\$75.00	· I	
	P.O. Box 626			i	
	Frankston, TX 75763			<u>_</u>	
			(If travel outside of	Texas, complete Schedule T)	
•	rincipal occupation	Contributor's job			
Attorney		Assistant Coun	ity Attorney		
Contributor's e	mployer / law firm	Law firm of contr	ributor's spouse (if ar	21/	
	County Attorney's Office	Law min of contr	ibutoi s spouse (ii ai	19)	
If contributor is	a child, law firm of parent(s) (if any)				

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/26 Report: 16/34				
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)			
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
12/16/2013	6 Contributor address; City; State; Zip Code 777 Main Street Ste. 3600 Fort Worth, TX 76102		\$50.00	Texas, complete Schedule T			
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	title	765 J 77			
11 Contributor's e Harris, Finle	, ,	12 Law firm of contr	ributor's spouse (if ar				
13 If contributor i	s a child, law firm of parent(s) (if any)			5 01			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
12/17/2013	Contributor address; City; State; Zip Code 303 W Abram Street Arlington, TX 76010		\$500.00	 			
	·		(If travel outside of	Texas, complete Schedule T)			
Contributor's Attorney	principal occupation	Contributor's job title Attorney					
1	employer / law firm of James Kennedy	Law firm of contributor's spouse (if any)					
If contributor i	s a child, law firm of parent(s) (if any)						
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
12/02/2013	Contributor address; City; State; Zip Code 1619 Pennsylvania Avenue Fort Worth, TX 76110		\$250.00	 			
			(If travel outside of	Texas, complete Schedule T)			
Contributor's principal occupation Attorney		Contributor's job title Attorney					
Contributor's of Wells, Purce	employer / law firm ell & Kraatz	Law firm of contributor's spouse (if any) Ross & Matthews					
If contributor i	If contributor is a child, law firm of parent(s) (if any)						

The Instruction Guide explains how to complete this form. 1 PAGE # Schedule: 15/26 Report: 17/34 2 FILER NAME Walker, Carey (Mr.) 3 ACCOUNT # (Ethics Commission of Contributor Laird, Steven (Mr.) 10/01/2013 6 Contributor address; City; State; Zip Code 1824 8th Avenue Fort Worth, TX 76110 10 Contributor's principal occupation Attorney 1 PAGE # Schedule: 15/26 Report: 17/34 3 ACCOUNT # (Ethics Commission of Contributor of Contributor of Contribution (\$) 8 In-kind contributor (if a contribution (\$) 1	ilers)			
Schedule: 15/26 Report: 17/34 2 FILER NAME Walker, Carey (Mr.) 3 ACCOUNT # (Ethics Commission of Contributor Laird, Steven (Mr.) 10/01/2013 6 Contributor address; 1824 8th Avenue Fort Worth, TX 76110 9 Contributor's principal occupation 10 Contributor's job title	ilers)			
4 Date 5 Full name of contributor	ilers)			
Laird, Steven (Mr.) Contribution (\$) description (if a string of the st				
10/01/2013 6 Contributor address; City; State; Zip Code 1824 8th Avenue Fort Worth, TX 76110 (If travel outside of Texas, complete Scheens) 9 Contributor's principal occupation 10 Contributor's job title				
9 Contributor's principal occupation Contributor's principal occupation City; State; Zip Code (If travel outside of Texas, complete Sche	oplicable)			
9 Contributor's principal occupation 10 Contributor's job title				
9 Contributor's principal occupation 10 Contributor's job title	-dula Ti □			
	i Ta			
Attorney Attorney				
11 Contributor's employer / law firm Law Offices of Steven C. Laird, PC	a in			
13 If contributor is a child, law firm of parent(s) (if any)	- 1 1 E - al			
Zi ka				
Date Full name of contributor out-of-state PAC (ID#) Amount of In-kind contri				
Law Office of Craig A. Bishop, P.C. contribution (\$)	plicable)			
11/20/2013 Contributor address: Ciby State 7in Code \$100.00				
Contributor address; City; State; Zip Code 1101 W. Randol Mill Road Arlington, TX 76012				
(If travel outside of Texas, complete Sche	dule T)			
Contributor's principal occupation Attorney Contributor's job title Attorney				
Contributor's employer / law firm Law Office of Craig A. Bishop, P.C. Law firm of contributor's spouse (if any)	Law firm of contributor's spouse (if any)			
If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor ☐ out-of-state PAC (ID#) Amount of In-kind contri				
Lee, Chad contribution (\$) description (if an	plicable)			
11/20/2013 Contributor address; City; State; Zip Code \$250.00				
320 Hemphill Street Fort Worth, TX 76104				
(If travel outside of Texas, complete Sche	dule T)			
Contributor's principal occupation Attorney Contributor's job title Attorney				
Contributor's employer / law firm Law Office of Chad Lee Law firm of contributor's spouse (if any)				
If contributor is a child, law firm of parent(s) (if any)				

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE#	1 PAGE#			
				Schedule: 16/26 Report: 18/34				
2 FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT#	Ethics Cor	nmission fil	ers)	
4 Date	5 Full name of contributor out-of-state PAC (ID#	#)	7 Amount of		kind contrib		
	Lee, Jeannine			contribution (\$)	descr	iption (if ap	plicable)	
11/15/2013				\$50.00	l			
	6 Contributor address; City; State; Zip Code 2016 Bishop Street			Ψ50.00	1			
	Grand Prairie, TX 75050				I			
				(If travel outside of	Texas, com	plete Sched	iule T)	
9 Contributor's p	principal occupation	10	Contributor's job	title	2 -	20		
Professional			Professional		ECT	en regione	TAR I	
11 Contributorio	proloner / low firm	10	l (i	:h. 4. d	5		<u> </u>	
11 Contributor's e Quicksilver I	nteractive Group	12	Law firm of contr	ributor's spouse (if a	(עית ກະເ			
						77	_TTO_	
13 If contributor is	s a child, law firm of parent(s) (if any)					g 3	20	
Date	Full name of contributor ut-of-state PAC (ID#	¥	\	Amount of	l In-	kind contrib	oution	
2 4	Loftin, M. Trent			contribution (\$)	descr	iption (if ap	plicable)	
					1			
11/20/2013	Contributor address; City; State; Zip Code			\$250.00	Ì			
	113 N Houston Street Fort Worth, TX 76102				I			
	Tot Worth, 12 70102			(If travel outside of	Toyae com	miete Schoo		
Contributor's r	principal occupation		Contributor's job title					
Attorney	miliopai occupation	1	Attorney	uue				
Contributor's e Loftin & Lofti	employer / law firm		Law firm of contr	ributor's spouse (if a	ny)			
LOIDII & LOID	"							
If contributor is	s a child, law firm of parent(s) (if any)							
Data	Full passes of partification III and of state BAC (IDA	<u> </u>		Amount of	I In	kind contrib	ution	
Date	Full name of contributor	<i>†</i>	·····	contribution (\$)		iption (if ap		
	2000, 00.17				1			
12/23/2013	Contributor address; City; State; Zip Code			\$1,000.00	1			
	P.O. Box 13249				i			
	Arlington, TX 76094				_			
				(If travel outside of	Texas, con	nplete Sched	sule 1) 📋	
Contributor's p	orincipal occupation		Contributor's job Retired	ude				
	employer / law firm		Law firm of contr	ributor's spouse (if a	ny)			
N/A								
If contributor is	s a child, law firm of parent(s) (if any)							

The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 17/26 Report: 19/34				
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)			
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
12/06/2013	6 Contributor address; City; State; Zip Code 777 Main Street Suite. 1300 Fort Worth, TX 76123		\$100.00	Texas, complete Schedule T)			
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	title	TAR Z014 -			
11 Contributor's e McDonald Sa		12 Law firm of contr	ributor's spouse (if an	()			
<u> </u>				COURT COURT PM 2: Assert As Assert As Assert As Assert As Assert As Assert As Assert Assert Assert Assert Assert Assert As Assert Assert As Assert As Assert As Assert As Assert As Assert As Assert As Assert As As As As As As As As As As As As As			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contatoution— description (if Applicable)			
12/22/2013	Contributor address; City; State; Zip Code 3412 Woodlord Drive Arlington, TX 76013		\$50.00	` - 			
			(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 contr	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	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
11/20/2013	Contributor address; City; State; Zip Code 1300 S. University Drive Ste. 602		\$250.00	 			
	Fort Worth, TX 76107		(If travel outside of	Texas, complete Schedule T)			
Contributor's p Attorney	principal occupation	Contributor's job Attorney	title				
	employer / law firm llin, Attorney at Law	Law firm of contr	ributor's spouse (if an	iy)			
If contributor is	If contributor is a child, law firm of parent(s) (if any)						

The Instruction	ON GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE#			
			Schedule: 18/26 Report: 20/34			
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)			
4 Date	5 Full name of contributor out-of-state PAC (ID#) Messerli, Shelly K.		7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
11/20/2013	6 Contributor address; City; State; Zip Code 2212 Shumard Lane Flower Mound, TX 75028		\$50.00			
9 Contributor's p Attorney	Drincipal occupation	10 Contributor's job Assistant Distr	o title			
11 Contributor's e Tarrant Cour	employer / law firm nty District Attorney's Office	12 Law firm of conti	ributor's spouse (if any)			
13 If contributor is	s a child, law firm of parent(s) (if any)		6-5-5-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			
Date	Full name of contributor	t)	Amount of In-kind contribution? description: (if applicable)			
11/13/2013	Contributor address; City; State; Zip Code 201 Main Street Suite 2500 Fort Worth, TX 76102		\$150.00 			
	Tolt Worth, TX 70102		(If travel outside of Texas, complete Schedule T)			
Contributor's p	orincipal occupation	Contributor's job Attorney	title			
Contributor's e Kelly, Hart &	employer / law firm Hallman	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)			
12/19/2013	Contributor address; City; State; Zip Code 2501 Parkview Drive Suite 123 Fort Worth, TX 76102		\$200.00			
Contributor's p Attorney	principal occupation	Contributor's job Attorney	o title			
Contributor's e Orth, Walker	employer / law firm · & Orth, LLP	Law firm of contributor's spouse (if any)				
If contributor is	If contributor is a child, law firm of parent(s) (if any)					

			,		
The I NSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE#		
			Schedule: 19/26 Report: 21/34		
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT#	Ethics Commission filers)	
_					
4 Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	Orth, Gerry		σοπιοσιον (φ)	description (if applicable)	
11/20/2013	6 Contributor address; City; State; Zip Code	• • • • • • • • • • •	\$250.00		
	2501 Parkview Drive			[]	
	Suite 123 Fort Worth, TX 76102				
			(if travel outside of	Texas, complete Schedule T)	
9 Contributor's p Attorney	principal occupation	10 Contributor's job	title		
Money		Attorney			
	employer / law firm	12 Law firm of contr	ributor's spouse (if ar	强 [23]	
Orth, Walker	* & Orth, LLP			TARI	
13 If contributor is	s a child, law firm of parent(s) (if any)	***		JAN AF	
				To the same of the	
		7777		\$2 0 5m	
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In kind contribution description (if applicable)	
	Parris, Kerrin		(4)		
11/13/2013	Contributor address; City; State; Zip Code		\$50.00	ATOR	
	3650 Lovell Avenue			~	
	Fort Worth, TX 76102			<u>_</u>	
			<u> </u>	Texas, complete Schedule T)	
Contributor's p Attorney	orincipal occupation	Contributor's job title Attorney			
		Automoy			
	employer / law firm	Law firm of contributor's spouse (if any) Suzanne I Calvert & Associates			
Ross & Matti	news	Suzanne i Call	ven & Associates		
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)	
	Todell, Walk W.				
11/20/2013	Contributor address; City; State; Zip Code		\$250.00		
	850 Knob Hill Road Boyd, TX 76023				
	Boyu, 17 76023		/M. Auronal anabalula ad	Towar complete Schodule Ti	
Contributorlo	viscinal aggregation	Contributor's job	<u> </u>	Texas, complete Schedule T)	
Aircraft Asse	rincipal occupation mbler	Aircraft Assem			
Contributor's e Bell Helicopte	employer / law firm er Textron	Law firm of contr	ributor's spouse (if ar	ny)	
If contributor is	a child, law firm of parent(s) (if any)				

			the state of the s			
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/26 Report: 22/34			
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)			
4 Date	5 Full name of contributor	<u> </u>	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
12/03/2013	6 Contributor address; City; State; Zip Code 4332 Hyatt Court Fort Worth, TX 76116		\$500.00	П		
9 Contributor's p Accountant	principal occupation	10 Contributor's job Accountant				
11 Contributor's e William M Po	employer / law firm ou & Associates	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 contribution (\$) In-kind contribution description (if applicable)			
11/21/2013	512 Main Street Suite 308		\$200.00			
	Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)			
Contributor's p Attorney	principal occupation	Contributor's job Attorney	o title			
	employer / law firm ay, Attorney at 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	ł)	Amount of In-kind contribution contribution (\$) description (if applicable)			
10/21/2013	Contributor address; City; State; Zip Code 2206 Wood Cliff Court Arlington, TX 76012		\$250.00			
	3		(If travel outside of Texas, complete Schedule T)			
Contributor's principal occupation Sheriff's Deputy		Contributor's job Sheriff's Deput				
Contributor's e Tarrant Cour	employer / law firm nty, Texas	Law firm of conti	ributor's spouse (if any)			
If contributor is	If contributor is a child, law firm of parent(s) (if any)					

The I NSTRUCT	ON GUIDE explains how to complete this form.		1 PAGE#	/26 Report: 23/34	
2 FILER NAME	Walker, Carey (Mr.)			Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (ID: Rogers, Art	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
11/20/2013	6 Contributor address; City; State; Zip Code P.O. Box 136220 Fort Worth, TX 76136		\$100.00	 Texas, complete Schedule T)	
9 Contributor's	2-2-3	1 . <u>.</u>		Texas, complete Schedule 1)	
Butcher	principal occupation	10 Contributor's job Butcher	o title	70 ELE 84:	
11 Contributor's e Tom Thumb		12 Law firm of conti	ributor's spouse (if ar		
13 If contributor is	s a child, law firm of parent(s) (if any)			5 5 F	
Date	Full name of contributor	#)	Amount of contribution (\$)	In kind contribution description (if applicable)	
11/20/2013	Contributor address; City; State; Zip Code 2501 Parkview Drive Ste. 405		\$100.00	SR 6	
	Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)	
Contributor's p Attorney	principal occupation	Contributor's job Attorney	title		
	employer / law firm f Paul Rothband	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)	
12/12/2013	Contributor address; City; State; Zip Code 5751 Kroger Drive Suite 239 Keller, TX 76264		\$100.00	Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job Attorney	title		
	employer / law firm f James D. Saint	Law firm of contr	ibutor's spouse (if an	у)	
If contributor is	a child, law firm of parent(s) (if any)				

The I NSTRUCTION	ON GUIDE explains how to complete this form.			1 PAGE#				
				Schedule: 22/26 Report: 24/34				
2 FILER NAME	Walker, Carey (Mr.)			3 ACCOUNT#((Ethics Commission filers)			
4 Date	5 Full name of contributor ut-of-state PAC (ID: Skillman, Judy	<u> </u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
12/02/2013	6 Contributor address; City; State; Zip Code 2626 Sunlight Drive Arlington, TX 76006		\$50.00	 				
• • • • • •					Texas, complete Schedule T)			
9 Contributor's p Retired	principal occupation	10	Contributor's job Retired	title	TARF 2014 J <i>I</i> 100 Ection			
11 Contributor's 6 N/A	employer / law firm	12	Law firm of contr	ributor's spouse (if ar				
13 If contributor is a child, law firm of parent(s) (if any)				FM 2:				
Date	Full name of contributor	!)	Amount of contribution (\$)	leckind contribution description (if applicable)			
12/03/2013 Contributor address; City; State; Zip Code 6808 Trinity Landing Drive N Fort Worth, TX 76132			\$100.00	 				
				(If travel outside of Texas, complete Schedule T)				
Contributor's p Realtor	rincipal occupation	Contributor's job title Realtor						
Contributor's e Self Employe	mployer / law firm ed	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)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
12/03/2013	Contributor address; City; State; Zip Code 4900 Lighthouse Drive Flower Mound, TX 75022			\$500.00	 			
	,			(If travel outside of	Texas, complete Schedule T)			
Contributor's p	rincipal occupation		Contributor's job	title				
Domestic En	gineer		Domestic Engi	neer				
Contributor's e Self	mployer / law firm	Law firm of contributor's spouse (if any) Canterbury Gooch Surratt Shapiro Stein & Gaswirth						
If contributor is	a child, law firm of parent(s) (if any)							

The I NSTRUCTION	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 23/26 Report: 25/34						
2 FILER NAME	Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)					
4 Date	5 Full name of contributor	t)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)					
12/17/2013	6 Contributor address; City; State; Zip Code 777 Lonesome Drive trail Suite A Hurst, TX 76054	\$300.00						
9 Contributor's p Attorney	principal occupation	10 Contributor's job Attorney	ob title					
11 Contributor's e Law Office of		12 Law firm of contr	tributor's spouse (if any)					
13 If contributor is	s a child, law firm of parent(s) (if any)		8 - 27 22 5 - 7 12 - 07					
Date	Full name of contributor		Amount of contribution (\$) description (if applicable)					
12/19/2013	Contributor address; City; State; Zip Code 1406 Woodbine Street Arlington, TX 76012		\$100.00					
		!	(If travel outside of Texas, complete Schedule T)					
Contributor's p Domestic En	principal occupation ngineer		Contributor's job title Domestic Engineer					
Contributor's e Self	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)					
11/27/2013	Contributor address; City; State; Zip Code 611 University Drive Fort Worth, TX 76107		\$100.00 					
			(If travel outside of Texas, complete Schedule T)					
Contributor's p CFO	principal occupation	Contributor's job CFO	Contributor's job title CFO					
Contributor's e One-Stop Pri	employer / law firm inting	Law firm of contr	tributor'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: 24/26 Report: 26/34					
2 FILER NAME	Walker, Carey (Mr.)			(Ethics Commission filers)			
	, , , , , , , , , , , , , , , , , , , ,	7000011111	Luics Commission mers)				
4 Date				-			
4 Date	5 Full name of contributor out-of-state PAC (ID#	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	Webb, Charles E.		COMMIDGACON (4)	description (ii applicable)			
12/12/2013			\$100.00				
,,	6 Contributor address; City; State; Zip Code	1	\$100.00				
	3663 Airport Freeway Fort Worth, TX 76111		!	7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
				· m ===			
			<u> </u>	Texas, complete Schedule 13.			
	principal occupation	10 Contributor's job	title				
Attorney		Attorney		ST - 21			
11 Contributor's e	employer / law firm	12 Law firm of contr	ributorie enquee (if ar	m) = 5 - 0 m			
	of Charles E. Webb	Law min or com	ibutoi s spouse (ii aii				
13 If contributor is	s a child, law firm of parent(s) (if any)			11 4.5 ATOR			
				10 € 15 15 15 15 15 15 15 15 15 15 15 15 15			
				<u>i</u>			
Date	Full name of contributor	<u> </u>	Amount of	In-kind contribution			
1	Westerman, Mary		contribution (\$)	description (if applicable)			
				I			
12/10/2013	Contributor address; City; State; Zip Code		\$50.00	1			
	1304 Woodbine Street						
	Arlington, TX 76012						
			(If travel outside of	Texas, complete Schedule T)			
	principal occupation	Contributor's job	title				
Marketing		Marketing					
				:			
	employer / law firm	Law firm of contr	ributor's spouse (if an	ıy)			
Self Employe	ed .						
If contributor is	s a child, law firm of parent(s) (if any)	A-14-W-14-B-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-					
,, 00	, a dilia, iai di pardinio, (ii ai.,)						
Date	Full name of contributor ut-of-state PAC (ID#	t)	Amount of	In-kind contribution			
	Whitaker, Chalk, Swindle & Schwartz, PLLC		contribution (\$)	description (if applicable)			
			l i	1			
12/05/2013	Contributor address; City; State; Zip Code		\$500.00	1			
	301 Commerce Street			i I			
	Suite 3500 Fort Worth, TX 76102	·					
	FOR WORL, IX 70102		(if travel outside of	Texas, complete Schedule T)			
Contributor's p	principal occupation	Contributor's job	title				
		Attorneys					
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if an	ıy)			
''!-ibdoc.io							
If contributor is	s a child, law firm of parent(s) (if any)						

The I NSTRU	стюм Guide explains how to complete this form.	1 PAGE # Schedule: 25/26 Report: 27/34						
2 FILER NAM	ME Walker, Carey (Mr.)		3 ACCOUNT # (Ethics Commission filers)					
4 Date	5 Full name of contributor ut-of-state PAC (ID# Wiseman, Richard	#)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)					
12/23/20 ⁻	6 Contributor address; City; State; Zip Code 306 W 7th Street Suite 200 Fort Worth, TX 76102	\$250.00	\$250.00					
9 Contribute Attorney	r's principal occupation	10 Contributor's job Attorney	ob title RR					
	r's employer / law firm ean, Wiseman, Pracion, Hart & Howell	12 Law firm of contr	ributor's spouse (if an	S TED				
13 If contribu	or is a child, law firm of parent(s) (if any)			2:46 RATOR				
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable					
12/05/20	Contributor address; City; State; Zip Code 10401 W. Rocky Creek Road Crowley, TX 76036		\$250.00					
			(if travel outside of	of Texas, complete Schedule T)				
Contribute Retired	r's principal occupation	Contributor's job Retired						
Contribute N/A	r's employer / law firm	Law firm of contributor's spouse (if any)						
If contribu	tor is a child, law firm of parent(s) (if any)	·						
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
11/20/20	Contributor address; City; State; Zip Code 912 W. Belknap Fort Worth, TX 76102		\$500.00	 				
			(If travel outside of	Texas, complete Schedule T)				
Contribute Attorney	or's principal occupation	Contributor's job Attorney	Contributor's job title Attorney					
1	or's employer / law firm Nood, Attorney at Law	Law firm of cont	ributor's spouse (if ar	ny)				
If contribu	tor is a child, law firm of parent(s) (if any)							

	1 PAGE#										
I ne I NSTRUCTIO	ne Instruction Guide explains how to complete this form.					Schedule: 26/26 Report: 28/34					
2 FILER NAME	Walker, Carey (Mr.)	3 ACCOUNT # (Ethics Commission filers)									
	, comp										
4 Date	E Full came of contributes. I'll out of state BAC (ID)			7 Amount of 8 In-kind contribution							
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wynne, Mildred Ann	#		contribution (\$) description (if applicable)							
	Wyffrie, Mildred Affil										
11/20/2013				\$30.00							
	6 Contributor address; City; State; Zip Code 8700 Guadalupe Road										
	Fort Worth, TX 76116			ı							
	·			(If travel outside of T	exas,	complete S	chedule	ם ת			
9 Contributor's r	principal occupation	10	Contributor's job	title							
Nurse	initional occupation		Nurse								
11 Contributor's		12	Law firm of contr	ributor's spouse (if an	y)						
JPS Health	Systems	:									
10											
13 If contributor is	s a child, law firm of parent(s) (if any)										
]			
Date	Full name of contributor	#	,	Amount of		In-kind co	ntributio	n ====================================			
Date	Zadeh, Jamshyd	**		contribution (\$)	de	escription (
	Zadon, danisnyd										
12/03/2013	Contributor address; City; State; Zip Code			\$100.00							
	3408 Harwen Terrace			1							
	Fort Worth, TX 76109			1							
				(If travel outside of T	exas,	complete S	chedule	п 🗆			
Contributor's	principal occupation	Т	Contributor's job	title			******				
Attorney	. ,		Attorney								
		<u> </u>									
	employer / law firm		Law firm of conti	ributor's spouse (if an	y)						
Jamsnya Za	deh, Attorney at Law										
If contributor i	s a child, law firm of parent(s) (if any)	<u></u>			ဘ	FT)					
ii contributor i	s a clind, law little of parent(s) (ii arry)				₹	E	3	7			
					į	음	*****	-77			
					•	울	320	70 <u> </u>			
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					-	TEVE RABORN ONS ADMINISTRATOR	MN 15 PH 2: 46	PILED TRANS			
						S	a.	'n			
					1						

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

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

Travel Out Of District
Office Overhead/Rental Expense Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Walker, Carey (Mr.) Schedule: 1/3 Report: 29/34 4 Date 5 Payee name 11/20/2013 Blue Mesa Grill Amount (\$) Payee address City; State; Zip Code 1600 S University \$485.76 Fort Worth, TX 76107 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 (b) Description **PURPOSE** Solicitation/Fundraising Expense Fundraising expense, food and beverages **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/04/2013 Campaign Partners Amount (\$) Payee address City; State; Zip Code 16 Dudley Street \$29.00 彭芑 Fitchburg, MA 01420 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Expense Internet/website expense OF **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Pavee name Date Mail Chimp 12/31/2013 Amount (\$) Payee address State; Zip Code 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 messaging distributor OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Payee name 11/03/2013 Manzano, Elena Pavee address City; State; Zip Code Amount (\$) 728 Lynda Drive \$140.00 River Oaks, TX 76114 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Salaries/Wages/Contract Labor Assistance at the booth at event OF EXPENDITURE

Office held:

Office sought:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES 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. PAGE # FILER NAME 3 ACCOUNT # (TEC filers) 2 Walker, Carey (Mr.) Schedule: 2/3 Report: 30/34 4 Date 5 Payee name 11/21/2013 One-Stop Printing Amount (\$) Payee address City; State; Zip Code 611 University Drive \$59.54 Fort Worth, TX 76107 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense Letterhead and envelopes **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: (2) direct expenditure to benefit C/OH Date Payee name 0 12/04/2013 One-Stop Printing Amount (\$) Payee address City; State; Zip Code 30 611 University Drive \$1,609.74 Fort Worth, TX 76107 (If travel outside of Texas, complete Schedule T), Category (See Categories listed at the top of this schedule) Description **PURPOSE** Printing Expense Envelopes and letterhead OF O **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date PayPal 12/31/2013 Amount (\$) Payee address State; Zip Code 2211 North First Street \$47.53 San Jose, CA 95131 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Charges/Fees incurred in online payment processing OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Premier Gun Show, LLC 11/01/2013 Amount (\$) Pavee address City; State; Zip Code P.O. Box 34224 \$54.00 Fort Worth, TX 76162 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE Event Expense** Booth at the event OF **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH

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

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 h	now to complete this form.	
1 PAGE# Schedule: 3/3 Re	eport: 31/34	2 FILER NAME Walker, Carey (Mr.)		3 ACCOUNT # (TEC filers)
4 Date 12/03/2013	5 Payee name TCGOP			
6 Amount (\$) \$2,500.00	7 Payee address 2405 Gravel Fort Worth,	Drive		
8 PURPOSE OF EXPENDITURE	(a) Category (Se Fees	e Categories listed at the top of this schedule)	(b) Description (If travel ou Filing Fee	rtside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH		officeholder name	Office sought:	Office held:

ADMINISTRATOR

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Walker, Carey (Mr.) Schedule: 1/3 Report: 32/34 4 Date 5 Payee name Campaign Partners 10/11/2013 6 Amount (\$) Payee address City; State; Zip Code 16 Dudley Street \$29.00 Fitchburg, MA 01420 Reimbursement from political contributions intended (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Website Advertising Expense OF **EXPENDITURE** Date Pavee name Campaign Partners 11/10/2013 RRA Amount (\$) Payee address City; State; Zip Code 16 Dudley Street \$29.00 Fitchburg, MA 01420 Reimbursement from political contributions intended Schedule Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete **PURPOSE** Advertising Expense Website cr. OF **EXPENDITURE** Date Payee name 12/16/2013 Danwal, Inc. City; State; Zip Code Amount (\$) Payee address 12424 Hwy 155 South \$4,867.80 Tyler, TX 75703 Reimbursement from political contributions intended (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Purchase of printed signs/banners Printing Expense **EXPENDITURE** Date Payee name Northeast Tarrant County Republican Club 10/14/2013 City; State; Zip Code Payee address Amount (\$) 1111 S Main Street \$36.87 Suite 127 Reimbursement from political contributions intended Grapevine, TX 76051 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Booth rental **Event Expense** OF EXPENDITURE

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# 3 ACCOUNT # (TEC filers) 2 FILER NAME Walker, Carey (Mr.) Schedule: 2/3 Report: 33/34 4 Date 5 Payee name 11/21/2013 One-Stop Printing Payee address City; State; Zip Code Amount (\$) 611 University Drive \$59.54 Fort Worth, TX 76107 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complete Schedule T) 8 **PURPOSE** Printing Expense Resize push cards **EXPENDITURE** Date Payee name 11/27/2013 One-Stop Printing TARRA Payee address City; State; Zip Code Amount (\$) ECTIONS 611 University Drive Fort Worth, TX 76107 \$687.76 Reimbursement from political contributions intended Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Envelopes and letterhead **Printing Expense** EXPENDITURE Date Pavee name **TCGOP** 12/17/2013 Amount (\$) Payee address City; State; Zip Code 2405 Gravel Drive \$175.00 Fort Worth, TX 76118 Reimbursement from political contributions intended (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Event Expense Table at the Lincoln Day Dinner OF EXPENDITURE Payee name Date Texas Conservatives United PAC 12/20/2013 City; State; Zip Code Payee address Amount (\$) 1921 Stonehill Drive \$699.99 Fort Worth, TX 76247 Reimbursement from political contributions intended Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE Event Expense** Booth at event OF **EXPENDITURE**

1 a

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES 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

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

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1	PAGE #			2	FILER NAME				3	ACCOUNT #	(TEC filers)
S	chedule: 3/3 Re	epo	rt: 34/34		Walker, Carey (Mr.)						
4	Date	5	Payee name								
L	10/11/2013	L	Thomas Rub	be	r Stamp						
6	Amount (\$)	7	Payee address	S	City; State; Zip Code						
X	\$43.30 Reimbursement from political intributions intended	1	3521 Locke A Fort Worth,								
8	PURPOSE OF EXPENDITURE	_) Category (See Printing Expe		tegories listed at the top of this schedule))	(b) Description Badges	(If travel outside	of T	Fexas, complete So	chedule T)
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