

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 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>0</u> FIRST <u>Roberto</u> MI NICKNAME LAST <u>Canas</u> SUFFIX	<div style="text-align: center; border: 1px solid black; padding: 5px;"> OFFICE USE ONLY </div> <div style="border: 1px solid black; padding: 5px;"> Date Received <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> BY <u>[Signature]</u> COUNTY CLERK DALLAS COUNTY </div> <div style="text-align: center;"> 2018 FEB -5 PM 2:59 FILED </div> </div> Date Hand-delivered Date Postmarked Receipt # Amount \$ Date Processed Date Imaged </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>9540 Garland Rd Suite 381</u> <u>Dallas, TX 75218 #202</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 796-3674		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>0</u> FIRST <u>Laura</u> MI NICKNAME LAST <u>Benitez Geisler</u> SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>3811 Turtle Creek Blvd Suite 1400</u> <u>Dallas, TX 75219</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 504-3743		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <u>1 / 1 / 18</u> <u>2 / 4 / 18</u>		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <u>3 / 6 / 18</u> <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) <u>County Criminal Court #10 Dallas County.</u>	13 OFFICE SOUGHT (if known) <u>Same</u>	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME

Roberto Casas

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 200.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ ~~200.00~~ 10,225.50
9,125.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 231.06

4. TOTAL POLITICAL EXPENDITURES

\$ ~~6340.17~~ 6590.17

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 5988.53

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Roberto Casas, this the 5th day of February, 2018, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath



Printed name of officer administering oath: Patricia A Johnson
Title of officer administering oath: Notary Public

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 9125
2.	<input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1100.50
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6340.17
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 250
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

1 of 12

2 FILER NAME

Roberto Casas

3 Filer ID (Ethics Commission Filers)

4 Date

1/19/18

5 Full name of contributor out-of-state PAC ID#: _____

Martin LeNoir

7 Amount of contribution (\$)

\$500

6 Contributor address; City; State; Zip Code

3300 Oak Lawn D, TX 75219

8 Contributor's principal occupation

Lawyer

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

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

Date

1/19/18

Full name of contributor out-of-state PAC ID#: _____

General Drivers, Warehousemen & Helpers

Amount of contribution (\$)

\$1,000

Contributor address; City; State; Zip Code

1007 Jonelle St D, TX 75217

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

1/12/18

Full name of contributor out-of-state PAC ID#: _____

Doug Skemp

Amount of contribution (\$)

\$100

Contributor address; City; State; Zip Code

Po Box 824274 Dallas, TX 75238

Contributor's principal occupation

Judge

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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
2 of 12

2 FILER NAME

Roberto Casas

3 Filer ID (Ethics Commission Filers)

4 Date

1/13/18

5 Full name of contributor

out-of-state PAC ID#: _____

CPT DIANE BIRDWELL

7 Amount of contribution (\$)

\$2500

6 Contributor address;

City; State; Zip Code

5705 Meadowick Ln Dallas 75227

8 Contributor's principal occupation

military

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

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

Date

1/24/18

Full name of contributor

out-of-state PAC ID#: _____

Lisa Salas

Amount of contribution (\$)

\$10000

Contributor address;

City; State; Zip Code

4110 Kite Ln Marsfield TX 76063

Contributor's principal occupation

non-lawyer

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

1/20/18

Full name of contributor

out-of-state PAC ID#: _____

Rene Casas

Amount of contribution (\$)

\$500

Contributor address;

City; State; Zip Code

2421 Telluride Dr Flower Mound TX 75028

Contributor's principal occupation

physical therapist

Contributor's job title

Baylor

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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3 of 12

2 FILER NAME

Roberto Canas

3 Filer ID (Ethics Commission Filers)

4 Date

1/17/18

5 Full name of contributor out-of-state PAC ID#: _____

Edwin King

7 Amount of contribution (\$)

\$500⁰⁰

6 Contributor address; City; State; Zip Code

400 S. Zang Blvd suite 105 Dallas, TX 75208

8 Contributor's principal occupation

Lawyer

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

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

Date

1/23/18

Full name of contributor out-of-state PAC ID#: _____

James Jamison

Amount of contribution (\$)

\$200⁰⁰

Contributor address; City; State; Zip Code

529 W. 12th St Dallas, TX 75208

Contributor's principal occupation

Lawyer

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

1/25/18

Full name of contributor out-of-state PAC ID#: _____

Bob Cady

Amount of contribution (\$)

\$250

Contributor address; City; State; Zip Code

5018 Pershing St Dallas TX 75206

Contributor's principal occupation

Lawyer

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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

4 of 12

2 FILER NAME

Roberto Canas

3 Filer ID (Ethics Commission Filers)

4 Date

1/12/18

5 Full name of contributor out-of-state PAC ID#: _____

Bob Lenz

7 Amount of contribution (\$)

\$100⁰⁰

6 Contributor address; City; State; Zip Code

6060 N. Central Expy Suite 500 Dallas TX 75206

8 Contributor's principal occupation

Lawyer

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

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

Date

1/15/18

Full name of contributor out-of-state PAC ID#: _____

Dan Patterson

Amount of contribution (\$)

\$100

Contributor address; City; State; Zip Code

P.O. Box 595712 Dallas TX 75359

Contributor's principal occupation

Judge

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

1/24/18

Full name of contributor out-of-state PAC ID#: _____

Phillip Hayes

Amount of contribution (\$)

\$200⁰⁰

Contributor address; City; State; Zip Code

3712 Mockingbird Ln Dallas TX 75205

Contributor's principal occupation

Lawyer

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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

5 of 12

2 FILER NAME

Roberto Canas

3 Filer ID (Ethics Commission Filers)

4 Date

1/24/18

5 Full name of contributor

out-of-state PAC ID#: _____

Kevin Cihal

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City; State; Zip Code

185 Providence St. #A433 West Warwick RI 02893

8 Contributor's principal occupation

Store Manager

9 Contributor's job title

10 Contributor's employer/law firm

Gane Stop

11 Law firm of contributor's spouse (if any)

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

Date

1/24/18

Full name of contributor

out-of-state PAC ID#: _____

Jiroko Lopez

Amount of contribution (\$)

\$200.00

Contributor address;

City; State; Zip Code

P.O. Box 796844 Dallas TX 75379

Contributor's principal occupation

Lawyer

Contributor's job title

Contributor's employer/law firm

Schwankov Freshwater & Lopez PLLC

Law firm of contributor's spouse (if any)

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

Date

1/24/18

Full name of contributor

out-of-state PAC ID#: _____

Michael R. Snipes

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

101 S. Brookside #1804 Dallas TX 75214

Contributor's principal occupation

Asst Dist Atty

Contributor's job title

First Assistant

Contributor's employer/law firm

Dallas County

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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>6 of 12</i>
2 FILER NAME <i>Roberto Canas</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/23/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jennifer Castillo</i>	7 Amount of contribution (\$) <i>\$300⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>6934 Rocky Top Cir Dallas TX 75252</i>		
8 Contributor's principal occupation <i>Lawyer</i>		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>1/25/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Victor Corpuz</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>7323 Tophill Ln Dallas, TX 75248</i>		
Contributor's principal occupation <i>Lawyer</i>		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 <i>1/23/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Mike Goolsby</i>	Amount of contribution (\$) <i>\$250⁰⁰</i>
Contributor address; City; State; Zip Code <i>12200 Ford Rd Suite 210 Dallas TX 75234</i>		
Contributor's principal occupation <i>Lawyer</i>		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.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>7 of 12</i>
2 FILER NAME <i>Robert Canas</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/23/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jay Zuckerman</i>	7 Amount of contribution (\$) <i>\$100⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>2720 N. Stemmen Fry Suite 707 Dallas TX 75207</i>		
8 Contributor's principal occupation <i>Lawyer</i>		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>1/15/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Eric Puente</i>	Amount of contribution (\$) <i>\$200⁰⁰</i>
Contributor address; City; State; Zip Code <i>3300 Oak Lawn Ave Suite 401 Dallas TX 75219</i>		
Contributor's principal occupation Lawyer <i>Lawyer</i>		Contributor's job title
Contributor's employer/law firm <i>Puente; Hindrich & Fernandez</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>1/19/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jerry Alexander</i>	Amount of contribution (\$) <i>\$1000⁰⁰</i>
Contributor address; City; State; Zip Code <i>2500 Renaissance Tower Dallas TX 75270</i>		
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title
Contributor's employer/law firm <i>Passman & Jones</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>83 of 12</i>
2 FILER NAME <i>Roberto Canas</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>7/13/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Bruce Anton</i>	7 Amount of contribution (\$) <i>\$ 100</i>
6 Contributor address; City; State; Zip Code		
8 Contributor's principal occupation <i>Lawyer</i>	9 Contributor's job title	
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>11/13/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Melissa Kingston</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code		
Contributor's principal occupation <i>Lawyer</i>	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 <i>11/19/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>David Bradley</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code		
Contributor's principal occupation <i>Court clerk</i>	Contributor's job title	
Contributor's employer/law firm <i>Dallas County</i>	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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>9 of 12</i>
2 FILER NAME <i>Roberto Canas</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/20/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>James White</i>	7 Amount of contribution (\$) <i>\$100</i>
6 Contributor address; City; State; Zip Code		
8 Contributor's principal occupation <i>retired</i>		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>1/22/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ricardo Binilla</i>	Amount of contribution (\$) <i>\$150</i>
Contributor address; City; State; Zip Code		
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 <i>1/24/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Terry Barker</i>	Amount of contribution (\$) <i>\$500</i>
Contributor address; City; State; Zip Code <i>Coppell TX</i>		
Contributor's principal occupation <i>retired</i>		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)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>10 of 12</i>
2 FILER NAME <i>Roberto Caras</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/24/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Laura Geisler</i>	7 Amount of contribution (\$) <i>\$ 200</i>
6 Contributor address; City; State; Zip Code <i>Dallas, TX</i>		
8 Contributor's principal occupation <i>Lawyer</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>self employed</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>1/24/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Anna Rypani</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code		
Contributor's principal occupation <i>Lawyer</i>		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 <i>1/25/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jonathan Childers</i>	Amount of contribution (\$) <i>\$150</i>
Contributor address; City; State; Zip Code		
Contributor's principal occupation <i>Lawyer</i>		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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

11 of 12

2 FILER NAME

Roberto Canis

3 Filer ID (Ethics Commission Filers)

4 Date

1/26/18

5 Full name of contributor out-of-state PAC ID#: _____

Joshua Abrams

7 Amount of contribution (\$)

\$200.00

6 Contributor address; City; State; Zip Code

8 Contributor's principal occupation

Lawyer

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

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

Date

1/30/18

Full name of contributor out-of-state PAC ID#: _____

Jim Braham

Amount of contribution (\$)

\$500

Contributor address; City; State; Zip Code

Contributor's principal occupation

Lawyer

Contributor's job title

Contributor's employer/law firm

self employed

Law firm of contributor's spouse (if any)

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

Date

2/3/18

Full name of contributor out-of-state PAC ID#: _____

Natalie Nanasi

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

Contributor's principal occupation

Professor

Contributor's job title

Contributor's employer/law firm

SMU School of Law

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.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>12 of 12</i>
2 FILER NAME <i>Roberto Canas</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/4/18</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>A. Adam Seidel</i>	7 Amount of contribution (\$) <i>\$150.00</i>
6 Contributor address; City; State; Zip Code		
8 Contributor's principal occupation <i>Lawyer</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>self employed</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
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)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Roberto Canas</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ <i>1100.5</i>	
5 Date <i>1/24/18</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andrew Jee</i>	8 Amount of Contribution \$ <i>537.60</i>	9 In-kind contribution description <i>Event Expense</i>
7 Contributor address; City; State; Zip Code <i>Dallas TX</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>Lawyer</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) <i>self employed</i>		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>1/24/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kristi Kastl</i>	Amount of Contribution \$ <i>562.90</i>	In-kind contribution description <i>Event Expense</i>
Contributor address; City; State; Zip Code <i>Dallas TX</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>Lawyer</i>		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL) <i>self employed</i>		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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 MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 4	2 FILER NAME Roberto Canas	3 Filer ID (Ethics Commission Filers)
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4 Date 1/29/18	5 Payee name Caldwell Creative
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6 Amount (\$) 584.64	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting/Ads	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/29/18	Payee name Reilly Echols Printy
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Amount (\$) \$5000 ⁰⁰	Payee address; City; State; Zip Code PO Box 152358 Horwood, Dallas TX 75315
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/2/18	Payee name Reuben Lael
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Amount (\$) \$450 ⁰⁰	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulty Ads	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F1: 2 of 4	2 FILER NAME Roberto Casas	3 Filer ID (Ethics Commission Filers)
4 Date 11/2/18	5 Payee name UPS STORE	
6 Amount (\$) \$135	7 Payee address; City; State; Zip Code 9540 Garland Rd Suite #381 Dallas TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) mail box	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 11/5/18	Payee name Reilly Echol Printing Inc	
Amount (\$) \$1,391.01	Payee address; City; State; Zip Code PO Box 152358 Harwood Dallas, TX 75315	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ads/printing	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date 11/11/18	Payee name Dallas County East Democrats	
Amount (\$) \$78 ⁰⁰	Payee address; City; State; Zip Code 1318 Rancho Dr Mesquite TX 75149	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/ Ads/Event	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 4	2 FILER NAME Roberts Canas	3 Filer ID (Ethics Commission Filers)
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4 Date 12/27/18	5 Payee name Democracy Toolbox
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6 Amount (\$) \$2500	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/18/17	Payee name D4BA
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Amount (\$) \$250	Payee address; City; State; Zip Code 2101 Ross Ave Dallas, TX 75201
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/25/18	Payee name Interdenominational Minister's Alliance
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Amount (\$) \$61.98	Payee address; City; State; Zip Code PO Box 41139 Dallas, TX 75241
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ticket to Event	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4.04	2 FILER NAME Roberto Cana	3 Filer ID (Ethics Commission Filers)
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4 Date 11-25-18	5 Payee name Edwards & Patterson
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6 Amount (\$) \$1108.48	7 Payee address; City; State; Zip Code 4733 Dan Dr Dallas TX 75247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ads/Sign,	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1 of 1	2 FILER NAME Roberto Canas	3 Filer ID (Ethics Commission Filers)
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4 Date 1/24/18	5 Payee name Progressive Voters League
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6 Amount (\$) 250 ⁰⁰	7 Payee address; City; State; Zip Code POB 398647 Dallas TX 75339		
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Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code		
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Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code		
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Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED