

Vickers L. Cunningham, Sr.
Attorney at Law
Retired Judge, 283rd District Court
6301 Gaston Ave Ste 210
Dallas, TX 75214

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Monday, May 14, 2018

Campaign Finance Filing Coordinator
Dallas County Elections Department
2377 N. Stemmons Frwy Ste 820
Dallas, TX 75207-2706

Re: Filing of Campaign Finance Report

To whom it may concern,

Please find enclosed Campaign Finance Report for the Dallas County Commissioner,
District 2 account.

Your attention to this matter is greatly appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read "Vic C", followed by a horizontal line.

Vickers L. Cunningham, Sr.
enclosure

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/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 FIRST MI <p style="text-align: center; font-size: 1.2em;">VICKERS L.</p> <hr style="border-top: 1px dotted black;"/> NICKNAME LAST SUFFIX <p style="text-align: center; font-size: 1.2em;">CUNNINGHAM</p>	OFFICE USE ONLY <hr/> Date Received <p style="text-align: center; font-size: 1.1em; color: gray;">COUNTY ELECTIONS</p> <p style="text-align: center; font-size: 1.1em; color: gray;">2018 MAY 17 02:03 PM</p> <p style="text-align: center; font-size: 1.1em; color: gray;">RECEIVED DALLAS</p> <hr/> Date Hand-delivered or Date Postmarked <hr/> Receipt # Amount \$ <hr/> Date Processed <hr/> Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <p style="text-align: center; font-size: 1.2em;">6301 GASTON AVE STE 210</p> <p style="text-align: center; font-size: 1.2em;">DALLAS, TX 75214</p>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 445-5100		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <p style="text-align: center; font-size: 1.2em;">MRS. DEANDRA M.</p> <hr style="border-top: 1px dotted black;"/> NICKNAME LAST SUFFIX <p style="text-align: center; font-size: 1.2em;">GRANT</p>		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <p style="text-align: center; font-size: 1.2em;">800 E CAMPBELL RD STE 110</p> <p style="text-align: center; font-size: 1.2em;">RICHARDSON, TX 75081</p>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 943-8500		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input checked="" 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 Month Day Year <p style="text-align: center; font-size: 1.2em; color: blue;">4 / 25 / 2018 THROUGH 5 / 13 / 2018</p>		
11 ELECTION	ELECTION DATE Month Day Year <p style="text-align: center; font-size: 1.2em; color: blue;">5 / 22 / 2018</p>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <p style="text-align: center; font-size: 1.2em; color: blue;">DALLAS COUNTY COMMISSIONER DISTRICT 2</p>	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

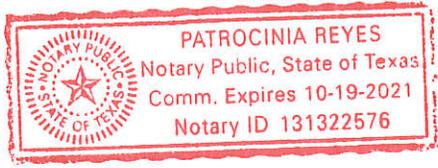
FORM C/OH
COVER SHEET PG 2

14 C/OH NAME VICKERS L. CUNNINGHAM	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,500.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 59.21
	4. TOTAL POLITICAL EXPENDITURES	\$ 47,230.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ - 0 -
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 90,000.00

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Vickers L. Cunningham this the 14th day of May, 2018, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Patrocina Reyes

Printed name of officer administering oath

Notary

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME VICKERS L. CUNNINGHAM		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>5,500.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>90,000.00</i>
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>47,230.73</i>
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1 OF 4

2 FILER NAME

VICKERS L. CUNNINGHAM

3 Filer ID (Ethics Commission Filers)

4 Date

4/26/18

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

DARREN BORZUFF

7 Amount of contribution (\$)

100⁰⁰

6 Contributor address; City; State; Zip Code

6445 LAKE CIRCLE DR
DALLAS TX 75214

8 Principal occupation / Job title (See Instructions)

CEO

9 Employer (See Instructions)

PEPPY ICE, INC

Date

4/27/18

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

LEON CARTER

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

8150 N. CENTRAL EXPY STE 500
DALLAS TX 75206

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

CARTER SCHOLER, PLLC

Date

4/27/18

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

STEVEN COTTON

Amount of contribution (\$)

100⁰⁰

Contributor address; City; State; Zip Code

13601 PRESTON RD STE 620 E
DALLAS TX 75240

Principal occupation / Job title (See Instructions)

MANAGING PARTNER

Employer (See Instructions)

COTTON-ADAMS FINANCIAL GROUP

Date

4/27/18

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

KENNETH WINCORN

Amount of contribution (\$)

150⁰⁰

Contributor address; City; State; Zip Code

100 N. CENTRAL EXPY STE 1310
RICHARDSON TX 75081

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

SELF

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 of 4

2 FILER NAME

VICKERS L. CUNNINGHAM

3 Filer ID (Ethics Commission Filers)

4 Date

4/30/18

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

DOROTHY SINGHAL

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

14678 WINNWOOD RD
DALLAS TX 75248

8 Principal occupation / Job title (See Instructions)

ACCOUNTANT / CPA

9 Employer (See Instructions)

SELF

Date

4/30/18

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

TERRY CONNER

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

7110 LAKEWOOD
DALLAS TX 75214

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

4/30/18

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

JERRY ALEXANDER

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

2500 RENAISSANCE TOWER
DALLAS TX 75270

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

PASSMAN & JONES, P.C.

Date

4/30/18

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

ELIZABETH TURNER

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

12030 TAUFEL CIR.
DALLAS TX 75230

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 4

2 FILER NAME

VICKERS L. CUNNINGHAM

3 Filer ID (Ethics Commission Filers)

4 Date

4/30/18

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

JOHN V. CARONA

6 Contributor address; City; State; Zip Code

5401 N CENTRAL EXPY STE 300
DALLAS TX 75205

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/30/18

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

ASSOCIA PAC

Contributor address; City; State; Zip Code

5401 N CENTRAL EXPY STE 300
DALLAS TX 75205

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/1/18

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

ROY BAILEY

Contributor address; City; State; Zip Code

5956 SHERIDAN LN STE 800
DALLAS TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

INVESTOR

Employer (See Instructions)

BAILEY DEASON CAPITAL

Date

5/2/18

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

JANE WHITAKER

Contributor address; City; State; Zip Code

6405 MALCOLM CT
DALLAS TX 75214

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

DALLAS COUNTY

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 4

2 FILER NAME

VICKERS L. CUNNINGHAM

3 Filer ID (Ethics Commission Filers)

4 Date

5/8/18

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

Don TITTLE

7 Amount of contribution (\$)

200.00

6 Contributor address; City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

ATTORNEY

9 Employer (See Instructions)

SELF

Date

5/13/18

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

LARRY FRENCH

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4900 CENTRE CT
GRANBURY TX 76049

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1 of 1
2 FILER NAME VICKERS L. CUNNINGHAM		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ — 0 —
5 Date of loan 12/27/2017	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) GREG CUNNINGHAM	9 Loan Amount (\$) 50,000.00
6 Is lender a financial Institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code 1111 FLOYD CIR RICHARDSON TX 75080	10 Interest rate 0%
		11 Maturity date 12/31/2018
12 Principal occupation / Job title (See Instructions) REAL ESTATE		13 Employer (See Instructions) SELF
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan 4/26/2017	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) VICKERS CUNNINGHAM	Loan Amount (\$) 40,000.00
Is lender a financial Institution? Y <input checked="" type="radio"/> N	Lender address; City; State; Zip Code 6301 GASTON AVE STE 210 DALLAS TX 75214	Interest rate 0%
		Maturity date 12/31/2018
Principal occupation / Job title (See Instructions) ATTORNEY / INSURANCE		Employer (See Instructions) SELF
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender 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
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME VICKERS L. CUNNINGHAM	3 Filer ID (Ethics Commission Filers)
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4 Date 4/27/18	5 Payee name GRAPHICS MANAGEMENT
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6 Amount (\$) 40,454.24	7 Payee address; City; State; Zip Code 9322 MOSS TRL DALLAS TX 75231
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONSULTANT FEES PHONE BANK PRINTING - POSTAGE	(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 4/30/18	Payee name STRATEGY FIRST TECHNOLOGIES
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Amount (\$) 6,836.00	Payee address; City; State; Zip Code 11608 ROSSIEL RD DALLAS TX 75229
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONSULTING FEES YARD SIGNS	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