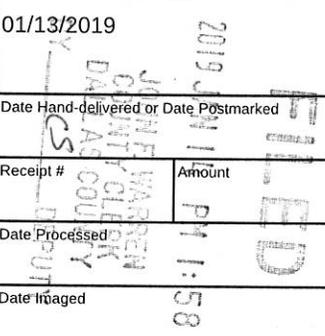


# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00058245	<b>2 Total pages filed:</b>  20				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>			
	The Honorable	Jeanine L.					
	NICKNAME	LAST	SUFFIX	Date Received ELECTRONICALLY FILED 01/13/2019			
		Howard					
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE				
	Frank Crowley Courts Bldg.						
	133 N. Riverfront Blvd., LB-11						
	Dallas, TX 75207-4300						
	Date Hand-delivered or Date Postmarked	Receipt #		Amount			
	Date Processed	Date Imaged					
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR	FIRST	MI				
	Mr.	Samuel S.					
	NICKNAME	LAST	SUFFIX				
		Howard					
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	3549 Villanova						
	Dallas, TX 75225						
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	360-0637					
<b>8 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9 PERIOD COVERED</b>	Month	Day	Year	Month	Day	Year	
	07	01	2018	THROUGH	12	31	2018
<b>10 ELECTION</b>	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	11	06	2018	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
<b>11 OFFICE</b>	OFFICE HELD (if any)			<b>12 OFFICE SOUGHT (if known)</b>			
	Criminal District Court Judge District 6 Dallas			Criminal District Court Judge District 6			

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 20

**13 C / OH NAME** Howard, Jeanine L. (The Honorable) **14 Filer ID** (Ethics Commission Filers)  
00058245

**15 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.

Additional Pages

<b>COMMITTEE TYPE</b> <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
	<b>COMMITTEE ADDRESS</b>
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,850.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 8,755.05
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,000.00

**17 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.

The Honorable Jeanine L. Howard

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - JC/OH**

<b>18 FILER NAME</b> Howard, Jeanine L. (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00058245
------------------------------------------------------------	-----------------------------------------------------------

<b>20 SCHEDULE SUBTOTALS</b>		
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 7,850.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
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 FROM POLITICAL CONTRIBUTIONS		\$ 7,506.20
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 949.32
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 299.53
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 07/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bakker, Jens	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 9616 Tarleton  Dallas, TX 75218		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behgooy, Meredith	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 325 N. St.Paul St. Suite 2100 Dallas, TX 75201		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birdsall, Clark	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 9110 Scyene Rd.  Dallas, TX 75227		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/20
2 FILER NAME Howard, Jeanine L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00058245
4 Date 07/10/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brauchle, Paul	7 Amount of Contribution (\$)  \$300.00
	6 Contributor address; City; State; Zip Code 6574 Lange Circle  Dallas, TX 75214	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox III, Thomas (Mr.)	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 3713 Purdue  Dallas, TX 75225-7209	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox III, William (Mr.)	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 9304 Locarno  Dallas, TX 75243	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 07/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Elaine	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>6</b> Contributor address; City; State; Zip Code 3212 Marquette St.  Dallas, TX 75225		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fishburn, Allan	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 211 N. Record Suite 450 Dallas, TX 75202		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, David	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 13214 Glad Acres Drive  Farmers Branch, TX 75234		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 07/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Heath	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code 1910 Pacific Ave. Suite 15100 Dallas, TX 75201		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Terry (Ms.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 807 N. Oak Cliff Blvd.  Dallas, TX 75208		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/28/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram Sr., Willie (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1801 N. Hampton Rd. Suite 430 De Soto, TX 75115		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 07/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, William E. (Mr.)	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>6</b> Contributor address; City; State; Zip Code 3300 Oak Lawn No. 600 Dallas, TX 75219		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Davey (Mr.)	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 6539 Sunnyland Lane  Dallas, TX 75214		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenoir, Martin (Mr.)	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 3300 Oak Lawn Suite 600 Dallas, TX 75219		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

**The Instruction Guide explains how to complete this form.** 1 Total pages Schedule A(J)1:  
Sch: 6/9 Rpt: 9/20

2 FILER NAME  
Howard, Jeanine L. (The Honorable) 3 Filer ID (Ethics Commission Filers)  
00058245

4 Date 07/10/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maduka, Charles (Mr.)	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code 3917 W. Sublett Road  Arlington, TX 76017	

8 Contributor's Principal Occupation Attorney	9 Contributor's Job Title Attorney
--------------------------------------------------	---------------------------------------

10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any) n/a
--------------------------------------------	-----------------------------------------------------

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

Date 07/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maedgen, B. Ward	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code 6688 N. Central Expressway Suite 1000 Dallas, TX 75206-3900	

Contributor's Principal Occupation Attorney	Contributor's Job Title Attorney
------------------------------------------------	-------------------------------------

Contributor's employer/law firm Self	Law firm of contributor's spouse (if any) n/a
-----------------------------------------	--------------------------------------------------

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

Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milner III, George	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code 2828 N. Harwood St. Suite 1950 Dallas, TX 75201	

Contributor's Principal Occupation Attorney	Contributor's Job Title Attorney
------------------------------------------------	-------------------------------------

Contributor's employer/law firm Self	Law firm of contributor's spouse (if any) n/a
-----------------------------------------	--------------------------------------------------

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 07/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Read II, John	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code 900 N. Zang Blvd.  Dallas, TX 75208		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Wes	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6116 N. Central Expressway Suite500 Dallas, TX 75206-5131		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Craig	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code P.O. Box 29383  Dallas, TX 75229-0383		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 08/08/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schopmeyer, Douglas (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code P. O. Box 181383  Dallas, TX 75218	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spears, Edward <hr/> Contributor address; City; State; Zip Code 5729 Lebanon Rd. Suite 144 Frisco, TX 75034	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jose (Mr.) <hr/> Contributor address; City; State; Zip Code 1700 Alma Drive Suite 160 Plano, TX 75075	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/20
<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 12/10/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Sakinna	<b>7</b> Amount of Contribution (\$)  \$300.00
	<b>6</b> Contributor address; City; State; Zip Code 3101 Cortez Ct. E  Irving, TX 75062-8601	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 07/10/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Janet (Mrs.)	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b> 1612 Rio Vista Dr.  Dallas, TX 75208	
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b> Attorney
<b>Contributor's employer/law firm</b> Self		<b>Law firm of contributor's spouse (if any)</b> n/a
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 07/09/2018	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherspoon, Kenneth	<b>Amount of Contribution (\$)</b>  \$250.00
	<b>Contributor address; City; State; Zip Code</b> 325 N. St. Paul St. Suite 2475 Dallas, TX 75201	
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b> Attorney
<b>Contributor's employer/law firm</b> Self		<b>Law firm of contributor's spouse (if any)</b> n/a
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### 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 F1: Sch: 1/2 Rpt: 13/20		2 FILER NAME Howard, Jeanine L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00058245	
4 Date 07/06/2018		5 Payee name CVS Pharmacy			
6 Amount (\$) \$9.07		7 Payee address; City; State; Zip Code 6709 Preston Road  Dallas, TX 75225			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Thank you cards for staff that helped with fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/01/2018		Payee name Howard, Jeanine (Judge)			
Amount (\$) \$4,485.13		Payee address; City; State; Zip Code Frank Crowley Courts Bldg. 133 N. Riverfront Blvd., LB-11 Dallas, TX 75207			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial reimbursement for prior year political expenses from personal funds	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/22/2018		Payee name Hoy, Natasha			
Amount (\$) \$3,000.00		Payee address; City; State; Zip Code 320 S. R.L. Thornton Freeway Suite 300 Dallas, TX 75203-1842			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attorney's fees for appeal of civil case that was dismissed	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES 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.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 14/20	<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00058245
<b>4</b> Date 09/01/2018	<b>5</b> Payee name Wells Fargo Bank	
<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code P. O. Box 6995  Portland, OR 97228-6995	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checking account fees
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Candidate/Officeholder name _____ Office sought _____ Office held _____		

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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.

<b>1</b> Total pages Schedule F4: Sch: 1/2 Rpt: 15/20	<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00058245
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 07/10/2018	<b>6</b> Payee name Babb Bros. BBQ & Blues
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<b>7</b> Amount (\$) \$561.50	<b>8</b> Payee address; City; State; Zip Code 3015 Gulden Lane  Dallas, TX 75212
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser expense
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>5</b> Date 12/18/2018	<b>6</b> Payee name EIG - Constant Contact
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<b>7</b> Amount (\$) \$287.82	<b>8</b> Payee address; City; State; Zip Code 10 Corporate Drive  Burlington, MA 01803
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense On-line marketing
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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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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F4: Sch: 2/2 Rpt: 16/20	2 FILER NAME Howard, Jeanine L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00058245
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 07/09/2018	6 Payee name North Dallas Texas Democratic Women
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7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 17201 Hidden Glen Drive  Dallas, TX 75248
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to help with expense of NTDW Summer Retreat
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES 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: Sch: 1/3 Rpt: 17/20	2 FILER NAME Howard, Jeanine L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00058245
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4 Date 07/19/2018	5 Payee name Beto & Son Next Gen Mexican at Trinity Groves
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6 Amount (\$) \$78.81 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3011 Gulden Lane Suite #108 Dallas, TX 75202
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Took court probation officers to lunch for Probation Appreciation Week
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2018	Payee name Flying Fish Restaurant
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Amount (\$) \$28.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1838 Irving Blvd. Dallas, TX 75207
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with court reporter
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2018	Payee name Flying Fish Restaurant
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Amount (\$) \$29.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1838 Irving Blvd. Dallas, TX 75207
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with First Friday Program assistant
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES 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: Sch: 2/3 Rpt: 18/20		2 FILER NAME Howard, Jeanine L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00058245	
4 Date 08/07/2018		5 Payee name J. D.'s Chippery			
6 Amount (\$) \$9.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 6601 Hillcrest Ave.  Dallas, TX 75225			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Birthday gift for court officer	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/28/2018		Payee name The Green & Green Company			
Amount (\$) \$50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 350 N. St. Paul St. #2105 Dallas, TX 75201			
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 Ticket to the MLK Legacy Awards Luncheon	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/07/2018		Payee name Tom Thumb			
Amount (\$) \$34.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 4001 Villanova  Dallas, TX 75225			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee supplies and snacks for jury	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES 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.

<b>1</b> Total pages Schedule G: Sch: 3/3 Rpt: 19/20	<b>2</b> FILER NAME Howard, Jeanine L. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00058245
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<b>4</b> Date 11/16/2018	<b>5</b> Payee name Tom Thumb
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<b>6</b> Amount (\$) \$50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 7167 Inwood Rd.  Dallas, TX 75209
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2 gift cards (\$25 each) for awards at Thanksgiving luncheon
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/06/2018	Payee name Walgreens
--------------------	-------------------------

Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6707 W Northwest Hwy  Dallas, TX 75225
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<b>PURPOSE OF EXPENDITURE</b>	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 Stamps for thank-you notes after fundraiser
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:  
Sch: 1/1 Rpt: 20/20

2 FILER NAME

Howard, Jeanine L. (The Honorable)

3 Filer ID (Ethics Commission Filers)  
00058245

LENDER  
INFORMATION

4 Name of lender  
Howard, Jeanine

5 Lender address; City; State; Zip Code  
3549 Villanova St.  
  
Dallas, TX 75225

GUARANTOR  
INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code