

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME _____ 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.

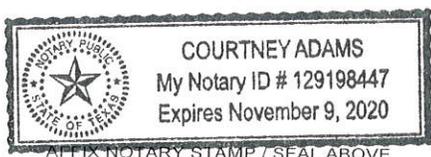
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7902.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,519.27
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT

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



Audrey Moorehead

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Audrey Moorehead, this the Feb. day of 5, 2018, to certify which, witness my hand and seal of office.

[Signature] _____
Signature of officer administering oath

Courtney Adams
Printed name of officer administering oath

Notary
Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME <i>Audrey Moorehead</i>	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)	\$ <i>6,750.00</i>
2. <input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>1,152.50</i>
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ <i>0</i>
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ <i>3000.00</i>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>19,637.13</i>
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0</i>
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0</i>
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>882.14</i>
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0</i>
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

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**

2 FILER NAME *Audrey Moorehead*

3 Filer ID (Ethics Commission Filers)

4 Date
12/06
2017

5 Full name of contributor *Robert C Wilmoth* out-of-state PACID#: _____
Contributor address; City; State; Zip Code
9660 Renaissance Tower Dallas, TX 75270

7 Amount of contribution (\$)
100.00

8 Contributor's principal occupation
Attorney

9 Contributor's job title
Attorney

10 Contributor's employer/law firm
Farrow, Gillespie and Heath

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

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

Date
12/20
2017

Full name of contributor *T. Christopher Lewis* out-of-state PACID#: _____
Contributor address; City; State; Zip Code
222 Continental Ave #125 Dallas, TX 75207

Amount of contribution (\$)
100.00

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer/law firm
Law Office of T. Christopher Lewis, PC.

Law firm of contributor's spouse (if any)

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

Date
01/15
2018

Full name of contributor *Demetrius Sampson* out-of-state PACID#: _____
Contributor address; City; State; Zip Code
P.O. Box 2252 Dallas, TX 75221

Amount of contribution (\$)
500.00

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer/law firm
Retired

Law firm of contributor's spouse (if any)

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

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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/16
2018

5 Full name of contributor out-of-state PACID#: _____
Miriam L. Ackels

Contributor address; City; State; Zip Code
3030 LBJ Freeway Dallas, TX 75234

7 Amount of contribution (\$)

200.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Ackels and Ackels

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

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

Date

01/16
2018

Full name of contributor out-of-state PACID#: _____

Terry Yvonne Smith

Contributor address; City; State; Zip Code
1246 Essex Drive Dallas, TX 75115

Amount of contribution (\$)

100 -

Contributor's principal occupation

Realtor

Contributor's job title

Realtor

Contributor's employer/law firm

Century 21

Law firm of contributor's spouse (if any)

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

Date

01/17
2018

Full name of contributor out-of-state PACID#: _____

Lisa McKnight

Contributor address; City; State; Zip Code
4807 Gaston Avenue Dallas TX 75246

Amount of contribution (\$)

500.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Lisa E McKnight, PC.

Law firm of contributor's spouse (if any)

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

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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/17
2018

5 Full name of contributor out-of-state PACID#: _____)

Winifred Cannon

Contributor address; City; State; Zip Code
325 North Saint Paul Dallas, TX 75201

7 Amount of contribution (\$)

25.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Cannon Law Group, PLLC

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

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

Date

01/17
2018

Full name of contributor out-of-state PACID#: _____)

Jana Paul

Contributor address; City; State; Zip Code

3429 Cornell Avenue Dallas, TX 75205

Amount of contribution (\$)

200.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

HANCE Law Group

Law firm of contributor's spouse (if any)

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

Date

01/18
2018

Full name of contributor out-of-state PACID#: _____)

Leigh Bailey

Contributor address; City; State; Zip Code
4333 Druid Lane Dallas TX 75205

Amount of contribution (\$)

250.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Gigi's Cupcakes

Law firm of contributor's spouse (if any)

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

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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/18
2018

5 Full name of contributor

Jerry Alexander

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

2500 Renaissance Dallas, TX 75270

7 Amount of contribution (\$)

1000.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Passman and Jones

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

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

Date

01/19
2018

Full name of contributor

Susan M. Bradley

out-of-state PACID#: _____

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

100.00

Contributor's principal occupation

Accounting

Contributor's job title

Accounting Clerk

Contributor's employer/law firm

Dallas Morning News

Law firm of contributor's spouse (if any)

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

Date

01/19
2018

Full name of contributor

Marquis Farmer

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

400 South Zang Blvd Ste 300

Amount of contribution (\$)

500.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

The Farmer Law Group

Law firm of contributor's spouse (if any)

**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 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date 01/20 2018	5 Full name of contributor Bobby Mims Contributor address; City; State; Zip Code 216 West Erwin Street Ste 300A Tyler TX 75702 out-of-state PACID#: _____	7 Amount of contribution (\$) 250.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Bobby D Mims PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/22 2018	Full name of contributor Andrew Jones Contributor address; City; State; Zip Code 6116 N Central Expy Ste 1400 Dallas, TX 75206 out-of-state PACID#: _____	Amount of contribution (\$) 25.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Sawicki Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/23 2018	Full name of contributor Paul Wingo Contributor address; City; State; Zip Code 325 North Saint Paul St Ste 3300 Dallas, TX 75201 out-of-state PACID#: _____	Amount of contribution (\$) 250.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Hamilton and Wingo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/23
2018

5 Full name of contributor

Kathleen Kearney

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

2655 Villa Creek Drive Ste 204 Dallas, TX 75234

7 Amount of contribution (\$)

100.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Lenahan Law, PLLC

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

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

Date

01/24
2018

Full name of contributor

John K Horany

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

3400 Carlisle Street Ste 300 Dallas, TX 75204

Amount of contribution (\$)

250.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

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

01/24
2018

Full name of contributor

Jeff Strater

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

3025 Bryan Street Ste 3D Dallas, TX 75204

Amount of contribution (\$)

100.00

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)

**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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date
01/24/
2018

6 Full name of contributor out-of-state PACID#: _____
Paula Jean Miller
Contributor address; City; State; Zip Code
4925 Greenville Ave Ste 200 Dallas, TX 75206

7 Amount of contribution (\$)
100.00

8 Contributor's principal occupation
Attorney

9 Contributor's job title
Attorney

10 Contributor's employer/law firm
Paula J Miller Attorney & Counselor at Law

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

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

Date
01/24
2018

Full name of contributor out-of-state PACID#: _____
Ebony Rivon
Contributor address; City; State; Zip Code
2214 Main Street Dallas, TX 75201

Amount of contribution (\$)
100.00

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer/law firm
Rivon Law Group

Law firm of contributor's spouse (if any)

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

Date
01/24
2018

Full name of contributor out-of-state PACID#: _____
William F. Krause
Contributor address; City; State; Zip Code
212 W Spring Valley Rd Richardson, TX 75081

Amount of contribution (\$)
100.00

Contributor's principal occupation
Attorney

Contributor's job title
Attorney

Contributor's employer/law firm
Self Employed

Law firm of contributor's spouse (if any)

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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/24
2018

7 Full name of contributor out-of-state PACID#: _____)

Sharita Blacknall

Contributor address; City; State; Zip Code

3131 McKinney Ave Ste 600 Dallas, TX 75204

7 Amount of contribution (\$)

100.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

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

01/24
2018

Full name of contributor out-of-state PACID#: _____)

Pamela Boleware

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

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

01/24
2018

Full name of contributor out-of-state PACID#: _____)

Charms Guillory

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

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)

**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 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date 01/31 2018	8 Full name of contributor out-of-state PACID#: _____ Danyale Holland Contributor address; City; State; Zip Code 329 Centre St Dallas, TX 75208	7 Amount of contribution (\$) 250.00
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Holland Martin, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/04 2018	Full name of contributor out-of-state PACID#: _____ Brandy Fine Contributor address; City; State; Zip Code 12801 North Central Expressway Ste 565 Dallas, TX 75243	Amount of contribution (\$) 150.00
Contributor's principal occupation Client Concierge		Contributor's job title Client Concierge
Contributor's employer/law firm Alexandra Geczi, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/06 2018	Full name of contributor out-of-state PACID#: _____ Dorothy Ocker Contributor address; City; State; Zip Code 1609 Marsh Lane Ste 109 Carrollton, TX 75006	Amount of contribution (\$) 100.00
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Ocker Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/12
2018

5 Full name of contributor

Jim Burnham

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

6116 N. Central Expressway Ste 515 Dallas, TX 75206

7 Amount of contribution (\$)

350.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Jim Burnham Law Offices

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

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

Date

01/15
2018

Full name of contributor

Victor Vital

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

2100 McKinney Ave Ste 1250 Dallas, TX 75207

Amount of contribution (\$)

250.00

Contributor's principal occupation

Attorney

Contributor's job title

Partner

Contributor's employer/law firm

Berns and Thornburg, LLP

Law firm of contributor's spouse (if any)

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

Date

01/16
2018

Full name of contributor

Jenny L. Womack

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

5050 Quorum Drive Dallas, TX 75254

Amount of contribution (\$)

50.00

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Jenny L. Womack, PC

Law firm of contributor's spouse (if any)

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 11

2 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 Date

01/28
2018

5 Full name of contributor

Kenneth Chism

out-of-state PACID#: _____

Contributor address; City; State; Zip Code

430 Blue Ridge Drive Duncanville, TX 75137

7 Amount of contribution (\$)

300.00

8 Contributor's principal occupation

Bank Executive

9 Contributor's job title

SVP

10 Contributor's employer/law firm

Bank of America

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

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

Date

01/31
2018

Full name of contributor

Jennifer Graves

out-of-state PACID#: _____

Contributor address;

5103 Nichols

City; State; Zip Code

Houston, TX 77020

Amount of contribution (\$)

100.00

Contributor's principal occupation

Non-Profit Administrator

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

01/31
2018

Full name of contributor

Dennis Coleman

out-of-state PACID#: _____

Contributor address;

4201 Lomo Alto

City; State; Zip Code

Dallas, TX 75219

Amount of contribution (\$)

100.00

Contributor's principal occupation

Development Director

Contributor's job title

Development Director

Contributor's employer/law firm

Paul Quinn College

Law firm of contributor's spouse (if any)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **2**

2 FILER NAME **Audrey Moorehead**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ **1,152.50**

5 Date 1/24/18	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristina Kastl	8 Amount of Contribution \$ 562.90	9 In-kind contribution description Event Sponsor
7 Contributor address; City; State; Zip Code 1444 N. Central Dallas TX 75201		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL) Attorney	13 Contributor's job title (FOR JUDICIAL) (See Instructions) Owner Law Firm
14 Contributor's employer/law firm (FOR JUDICIAL) Kastl Law PC	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 1/24/18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew Jee	Amount of Contribution \$ 537.60	In-kind contribution description Event Sponsor
Contributor address; City; State; Zip Code 3811 Turtle Creek Dallas TX 75219		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NON-JUDICIAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL) Attorney	Contributor's job title (FOR JUDICIAL) (See Instructions) Attorney
Contributor's employer/law firm (FOR JUDICIAL) Jee Law Firm	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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

292

2 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$.

5 Date

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

Michelle May O'Neil #150

7 Contributor address; City; State; Zip Code

5323 Spring Valley Rd 75254

8 Amount of Contribution \$

9 In-kind contribution description

50.00 Food/Bev.

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL)(See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

Attorney

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

Partner

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

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

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

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.

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

1

2 FILER NAME

Audrey Moorehead

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 3,000.00

5 Date of loan

1/29/18

7 Name of lender

out-of-state PAC (ID#: _____)

Audrey Moorehead

9 Loan Amount (\$)

3,000.00

6 Is lender a financial Institution?

Y N

8 Lender address;

City;

State;

Zip Code

3102 maple Ave Dallas TX
75201

10 Interest rate

11 Maturity date

12 Lender's Principal Occupation

13 Lender's Job Title

14 Lender's Employer/Law Firm

15 Law Firm of lender's spouse (if any)

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

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address;

City;

State;

Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

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

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 | 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 2 FILER NAME Audrey Moorehead 3 Filer ID (Ethics Commission Filers)

4 Date 1/22/18 5 Payee name Keilly Echols

6 Amount (\$) 346.40 7 Payee address; City; State; Zip Code P.O. Box 152358 Dallas TX 75315

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)	(b) Description
<u>Printing Expense</u>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 1/14/18 Payee name Mt Hebron

Amount (\$) 50- Payee address; City; State; Zip Code 1233 Hwy 66 Garland, TX 75040

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Other</u>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 1/17/18 Payee name Phenixx Marketing + Media

Amount (\$) 1,520.00 Payee address; City; State; Zip Code 12923 Epps Field Dallas, TX 75234

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)	Description
<u>Printing/Advertising</u>	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 293	2 FILER NAME Audrey Moorehead	3 Filer ID (Ethics Commission Filers)
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4 Date 1-28-18	5 Payee name Concord
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6 Amount (\$) 50-	7 Payee address; City; State; Zip Code 6808 Pastor Bailey Drive Dallas 75287
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(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 1-26-18	Payee name Phenixx
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Amount (\$) 3369.50	Payee address; City; State; Zip Code 12923 Epps Field Dallas Tx 75284
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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 1-29-18	Payee name Reilly Echols
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Amount (\$) 5,000-	Payee address; City; State; Zip Code P.O. Box 152358 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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 383	2 FILER NAME Audrey Moorehead	3 Filer ID (Ethics Commission Filers)
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4 Date 1-21-18	5 Payee name Interdenominational Ministerial Alliance
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6 Amount (\$) 160.00	7 Payee address; City; State; Zip Code P.O. Box 41139 Dallas, TX 75241
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising & Event	(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 1/31/18	Payee name Stripe
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Amount (\$) 141.13	Payee address; City; State; Zip Code 185 Berry Street 550 San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees (Banking)	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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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: 2	2 FILER NAME Andrey Moorehead	3 Filer ID (Ethics Commission Filers)
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4 Date 1/23/18	5 Payee name Fed EX
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6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended 184.00	7 Payee address; City; State; Zip Code 902 Ross Avenue Dallas, TX 75202
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/20/18	Payee name Progressive Voters' League
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended 250-	Payee address; City; State; Zip Code 5150 Mark Trail Way P.O. Box 398647 Dallas TX 75339
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/22/18	Payee name Facebook
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended 50.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Marketing/Advertising	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: <i>232</i>	2 FILER NAME <i>Huckley Moorehead</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1/3/18</i>	5 Payee name <i>Meridian</i>	
6 Amount (\$) <i>398.14</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>555 Republic Drive Suite 200 Plano TX 75074</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	(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	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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