

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:  <div style="font-size: 2em; text-align: center;">13</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR      FIRST      MI MR      William      K NICKNAME      LAST      SUFFIX <div style="font-size: 1.5em; text-align: center;">TAPSCOTT      Jr</div>	<div style="text-align: center; font-weight: bold;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px;">                     Date Received   <div style="text-align: center; font-size: 1.5em;">2018 FEB -5 PM 1:02</div> <div style="text-align: center; font-size: 0.8em;">DALLAS COUNTY, TEXAS</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">                     Date Hand-delivered or Date Postmarked                 </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">                     Receipt #      Amount \$                 </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">                     Date Processed                 </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">                     Date Imaged                 </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP CODE PO BOX 571265 DALLAS TX 75357		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE    PHONE NUMBER    EXTENSION (972) 203 8575		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR      FIRST      MI MR      STEPHEN NICKNAME      LAST      SUFFIX <div style="font-size: 1.5em; text-align: center;">JUNSTON</div>	Date Hand-delivered or Date Postmarked	
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE 3102 OAK LAWN AVE SUITE 1100 DALLAS TX 75219		
8 CAMPAIGN TREASURER PHONE	AREA CODE    PHONE NUMBER    EXTENSION (214) 523 6524		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month    Day    Year      THROUGH      Month    Day    Year 01 / 01 / 18      01 / 25 / 18		
11 ELECTION	ELECTION DATE Month    Day    Year 03 / 06 / 18	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) JUDGE, COUNTY COURT AT LAW #4	13 OFFICE SOUGHT (if known)	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

14 JC/OH NAME

*William K TRAPSCOTT Jr*

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

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

\$ 0

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

\$ 4,750.00

EXPENDITURE  
TOTALS

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

\$ 12-

4. TOTAL POLITICAL EXPENDITURES

\$ 11,463.48

CONTRIBUTION  
BALANCE

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

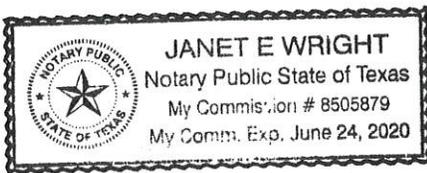
\$ 75,196.00

OUTSTANDING  
LOAN TOTALS

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

\$ 0

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 16, Election Code.

*William K Trapscott Jr*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *William K Trapscott Jr*, this the 5 day of February, 2018, to certify which, witness my hand and seal of office.

*Janet E Wright* Janet E Wright Notary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

# SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

19 FILER NAME

*William R. T. Scott Jr*

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)	\$ 4,750-
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 MADE FROM POLITICAL CONTRIBUTIONS	\$ 11,463.48
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  
(JUDICIAL)**

**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

1 of 4

2 FILER NAME

William W TAPSCOTT JR

3 Filer ID (Ethics Commission Filers)

4 Date

1/18/18

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

STEPHANIE ELOVITZ

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

13355 NOBLE RD SUITE 1900 DALLAS TX 75240

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

OKON HANDAGAN, PLLC

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

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

Date

1/25/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

RHIANNON KELSO

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2901 WELBORN ST. DALLAS TX 75219

Contributor's principal occupation

Principal/Attorney

Contributor's job title

Partner/Attorney

Contributor's employer/law firm

KELSO LAW PLLC

Law firm of contributor's spouse (if any)

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

Date

1/11/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

BRIAN PATRICK SHAW JR

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

1303 W. CENTERBURY CT DALLAS 75208

Contributor's principal occupation

Attorney

Contributor's job title

Partner

Contributor's employer/law firm

CLOUSE DUNN LLP

Law firm of contributor's spouse (if any)

LAW OFFICE OF LAUREN SCROGGINS SHAW

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

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2 of 4

2 FILER NAME

William K TRSCOTT Jr

3 Filer ID (Ethics Commission Filers)

4 Date

1/12/18

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

JOSH IACUONE

7 Amount of contribution (\$)

400.00

6 Contributor address; City; State; Zip Code

6356 HILLCREST LN DALLAS TX 75214

8 Contributor's principal occupation

Attorney - Partner

9 Contributor's job title

Partner

10 Contributor's employer/law firm

CLOUSE DUNN

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

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

Date

1/11/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

BAILEY BRADY PLLC

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

8350 N. CENTRAL EXPWAY #206 DALLAS TX 75206

Contributor's principal occupation

Law firm

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

Date

1/11/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Neil Berger

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

5418 BRYANT ST. DALLAS TX 75206

Contributor's principal occupation

Attorney - Partner

Contributor's job title

Partner

Contributor's employer/law firm

CRADIN-TEN CLEMAN

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3 of 4

2 FILER NAME

William K TRSCOTT JR

3 Filer ID (Ethics Commission Filers)

4 Date

1/11/18

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

KATH RUSSELL COLEMAN LORAN PC

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

1601 ELM ST. #3700 THAMESVILLE TOWER DALLAS, TX 75201

8 Contributor's principal occupation

LAW FIRM

9 Contributor's job title

10 Contributor's employer/law firm

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

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

Date

1/4/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

CROUSTON + RICHIE PC

Amount of contribution (\$)

1,500 -

Contributor address; City; State; Zip Code

900 JACOBSON ST SUITE 440 DALLAS, TX 75202

Contributor's principal occupation

LAW FIRM

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

Date

1/11/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

GEOFFREY HARPER

Amount of contribution (\$)

400.00

Contributor address; City; State; Zip Code

3825 SIKEM HILL DR. DALLAS, TX 75229

Contributor's principal occupation

PARTNER - ATTORNEY

Contributor's job title

PARTNER

Contributor's employer/law firm

WINSTON + STRAWN

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

4 of 4

2 FILER NAME

William K TRACY Jr

3 Filer ID (Ethics Commission Filers)

4 Date

1/3/18

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

MORRIS + SCHORSCH, P.C.

6 Contributor address; City; State; Zip Code

8080 N. CENTRAL EXPRESS SUITE B1300 DALLAS, TX 75206

7 Amount of contribution (\$)

500.00

8 Contributor's principal occupation

LAW FIRM

9 Contributor's job title

10 Contributor's employer/law firm

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

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

Date

1/13/18

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

PAUL HALLER

Contributor address; City; State; Zip Code

13806 WOODHO CREEK DR. FARMERS BLVD, TX 75244

Amount of contribution (\$)

250.00

Contributor's principal occupation

RETIRED

Contributor's job title

—

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

Date

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1 of 6	<b>2</b> FILER NAME William K TRACOST JR	<b>3</b> Filer ID (Ethics Commission Filers)		
<b>4</b> Date 1/2/18	<b>5</b> Payee name BARBARA STEELE			
<b>6</b> Amount (\$) 2,500.00	<b>7</b> Payee address; City; State; Zip Code 1924 WINDY AVE. DALLAS TX 75203			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) POLITICAL CONSULTANT	<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		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		

Date 1/3/18	Payee name IRVING NAACP			
Amount (\$) 100 -	Payee address; City; State; Zip Code P.O. BOX <del>1667</del> 166176 IRVING TX 75016			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		

Date 1/5/18	Payee name FAR NORTH DALLAS DEMOCRATS			
Amount (\$) 100 -	Payee address; City; State; Zip Code 17201 HODEN GLEN DRIVE DALLAS TX 75248			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table border="0" style="width:100%;"> <tr> <td style="width:33%;">Candidate / Officeholder name</td> <td style="width:33%;">Office sought</td> <td style="width:33%;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
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: <i>2 of 6</i>		2 FILER NAME <i>William H. TAPSCOTT Jr</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/10/18</i>		5 Payee name <i>DALLAS EXAMINER</i>			
6 Amount (\$) <i>375.00</i>		7 Payee address; City; State; Zip Code <i>PO BOX 3720 DALLAS TX 75208</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>ADVERTISING</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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
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Date <i>1/17/18</i>		Payee name <i>NAACP GARLAND</i>			
Amount (\$) <i>50-</i>		Payee address; City; State; Zip Code <i>PO BOX 460944 GARLAND TX 75046</i>			

PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>TICKET AD FOR NAACP GARLAND WINTER BAL</i>		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 <i>1/18/18</i>		Payee name <i>DEMOCRACY TOOLBOX</i>			
Amount (\$) <i>900-</i>		Payee address; City; State; Zip Code <i>8813 FALCONCREST DRIVE MCKINNEY TX 75070</i>			

PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>AD FOR ELITE NEWS - REIMBURSEMENT</i>		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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3046	<b>2</b> FILER NAME William K TRASKETT JR	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/18/18	<b>5</b> Payee name FAR NORTH DARIAS RICHMOND DARIAS	
<b>6</b> Amount (\$) 40-	<b>7</b> Payee address; City; State; Zip Code 17201 HIDDEN GLEN DR. DARIAS TX 75248	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) ANNUAL DUES	
	<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	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/18/18	Payee name REILLY EUTOLS PRINTING
Amount (\$) 1,656.23	Payee address; City; State; Zip Code 1710 S. HARWOOD ST. DARIAS TX 75215

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) PRINTING	
	<b>Description</b> <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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Date 1/19/18	Payee name MEXICAN AMERICAN BAR ASSOCIATION
Amount (\$) 560.00	Payee address; City; State; Zip Code 3300 OAK LAWN AVE SUITE 408 DARIAS TX 75219

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) BANQUET SPONSOR + TICKET	
	<b>Description</b> <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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By 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: 4 of 6	2 FILER NAME WILLIAM K THOMPSON JR	3 Filer ID (Ethics Commission Filers)
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4 Date 1/19/18	5 Payee name TEXAS DEMOCRATIC WOMEN
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6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code PO BOX 301411 AUSTIN TX 78703
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) ADVERTISEMENT AT ANNUAL CONVENTION	(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 1/19/18	Payee name EDWARDS + PATTERSON SIGNS
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Amount (\$) 1,753.65	Payee address; City; State; Zip Code 4733 DONALD DALLAS TX 75247
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) 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 1/19/18	Payee name PRAISE HOLLOW DEMOCRACY
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Amount (\$) 160.00	Payee address; City; State; Zip Code P.O. BOX 59062 DALLAS TX 75229
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) ANNUAL DUES + SPONSOR OF JULY MEETING	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: <i>5 of 6</i>		2 FILER NAME <i>William K TRASCOTT Jr</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>1/19/18</i>		5 Payee name <i>OBAMA FEST - TEDDY HAWKINS</i>			
6 Amount (\$) <i>2,500 -</i>		7 Payee address; City; State; Zip Code <i>2504 PINE ST. DALLAS TX 75215</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>Political <del>Committee</del> CONSULTING</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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date <i>1/24/18</i>		Payee name <i>DICK BAUER SAHLS</i>			
Amount (\$) <i>383.50</i>		Payee address; City; State; Zip Code <i>1605 MONUMENT CIRCLE PLANO TX 75083</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>PRINTING EXPENSE</i>		Description <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	

Date <i>1/24/18</i>		Payee name <i>IMA (MINISTER'S ALLIANCE)</i>			
Amount (\$) <i>160 -</i>		Payee address; City; State; Zip Code <i>P.O. BOX 41139 DALLAS TX 75241</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>ADVERTISING + TICKET FOR BANQUET</i>		Description <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	

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# 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.

<b>1</b> Total pages Schedule F1: <i>6 of 6</i>	<b>2</b> FILER NAME <i>William K TAPSCOTT JR</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>1/25/18</i>	<b>5</b> Payee name <i>NAACP GARLAND</i>	
<b>6</b> Amount (\$) <i>30-</i>	<b>7</b> Payee address; City; State; Zip Code <i>PO BOX 460944 GARLAND TX 75046</i>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>ANNUAL DUES</i>	<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

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>1/25/18</i>	Payee name <i>NAACP MESQUITE</i>	
Amount (\$) <i>30-</i>	Payee address; City; State; Zip Code <i>211 ATHEL DR. MESQUITE TX 75149</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>ANNUAL DUES</i>	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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Date <i>1/25/18</i>	Payee name <i>PAYPAL</i>	
Amount (\$) <i>15.10</i>	Payee address; City; State; Zip Code <i>2211 NORTH FIRST ST. SAN JOSE CA 95131</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>PAYPAL FEES FROM ONLINE CONTRIBUTIONS</i>	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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