

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

6

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / (MR)

FIRST  
John

MI  
F.

NICKNAME

LAST  
Warren

SUFFIX

OFFICE USE ONLY

Date Received

FILED  
2019 JAN 16 AM 8:44  
JOHN F. WARREN  
COUNTY CLERK  
DALLAS COUNTY  
DEPUTY

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #;  
P.O. Box 222134

CITY; STATE; ZIP CODE  
Dallas, Texas 75222-2134

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER  
( 972 ) 523-0793

EXTENSION

Date Hand Delivered or Date Postmarked

6 CAMPAIGN  
TREASURER  
NAME

(MS) MRS / MR

FIRST  
Julie

MI  
M.

NICKNAME

LAST  
Spears

SUFFIX

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;  
2314 Lone Oak Trail

CITY; STATE; ZIP CODE  
Garland, Texas 75044

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER  
( 972 ) 530-8144

EXTENSION

9 REPORT TYPE

- January 15     30th day before election     Runoff     15th day after campaign treasurer appointment (Officeholder Only)
- July 15     8th day before election     Exceeded \$500 limit     Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month Day Year  
07 / 01 / 2018

Month Day Year  
THROUGH 12 / 31 / 2018

11 ELECTION

ELECTION DATE

Month Day Year  
11 / 06 / 2018

ELECTION TYPE

- Primary     Runoff     Other Description
- General     Special

12 OFFICE

OFFICE HELD (if any)  
Dallas County Clerk

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

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

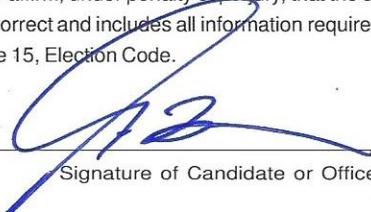
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 3,014
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$5,375.48
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 AFFIDAVIT**



AFFIX NOTARY STAMP / SEAL ABOVE

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

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John F. Warren, this the 16th day of January, 20 19, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath

Miranda Maldonado

 \_\_\_\_\_  
 Printed name of officer administering oath

Notary

 \_\_\_\_\_  
 Title of officer administering oath

# 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.

<b>1</b> Total pages Schedule F1: 1 of 2	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/05/2018	<b>5</b> Payee name Lake Highlands/White Rock Democrats	
<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 4847 W. Lawther Dr., Dallas Texas	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Sponsorship	<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: John F. Warren Office sought: _____ Office held: Dallas County Clerk	
Date 09/20/2018	Payee name Devon Allen Campaign	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 182164, Arlington, Texas 76096	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Fundraiser	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: John F. Warren Office sought: _____ Office held: Dallas County Clerk	
Date 10/05/2018	Payee name ActBlue	
Amount (\$) \$25.00	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Political Support Group Fundraising	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: John F. Warren Office sought: _____ Office held: Dallas County Clerk	

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.

<b>1</b> Total pages Schedule F1: 2 of 2	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 10/1918	<b>5</b> Payee name Delta Sigma Theta Sorority Inc.				
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Scholarship Sponsor	<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 style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John F. Warren</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held Dallas County Clerk</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk		
Date 10/04/2018	Payee name Remeko T. Edwards Campaign				
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 1402 DeSoto, Texas 75123				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Fundraiser	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John F. Warren</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held Dallas County Clerk</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk		
Date 12/27/2018	Payee name Dallas County Democratic Party				
Amount (\$) \$250.00	Payee address; City; State; Zip Code 4209 Parry Ave. Dallas, Texas 75223				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Fundraiser/Swearing In Ceremony Sponsor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none;">Candidate / Officeholder name John F. Warren</td> <td style="width:20%; border:none;">Office sought</td> <td style="width:20%; border:none;">Office held Dallas County Clerk</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk		

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: 1 of 1	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 10/11/2018	<b>5</b> Payee name Southern University Alumni Federation
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<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code Baton Rouge, Louisiana
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories.) Scholarship Sponsorship	<b>(b)</b> Description (See instructions regarding type of information required.)
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Date 08/15/2018	Payee name Community Missionary Baptist Church
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Amount (\$) \$600.00	Payee address; City; State; Zip Code 115 W. Beltline Rd., Dallas TX 75115
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) Sponsor-Pastors Anniversary	Description (See instructions regarding type of information required.)
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Date 09/18/2018	Payee name Alpha Merit Committee Group, Inc.
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Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 153123, Dallas, TX 75215
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) Scholarship Sponsor	Description (See instructions regarding type of information required.)
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Date 11/15/2018	Payee name Staff Appreciation Luncheon
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Amount (\$) \$476.00	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) Lunch outing	Description (See instructions regarding type of information required.)
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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

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<b>1</b> Total pages Schedule I: 1 of 2	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 11/10/2018	<b>5</b> Payee name Kwanzaa Fest
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<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories.) Community Awareness Event	<b>(b) Description</b> (See instructions regarding type of information required.)
	Date 11/07/2018	

Date 11/07/2018	Payee name Symantec Anti Virus Software
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Amount (\$) \$113.00	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) PC Protection	Description (See instructions regarding type of information required.)
	Date 11/02/2018	

Date 11/02/2018	Payee name Top Ladies of Distinction Inc. Dallas Chapter
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Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 271364, Dallas TX 75227-9564
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) Scholarship Sponsor	Description (See instructions regarding type of information required.)
	Date	

Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.) Lunch outing	Description (See instructions regarding type of information required.)
	Date	

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