### 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 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST  SERVICE LAST	MI 1 SUFFIX	OFFICE USE ONLY  Date Received
	DE WON		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE	Date Hand-delivered or Postmarked
change of address		-	Receipt # Amount
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Set Processed
6 CAMPAIGN TREASURER NAME	MS/MRS(MR) FIRST	MI:	Date Imaged
	NICKNAME LAST  DAVIS	SUFFIX	( 5) C)
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO ROX PLEASE) APT / SUITE #	CITY STATE:	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 30th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 etn day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH	Month Day	Year / J. <del>T</del>
11 ELECTION	ELECTION DATE Month Day Year  11 / 04 / 14  ELECTION TYPE Primary R	unoff	General Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	JUSTICE OF THE PEACE, PCT. J	TUSTRE OF TH	EPBACE, PCTS
	GO TO PAC		

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME	ERGII)	L. DE VON	15 ACCOUNT # (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTI	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAD HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF T	IDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR		
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS	- Victoria de la companiona de la compan		
	SPECIFIC	J COMMITTEE ABBINESS	173 P		
	<u>.                                    </u>	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages			OCT ISSUED		
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,575.00		
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	\$ \ <b>%</b> 7.**		
	4. TOTAL	4. TOTAL POLITICAL EXPENDITURES \$			
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST REPORTING PERIOD	5,068.80		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE \$ \6,000.30		
18 AFFIDAVIT					
		true and correct and includes all in under Title 15, Election Code.	perjury, that the accompanying report is formation required to be reported by me		
	DIONICIA L. GA NOTARY PUE STATE OF TE My Comm. Exp. 03-2	SLIC XAS	ndidate or Officeholder		
	tally outside Experience	Signature of Gar	ididate of Gillecholder		
AFFIX NOTARY STAI	MP / SEAL ABOVE				
_ / 0		me, by the said <u>Severio L. De</u>	ny hand and seal of office.		
Dionoias	Jacen	Dionicia L. Gaucin	Notary Public		
<ul> <li>Signature of officer admir</li> </ul>	nistering oath	Print name of officer administering oath	Title of officer administering oath		

Austin, le	xas /8/11-20/0	(512) 463-5800	(1001-000-735-2909)
POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS	S (JUDICIAL	-) <sup>5</sup>	SCHEDULE A (J)
The Instruction Guide explains how to complete thi	s form.	1 Total pages Sch	
SERGED L. DE LEON			thics Commission Filers)
4 Date 5 Full name of contributor Out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
1301 Ballinger Str. Fort Worth, IX 761		/ U 0. 00	of Texas, complete Schedule T)
9 Contributor's principal occupation  Advance	10 Contributor's job	title of Jan	
11 Contributor's employer/law firm  Low Office 5 + R, Mosce  13 If contributor is a child, law firm of parent(s) (if any)	12 Law firm of contri	Dutor's spouse (if any	/) 
Date  Full name of contributor  Ceorge  Contributor address;  City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description(if applicable)
10/2/14 Contributor address; City; State; Zip Code P. O. Bax 350 Fort Worth, Tx 70	n 01	500.00	of Toyon, complete Schodule Ti
Contributor's principal occupation  Twester	Contributor's job	title	of Texas, complete Schedule T)
Contributor's employer/law firm	Law firm of contri	butor's spouse (if any	)
If contributor is a child, law firm of parent(s) (if any)			In-kind contribution
Tolly  Full name of contributor  Schleete  Contributor address; City; State; Zip Code	<u></u>	Amount of contribution (\$)	description(if applicable)
211 Buckingham Ar	<b>~</b> ,	100000	
Contributor's principal occupation  Themstin Technologies	Contributor's job		of Texas, complete Schedule T)
Contributor's employer/law firm		butor's spouse (if arry	2014 TA
If contributor is a child, law firm of parent(s) (if any)			
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SCHEDULE A (J)
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2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
- 55	RGIOL. DE LEON			
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of	8 In-kind contribution
_	Leticia s. Vigil		contribution (\$)	description(if applicable)
10/3/14				
1.12114	6 Contributor address; City; State; Zip Code		1 - 20	1
	1323 her Ave.		100.80	
	Fort Worth, Tx 76	164	(if travel outside	of Texas, complete Schedule T)
9 Contributor's p	rincipal occupation	10 Contributor's job	title	
AH.	ony	Atton	<u> </u>	
	mployer/law firm	12 Law firm of contri	butor <b>s</b> spouse (if an	у)
	nelie 2 Law Firm a child, law firm of parent(s) (if any)			
13 II contributor is	a crilid, law firm of parent(s) (if any)			
			A	In-kind contribution
Date	Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	description(if applicable)
10/2/2	Contributor address; City; State; Zip Code			1
, 121,1	Contributor address; City; State; Zip Code		100.00	
	6004 Airant Freezew	1	100.	1 .
	Fox Worth, Tx 7617	•	(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	<u>`</u>	or reads; complete consecutory
B	i'l Bond	•		
Contributor's employer/law firm Law firm of contri		butor's spouse (if an	y)	
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (ID#:	)	Amount of	In-kind contribution
1 4			contribution (\$)	description(if applicable)
10314	Cyndria Miller			i
121.	Contributor address; City; State; Zip Code		2540	
	3800 Hollow Creek R.		25.00	1
	Benbrook, Tx 76114	•	(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	title	
	J Chamber	Consul	tont	
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The	Instruction Guide explains how to complete this	s form.	1 Total pages Scho	
2 FILER NAME	2650 L DE VEON		3 ACCOUNT # (Et	thics Commission Filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID#	کرسم	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
. 1	6 Contributor address; City; State; Zip Code		50.00	
	Fort Worth, TX 76			of Texas, complete Schedule T)
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11 Contributor's e	mployer/law firm	12 Law firm of contri	* * * * * * * * * * * * * * * * * * * *	
13 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description(if applicable)
19/14	Contributor address; City; State; Zip Code 3904 DN'SKell Blvd.		100.80	
	Fort Worth, Tx 761	07	(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	title	
Contributor's e	mployer/law firm	Law firm of contri	butor's spouse (if any	0
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (ID#:	·····)	Amount of	In-kind contribution description(if applicable)
10/1/11	Steve Murrin		contribution (\$)	description(ii applicable)
1919	Contributor address; City; State; Zip Code 500 NE 234 SA.		100.00	·
	Fort Worth, TX TU	0164	(If travel outside	of Texas, complete Schedule T)
	rincipal occupation  Definition  Definitio	Contributor's job	title	
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2 FILER NAME	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)
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4 Date	5 Full name of contributor Out-of-state PAC (ID#:		7 Amount of   8 In-kind contribution contribution (\$)   description(if applicable)
al 1	Frankie E. Herro	22	description(#applicable)
10/6/14	6 Contributor address; City; State; Zip Code		1
1.11	6 Contributor address; City; State; Zip Code		100.00
	701 S. Kete 8th		
	Fort Worth, TX 761	ુ	(If travel outside of Texas, complete Schedule T)
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11 Contributor's e	mployer/law firm	12 Law firm of contril	butor's spouse (if any)
13 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributorout-of-state PAC (ID#:	)	Amount of In-kind contribution
1 .	II	7	contribution (\$) description(if applicable)
10/19/14	Francisco Hernande		
C. L.	Contributor address; City; State; Zip Code		
•	800 W. Weatherful st	•	<i>5</i> 00. <del>22</del>
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	Fort Worth, Tx 761		(If travel outside of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	
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10/8/14	Contributor address; City; State; Zip Code		1
10111	201 Pecan St.		100.00
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	Fort Worth Tix 76	00	(If travel outside of Texas, complete Schedule T)
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The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	
2 FILER NAME	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
SE	2650 L. DE 1602			
4 Date	5 Full name of contributor Out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
wholiy	6 Contributor address; City; State; Zip Code 9502 Camp Bowie Fort Worth, Tx 761		10000	 
9 Contributor's p	rincipal occupation	ما 10 Contributor's job	titie	of Texas, complete Schedule T)
Gre	ig Andonstre	Owner	Grein A	nqueque
11 Contributor's e	mployer/law firm	12 Law firm of contri		
13 If contributor is	a child, law firm of parent(s) (if any)	L		
Date	Full name of contributor   Out-of-state PAC (ID#	-	Amount of contribution (\$)	In-kind contribution description(if applicable)
भ्या <u>च</u> ाय	Contributor address; City; State; Zip Code	≈.	50.00	
	Fort Worth, Tx		(If travel outside	of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	4	
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If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributorout-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description(if applicable)
10/15/14	Contributor address; City; State; Zip Code 4308 Inwood Rd		100000	 
	Fort Worth, Tx 74	109	(if travel outside	of Texas, complete Schedule T)
let	rincipal occupation N.J. FWISD Super.	Contributor's job		
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If contributor is	a child, law firm of parent(s) (if any)			
if cont	ATTACH ADDITIONAL COPIES C tributor is out-of-state PAC, please see instr		,	ng requirements.

Austin, Texas /8/11-20/0

Texas Ethics Commission

P.O. Box 12070

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The Instruction Guide explains how to complete t	this form.	1 Total pages Sch	
2 FILER NAME		3 ACCOUNT # (E	thics Commission Filers)
SERGED L. DEVEON			
4 Date 5 Full name of contributorout-of-state PAC (ID#:_	)	7 Amount of	8 In-kind contribution
Travial IT DAZ		contribution (\$)	description(if applicable)
David J. Daz 6 Contributor address; City; State; Zip Coo			]
6 Contributor address; City; State; Zip Coo	de	100.00	
6 Westover Road			1
Fort Worth, Tx	16107	(If travel outside	of Texas, complete Schedule T)
9 Contributor's principal occupation	10 Contributor's job		
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11 Contributor's employer/law firm Wicher-Phillips	12 Law firm of contri	butor's spouse (if an	у)
13 If contributor is a child, law firm of parent(s) (if any)			,
Date Full name of contributor Out-of-state PAC (ID#:	)	Amount of	In-kind contribution
Former ( )	1.	contribution (\$)	description(if applicable)
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Contributor address; City; State; Zip Coo	de	25.00	1
1000 W. Bewich			
For & Worth, Tx TV	0110	(If travel outside	of Texas, complete Schedule T)
Contributor's principal occupation	Contributor's job	title	
Restored			
Contributor's employer/law firm	Law firm of contri	butor's spouse (if an	y)
If any hills, the in a skilled law firms of page 140 //f any \			
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Date Full name of contributorout-of-state PAC (ID#:_	)	Amount of	In-kind contribution
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in contributor is out-or-state FAG, prease see in	struction guide for a	aditional reporti	ng requirements.

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#### SCHEDULE A (J)

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		Texas, complete Schedule T)
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The Instruction Guide explains how to complete this form.			1 Total pages Sched	
2 FILER NAME			3 ACCOUNT # (Ethic	cs Commission Filers)
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4 Date	5 Full name of contributorout-of-state PAC (ID#:	)	7 Amount of 8	
	Anna Reves		contribution (\$)	description(if applicable)
10/23/14				
1-12-114	6 Contributor address; City; State; Zip Code  Lyzy Wh. tmen 124.		10.00	
	Lyzy Wh. Then 18h.	•	10.	,
	For Worth, TX			Texas, complete Schedule T)
9 Contributor's p	rincipal occupation	10 Contributor's job	title	
11 Contributor's e	mployer/law firm	42 Law firm of contril	butor's spouse (if any)	
4	проустам пап	12 Law III To Contin	DUIDI S apouse (ii di iy)	
13 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor	1	Amount of	In-kind contribution
		<i></i>	contribution (\$)	description(if applicable)
14-21	Joe Govea			
1923/14	Contributor address; City; State; Zip Code			
•	5310 Weddington Ct.		25,∞	a ' .
	tort Worth, TX 7U13	3	(If travel outside of	Texas, complete Schedule T)
	rincipal occupation	Contributor's job t	itle	
17.	atine			
Contributor's er	mployer/law firm	Law firm of contrib	butor's spouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		<u></u>	
Date	Full name of contributorout-of-state PAC (ID#:	, ]	Amount of	In-kind contribution
Date	1		contribution (\$)	description(if applicable)
1 1	Linda Corren			
10/28/14	Contributor address; City; State; Zip Code		200	
, ,	4017 Anite Rove.		25.20	
	Fax Worth, Tx 74	-9	(15 Average purposed of 5	Texas, complete Schedule T)
Cantributoria n				lexas, complete Schedule 1)
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ii cont	indutor is out-or-state PAG, please see instit	action guide for ac	aditional reporting	requirements.

SCHEDULE A (J)

The Instruction Guide explains how to complete this	1 Total pages Schedule A(J): 12 of /6		
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
SERGED L. DE KON			
4 Date 5 Full name of contributorout-of-state PAC (ID#:	)	7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
10/23/14 6 Contributor address; City; State; Zip Code 69 Colts Nech Ct.	· · · · · · · · · · · · · · · · · · ·	20.5=	
Collegville, To 76		(If travel outside o	f Texas, complete Schedule T)
9 Contributor's principal occupation	10 Contributor's job	title	
11 Contributor's employer/law firm	12 Law firm of contril	outor's spouse (if any)	The second secon
13 If contributor is a child, law firm of parent(s) (if any)			
Date Full name of contributorout-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description(if applicable)
Sandy Russell Contributor address: City: State: Zip Code			
Sandy Russell Contributor address; City; State; Zip Code 10532 Shadywood &		40,0	4 ' '
Ford Worth, Tx 7		(If travel outside of	Texas, complete Schedule T)
Contributor's principal occupation	Contributor's job		QIE m
Contributor's employer/law firm	Law firm of contrib	outor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		444	
Date Full name of contributorout-of-state PAC (ID#:		Amount of	In-kind contribution
Pilar Candia		contribution (\$)	description(if applicable)
10/23/14 Contributor address; City; State; Zip Code 2610 Golden	<b>~</b>	40.90	TARY 2014 O
Fort Worth, TX 70	0111	(If travel outside o	f Texas, complete Schedule D
Contributor's principal occupation	Contributor's job t		
Contributor's employer/law firm	Law firm of contrib	outor's spouse (if any)	
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The Instruction Guide explains how to complete this form.		1 Total pages Sche	1.	
2 FILER NAME	2 FILER NAME		3 ACCOUNT # (Eth	nics Commission Filers)
500	2650 L. DE WON			
4 Date	5 Full name of contributorout-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
	Juanita Saline	5	Contribution (\$)	description(ii applicable)
10/23/14	6 Contributor address: City: State: Zin Code	· · · · · · · · · · · · · · · · · · ·		
19/23/19	6 Contributor address; City; State; Zip Code 4109 S, Hendurs	n	6000	
	Far Worth Tr			
9 Contributor's p	rincipal occupation	10 Contributor's job	<u> </u>	f Texas, complete Schedule T)
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11 Contributor's er	mployer/law firm	12 Law firm of contri	butor's spouse (if any)	
13 If contributor is	a child, law firm of parent(s) (if any)			***
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2 FILER NAME		3 ACCOUNT # (E	thics Commission Filers)	
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4 Date	5 Full name of contributor	)	7 Amount of	8 In-kind contribution
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1 4	Alicia Garra	. <b></b>		<u>'</u>
1923/14	6 Contributor address; City; State; Zip Code 5345 Rutland		700.2	! !
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	For Worth, To 761	3 7	(If travel outside	of Texas, complete Schedule T)
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1	Nelda Perzz		contribution (\$)	description(if applicable)
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	Kenneth E. Sono	6	contribution (\$)	description(if applicable)
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4 Date	5 Full name of contributorout-of-state PAC (ID#:	<b>)</b>	7 Amount of	8 In-kind contribution
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POLITICAL	EXPENDITURES	SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES  Gift/Awards/Memorials Expense Solicitation/Fundra Legal Services Food/Beverage Expense Polling Expense The Instruction Guide explains how to c	ontract Labor aising Expense  rict Lental Expense  Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
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4 Date 09 28 14 6 Amount (\$)	5 Payee name  Staples 7 Payee address; City; State; Zip Code	
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PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)  Printing Exerce	(b) Description (If travel outside of Texas, complete Schedule T)  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held
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POLITICAL	EXPENDITURES	SCHEDULE F
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4 Date 10 17 14 6 Amount (\$)	7 Payee address; City; State; Zip Code 2808 Shamroch Bre.	sh C
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
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175,20	2741 Itemphill St- Fax worth, Tx 7610	
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132.00	P.O. Box 537 104 Atlanta, GA 305	当。方黑
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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

POLITICAL	- EXPENDITURES	SCHEDULE F
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8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
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