

FORM COR-C/OH CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

| | | | | | | | |
|---------------------------------|---|---|--|--|-----------|-----------|-------------|
| 1 ACCOUNT # | | 2 Total pages filed: 15 | | OFFICE USE ONLY | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST Carey | MI | Date Received BY: <i>FR</i> 2015 FEB 5 AM 7:38 TARRANT COUNTY FILED FRANK PHILLIPS ELECTIONS ADMINISTRATOR | | | |
| | NICKNAME | LAST Walker | SUFFIX | | | | |
| 4 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other (specify) _____ | | | | |
| | <input type="checkbox"/> July 15 | <input type="checkbox"/> Exceeded \$500 limit | | | | | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) | | | | | |
| | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Final report | | | | | |
| 5 ORIGINAL PERIOD COVERED | Month | Day | Year | THROUGH | Month | Day | Year |
| | 09 | 26 | 2014 | | 10 | 25 | 2014 |

6 EXPLANATION OF CORRECTION

Schedule A(J) Political Contributions. A contributor, Harris Cook LLP, was inadvertently omitted from the original report that was filed October 27, 2014. This contribution was an in-kind contribution for fundraising expenses in the amount of \$1,081.93. Page 2, 16.2 Total Political Contributions incorrectly states \$4,595.00. This should be \$5,676.93 with the addition of the above contributor.

POSTMARK
JAN 30 2015

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Carey F. Walker

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carey F. Walker, this the 30 day of January.

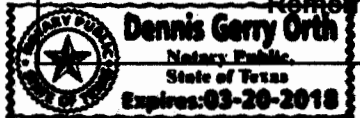
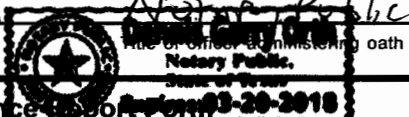
2015, to certify which, witness my hand and seal of office.

Dennis Gerry Orth

Signature of officer administering oath

DENNIS GERRY ORTH

Printed name of officer administering oath



**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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 PAGE # 1 of 14 |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST Carey | MI |
| | NICKNAME | LAST Walker | SUFFIX |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | ADDRESS / PO BOX: | APT / SUITE #: | CITY; STATE; ZIP CODE |
| | <input type="checkbox"/> Change of Address | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | FIRST Carey | MI |
| | NICKNAME | LAST Walker | SUFFIX |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | |
| | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff |
| | <input type="checkbox"/> July 15 | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded \$500 limit |
| 9 PERIOD COVERED | Month | Day | Year |
| | 09/26/2014 | THROUGH | 10/25/2014 |
| 10 ELECTION | ELECTION DATE | ELECTION TYPE | |
| | Month Day Year 11/04/2014 | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |
| 11 OFFICE | OFFICE HELD (if any) | 12 OFFICE SOUGHT (if known) Judge, County Criminal Court | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM JC/OH
COVER SHEET PG 2**

13 C/OH NAME Walker, Carey (Mr.)

14 ACCOUNT # (Ethics Commission filers)

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages | COMMITTEE NAME |
| | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS |

16 CONTRIBUTION TOTALS

| | |
|---|----------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 45.00 |
|---|----------|

| | |
|--|-------------|
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 5,676.93 |
|--|-------------|

EXPENDITURE TOTALS

| | |
|---|----------|
| 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 50.00 |
|---|----------|

| | |
|---------------------------------|-------------|
| 4. TOTAL POLITICAL EXPENDITURES | \$ 1,935.01 |
|---------------------------------|-------------|

CONTRIBUTION BALANCE

| | |
|--|-------------|
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 7,907.38 |
|--|-------------|

OUTSTANDING LOAN TOTALS

| | |
|---|--------------|
| 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 68,350.48 |
|---|--------------|

17 AFFIDAVIT

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|---|---|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 1/10 Report: 3/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/20/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Black, Jon C. 6 Contributor address; City; State; Zip Code 1307 Woodbine Street Arlington, TX 76012 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Contributor's principal occupation Retired | | 10 Contributor's job title Retired | |
| 11 Contributor's employer / law firm N/A | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blumberg, Daniel E. Contributor address; City; State; Zip Code 2303 Lavon Creek Lane Arlington, TX 76006 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm Blumberg & Bagley, LLP | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/07/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bourland, Richard Contributor address; City; State; Zip Code 201 Main Street Suite 1400 Fort Worth, TX 76102 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm Bourland & Kirkland | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|--|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 2/10 Report: 4/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/22/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burt, Sue | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 828 Hackamore Street Fort Worth, TX 76108 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Clerk | | 10 Contributor's job title Clerk | |
| 11 Contributor's employer / law firm Walmart | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chaisson, Mary L. | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 728 Lynda Road River Oaks, TX 76114 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Hospice | | Contributor's job title Caseworker | |
| Contributor's employer / law firm Vitas | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/23/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cochran, Mark S. | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 101 W. Randol Mill Road Suite 110 Arlington, TX 76011 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm Mark S. Cochran, Attorney at Law | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|--|---|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 3/10 Report: 5/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/13/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conine, Casey (Mr.) 6 Contributor address; City; State; Zip Code 1312 Amber Court Keller, TX 76248 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation Judge | | 10 Contributor's job title Associate Judge | |
| 11 Contributor's employer / law firm State of Texas | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cook, David Contributor address; City; State; Zip Code 309 E Broad Street Mansfield, TX 76063 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm Harris Cook, LLP | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gaines, Terry Contributor address; City; State; Zip Code 711 Findlay Drive Arlington, TX 76012 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Financial Consultant | | Contributor's job title Financial Consultant | |
| Contributor's employer / law firm First Rate Investment and Performance Group | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|---|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 4/10 Report: 6/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/17/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goodson, Dorene | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 2627 Buffalo Court Arlington, TX 76013 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Retired | | 10 Contributor's job title Retired | |
| 11 Contributor's employer / law firm | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gunn, Melinda | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code P.O. Box 1298 Graham, TX 76450 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Retired | | Contributor's job title Retired | |
| 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 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris Cook LLP | Amount of contribution (\$) \$1,081.93 | In-kind contribution description (if applicable) Fundraising expense |
| Contributor address; City; State; Zip Code 1309-A West Abram Street Arlington, TX 76013 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Attorneys | | Contributor's job title Attorneys | |
| Contributor's employer / law firm Harris Cook LLP | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 5/10 Report: 7/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/17/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayes, Clifford M. 6 Contributor address; City; State; Zip Code 370 Caple Crow Road Mansfield, TX 76063 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Justice of the Peace | | 10 Contributor's job title Justice of the Peace | |
| 11 Contributor's employer / law firm Tarrant County | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/20/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes, John Sr. Contributor address; City; State; Zip Code 4524 Knoll Ridge Drive Aledo, TX 76008 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Mediator | | Contributor's job title Mediator | |
| Contributor's employer / law firm John W. Hughes, P.C. | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/18/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kautz, Jody Contributor address; City; State; Zip Code 901 Glen Abbey Drive Mansfield, TX 76063 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Realtor | | Contributor's job title Realtor | |
| Contributor's employer / law firm Remax Realtors | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 6/10 Report: 8/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/16/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luce, Jerry | 7 Amount of contribution (\$) \$1,000.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code P.O. Box 13249 Arlington, TX 76094 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Retired | | 10 Contributor's job title Retired | |
| 11 Contributor's employer / law firm N/A | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/09/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mackey, George | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 101 Summit, Suite 318 Fort Worth, TX 76102 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 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) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/07/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Wilson | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 201 Main Street Suite 1445 Fort Worth, TX 76102 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Real Estate | | Contributor's job title Senior Vice President, Business Development | |
| Contributor's employer / law firm Republic Title | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 7/10 Report: 9/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 09/28/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniels, Debra | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 3525 Creekside Court Bedford, TX 76021 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Retired | | 10 Contributor's job title Retired | |
| 11 Contributor's employer / law firm N/A | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ownby Consulting | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 7106 Lighthouse Drive Arlington, TX 76002 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 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 09/29/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, Carey | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 1467 Highland Court Keller, TX 76262 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Retired | | Contributor's job title Retired | |
| Contributor's employer / law firm N/A | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|--|---|---|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 8/10 Report: 10/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/17/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Podell, Mark M. 6 Contributor address; City; State; Zip Code 850 Knob Hill Road Boyd, TX 76023 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) |
| 9 Contributor's principal occupation Aircraft Assembler | | 10 Contributor's job title Aircraft Assembler | |
| 11 Contributor's employer / law firm Bell Helicopter Textron | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/14/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ray, William 6 Contributor address; City; State; Zip Code 512 Main Street Suite 308 Fort Worth, TX 76102 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm William H. Ray, Attorney at Law | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/16/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherrard, Charles Scott 6 Contributor address; City; State; Zip Code 726 Crowley Road Arlington, TX 76012 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Contributor's principal occupation Wholesale Auto Dealer | | Contributor's job title Wholesale Auto Dealer | |
| Contributor's employer / law firm Self Employed | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

| | | | |
|---|---|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 9/10 Report: 11/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/23/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steward, Jeff | 7 Amount of contribution (\$) \$200.00 | 8 In-kind contribution description (if applicable) |
| 6 Contributor address; City; State; Zip Code 150 Boland Street #202 Fort Worth, TX 76107 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 9 Contributor's principal occupation Attorney | | 10 Contributor's job title Attorney | |
| 11 Contributor's employer / law firm Jeffrey S. Stewart, P.C. | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/21/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weeks, Dirk | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 3804 Glenwood Drive Fort Worth, TX 76109 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Vice President | | Contributor's job title Vice President | |
| Contributor's employer / law firm Structured Annuities, Inc. | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |
| Date 10/17/2014 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wood, Jerry L. | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) |
| Contributor address; City; State; Zip Code 912 W. Belknap Fort Worth, TX 76102 | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Contributor's principal occupation Attorney | | Contributor's job title Attorney | |
| Contributor's employer / law firm Jerry L. Wood, Attorney at Law | | Law firm of contributor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | | |

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)****SCHEDULE A (J)**

| | | | |
|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 10/10 Report: 12/14 | |
| 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 10/17/2014 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zedler, Bill 6 Contributor address; City; State; Zip Code 5502 Hidden Trails Arlington, TX 76017 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Contributor's principal occupation State Representative | | 10 Contributor's job title State Representative | |
| 11 Contributor's employer / law firm State of Texas | | 12 Law firm of contributor's spouse (if any) | |
| 13 If contributor is a child, law firm of parent(s) (if any) | | | |
| | | | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|--|--|---------------------------------|
| 1 PAGE # Schedule: 1/2 Report: 13/14 | 2 FILER NAME Walker, Carey (Mr.) | 3 ACCOUNT # (TEC filers) |
|--|--|---------------------------------|

| | | |
|---------------------------------|---|--|
| 4 Date 10/23/2014 | 5 Payee name Campaign Partners | |
| 6 Amount (\$) \$29.00 | 7 Payee address City; State; Zip Code 16 Dudley Street Fitchburg, MA 01420 | |

| | | |
|--|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internet/Website expense |
| | <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 10/10/2014 | Payee name One-Stop Printing | |
| Amount (\$) \$621.83 | Payee address City; State; Zip Code 611 University Drive Fort Worth, TX 76107 | |

| | | |
|--|---|--|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing push cards |
| | <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 10/23/2014 | Payee name One-Stop Printing | |
| Amount (\$) \$29.23 | Payee address City; State; Zip Code 611 University Drive Fort Worth, TX 76107 | |

| | | |
|--|---|--|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER - Production | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bindery - cutting postcards |
| | <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 09/29/2014 | Payee name PayPal | |
| Amount (\$) \$4.95 | Payee address City; State; Zip Code 2211 North First Street San Jose, CA 95131 | |

| | | |
|--|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fees/Charges incurred in online payment processing |
| | <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: |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

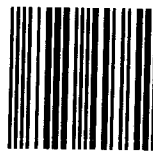
| | | | | | |
|--|---|--|--|---------------------------------|--------------|
| 1 PAGE # Schedule: 2/2 Report: 14/14 | | 2 FILER NAME Walker, Carey (Mr.) | | 3 ACCOUNT # (TEC filers) | |
| 4 Date 10/03/2014 | 5 Payee name Radio Saigon Dallas | | | | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address City; State; Zip Code 10935 Estate Lane Suite S180 Dallas, TX 75238 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio and print advertisement | | |
| | | | <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 10/07/2014 | Payee name TCTGM Corp | | | | |
| Amount (\$) \$200.00 | Payee address City; State; Zip Code 1700 Chip-N-Dale Drive Arlington, TX 76012 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertisement | | |
| | | | <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: |

CAREY WALKER



UNITED STATES
POSTAL SERVICE

1000



76111

U.S. POSTAGE
PAID
FT WORTH
76101
JAN 30
AMOUNT

\$1.
00063

Tarrant County Elections Admin.
2700 Premier Street
Ft. Worth, Texas 76111