# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction C	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY
NAME	SERGIO	L.	Date Received
	NICKNAME LAST	SUFFIX	TARRAI FRANCTIONS
	DE LEON		
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #:	CITY: STATE; ZIP CODE	NT COUNTY 13 PN 3: 2 KAPHILLIPRATE
Change of Address			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount \$
TREASURER	JEFF		Date Processed
NAME	NICKNAME LAST	SUFFIX	
	DAVIS		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT /	SUITE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 30th day before	e election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	XX July 15 8th day before	election Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year	Month Day	Year
COVERED	01 / 01 / 15 THR	оидн 06 / 30 /	<b>1</b> 5
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Primary	Description	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)
	JUSTICE OF THE PEACE, PCT	. 5 JUSTICE OF THE	PEACE, PCT. 5
	GO ТС	PAGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME	JUDGE SER	GIO L. DE LEON	15 Filer ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICE			
	COMMITTEE TYPE	COMMITTEE NAME	·	
	GENERAL SPECIFIC	COMMITTEE ADDRESS	ZOIS JUI BY:	
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME	ANT CONTRACTOR	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	PH 3: 27 HILLIPS HINISTRATOR	
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	1 % / [/].UU	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,562.00	
EXPENDITURE TOTALS	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,     UNLESS ITEMIZED		\$ 503.00	
4. TOTAL I		POLITICAL EXPENDITURES	\$ 9,707.45	
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DRTING PERIOD	DAY \$ 5,005.55	
OUTSTANDING LOAN TOTALS	(	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF Y OF THE REPORTING PERIOD	* 6,000.00	
18 AFFIDAVIT				
	LISA NEVAREZ NOTARY PUBLIC STATE OF TEXAS y Comm. Exp. 12-12-201	true and correct and includes all info under Title 15, Election Code.	perjury, that the accompanying report is ormation required to be reported by me	
		Signature of Can	didate or Officeholder	
	ribed before me, b	by the said	, this the	
Signature of officer a		Printed name of officer administering oath	Title of officer administering oath	

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:	
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor  ut-of-state PAC II	D#:)	7 Amount of contribution (\$)	
<b>0</b> 5 04 15	Cynthia Miller  6 Contributor address; 3800 Hollow Cuch Ben brook, Tx 76116	25. 🕰		
9 Contributor's r	principal occupation	9 Contributor's job title		
<b>A</b>	sultant	9 Contributor's job title		
10 Contributor's e	employer/law firm	11 Law firm of contributor	s spouse (if any)	
			- op ( a),	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date			Amount of contribution (\$)	
	Full name of contributor	D#:)	Amount of contribution (4)	
05/05/15	George R. Hoeppner			
	Contributor address; City; State; P.O. Box 350 Fort Worth, TX TUIO!	Zip Code	TARRANT PHELECTIONS ADD	
Contributor's r	principal occupation	Contributor's job title		
,	_ '		êg ω ⊣r	
Dives			<u> </u>	
Contributors	mployer/law firm	Law firm of contributor	s spouse (if angs 3 3 3 3	
If contributor is	s a child, law firm of parent(s) (if any)		77 Y	
OS OS IS	Full name of contributor  out-of-state PAC	D#:)  Zip Code	Amount of contribution (\$)	
	P.O. BOX 471451 FORT WORTH, TX TVI			
Contributor's R	principal occupation	Contributor's job title		
Contributor's employer/law firm  Law firm of contributor's spouse (if any)				
If contributor is	s 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.

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
JUDGE SERGIO L. DE LEON			3 Filer ID (Ethics Commission Filers)
5 Full name of contributor out-of-state PAC ID#:  OS/O+/IS  6 Contributor address; City; State; Zip Code  1323 Lee Ave.,  Fort Worth, Tx 76164		7 Amount of contribution (\$)	
8 Contributor's p	principal occupation	9 Contributor's job title	
Atton		Attorney at &	
10 Contributor's e	employer/law firm	11 Law firm of contributor	
Via	1 Law Firm	.,	- species ( a)
	s a child, law firm of parent(s) (if any)		
Doto			
O S ou Is	Full name of contributor out-of-state PAC II  J. D. Timmerson  Contributor address; City; State;  3302 Roosevelt  Tout Worth, Tx Tunoy	Zip Code	Amount of contribution (\$)
Contributor's p	principal occupation	Contributor's job title	
Reti	121		
	employer/law firm	Law firm of contributor	's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		FARRA IS JUL ) FRANK CTIONS A
Date	Full name of contributor	D#:	Amount of configuration (\$)
oslotlis	William W. Meadows  Contributor address: City: State: 3904 Ham: Iton  Fort Worth, Tx 76127		PH 3: 27
Contributor's p	principal occupation	Contributor's job title	
Re	altor	Realton wi h	Villian Riga
	employer/law firm	Law firm of contributor	
If contributor is	s a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

The Instruction Guide explains how to complete this fo	orm.  1 Total pages Schedule A(J)1: 3 of 21	
2 FILER NAME JUDGE SERGIO L. DE LEON	3 Filer ID (Ethics Commission Fi	lers)
4 Date  5 Full name of contributor out-of-state PAC II  OS   15   6 Contributor address; Cat Acc.	Zip Code 250. 20	
Fort Worth, TX 76119		
8 Contributor's principal occupation Awalla Funeral Home - Director	9 Contributor's job title  Director / Browka French &	tone
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  Full name of contributor Oslowing Date  Oslowing Harold D. Hammett		
Contributor address; City; State;  400 Menroe St, Str. 300  Fort Worth, Tx 74102	Zip Code 500.20	
Contributor's principal occupation	Contributor's job title	7
Altoner at low	TE Tel to model	FIL
Contributor's employer/law firm	Law firm of contributor's spouse (if any)	<del>70</del>
Hammett Law Firm	S A P	Z=
If contributor is a child, law firm of parent(s) (if any)	PH 3:	NOOO
Date Full name of contributor Out-of-state PAC II	# Amount of contaction &	~
oslorlis David Diez		
Contributor address; City; State: U. Westover Rd.  To I Worth Tx 76107	Zip Code (100.00	
	Contributor's job title	
Contributor's principal occupation	Contributor's job title	
Contributor's employer/law firm	Attorney at our	
Law Firm of Wich Phillips	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

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	JUDGE SERGIO L. DE LEON		
4 Date	5 Full name of contributor 🔲 out-of-state PAC II	D#:)	7 Amount of contribution (\$)
mel 1	1 inda Backlas		
05/10/15	6 Contributor address; City; State; 4336 Curzon Ave, Fort Worth, Tx Tue?	Zip Code	50.09
8 Contributor's p	principal occupation	9 Contributor's job title	
Reti		· ·	
10 Contributor's e	mployer/law firm	11 Law firm of contributor	s spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Data			
Date	Full name of contributor	D#:)	Amount of contribution (\$)
05/11/15	Mark Bauer		
•	Contributor address; City; State;	Zip Code	250.00
	Colleyville, TX 76034	,	
Contributor's p	rincipal occupation	Contributor's job title	
77	Consultant		
Contributor's e	mployer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
			<b>2</b> 8
Date	Full come of contributor		Amount of contribution (%)
J	Full name of contributor Out-of-state PAC	D#:	Ambunt occupation (5
05/11/3	Art Delcon		
, ,	Contributor address; City; State:	Zip Code	25器 3 千
	4400 Whitman		<b>新子</b> 200 □
	Fort Worth, TX 76133	Contributor's job title	
	rincipal occupation	Contributor's Job title	2 cm 2
	tired	Law firm of contributor	
Contributor's employer/law firm		Law firm of contributor	's spouse (if any)
If contributor in	a child, law firm of parent(s) (if any)		
ii contributor is	s a clinic, law little of paretings) (ii ally)		:
			:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total	pages Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer	ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC III LINDA De Leon 6 Contributor address; City; State; 400 Whitman Fort Worth, Tx 74133			unt of contribution (\$)
8 Contributor's p	principal occupation	9 Contributor's job title		
Red	:~d			
10 Contributor's e		11 Law firm of contributor's	spouse	(if any)
12 If contributor is	a child, law firm of parent(s) (if any)			
Date 05 III 5	Full name of contributor  out-of-state PAC II	D#:)		unt of contribution (\$)
	Contributor address; City; State; 2300 Race St. Fort Worth, Tx 70111	Zip Code	100	
Contributor's p	rincipal occupation	Contributor's job title	100	
hewis	labels The	Consultant		RA RA
	mployer/law firm	Law firm of contributor's		
If contributor is	a child, law firm of parent(s) (if any)			EDUNTY COUNTY PM 3: 21
Date	Full name of contributor Out-of-state PAC II	D#: )	Amoi	unt of contribution (\$)
05/12/15	Lee O. legers			
03(12(13	Contributor address; City; State: 201 Pecan St. For Worth, Tx 76102	Zip Code	1	00/30
Contributor's p	principal occupation	Contributor's job title		
Princi	801	The Royer	.s G	ywor
	mployer/law firm	Law firm of contributor's		
If contributor is	s a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

	and the second of the second o		The state of the s
Т	he Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	JUDGE SERGIO L. DE LEON		
4 Date			7 Amount of contribution (\$)
	5 Full name of contributor	D#:)	Amount of contribution (4)
03/12/15	Randall D. Moore		
, ,,,,	6 Contributor address; City: State; 3701 S. University St.	Zip Code	100,00
	For Worth, Tx 74109		
R Contributor's	principal occupation	9 Contributor's job title	
		4\lambda \lambda \lamb	
10 Contributor's	oney	PASV	44
		11 Law firm of contributor	s spouse (if any)
	c law From		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:	Amount of contribution (\$)
oslilis	Steve Murin		
971113	Steve May 171		
	Contributor address; State; State;	Zip Code	100.80
	For worth, Tx 76164		
Contributor's r	principal occupation	Contributor's job title	
	· _ ·	Contributor's job title	
Stock	ger ds		<u>Ф Д »</u>
Contributor's e	mployer/law firm	Law firm of contributor	s spouse (if any)
			5
If contributor is	s a child, law firm of parent(s) (if any)		SE F AF
			TARRANT CTIONS AD
Date	Full name of contributor out-of-state PAC	D#:)	Amount of controution (\$)
1.120	Dwain Dent		<b>Σ</b> <sup>6</sup> ω Σ
02/11/12			Stook No Z
	Contributor address; City; State:	Zip Code	700.
	1120 Denn St.		
Contributed	Fork Worth, 12 76102	Contributor's job title	
		•	, , .
	very at law	Attorney of	
		Law firm of contributor	's spouse (if any)
'Σe.	nt how Firm		
If contributor is	a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

	The state of the s			
Т	he Instruction Guide explains how to complete this fo	orm.	1 Total	pages Schedule A(J)1: of 2
JUDGE SERGIO L. DE LEON			3 Filer	D (Ethics Commission Filers)
4 Date	5 Full name of contributor	D#:)	7 Amo	unt of contribution (\$)
05/14/15	6 Contributor address; City; State; 6145 Wedgwood 27. Fort Worth, Tx	Zip Code	250.	<u>00</u>
8 Contributor's p	rincipal occupation	9 Contributor's job title		
M	my at how	Attoner	at Low	
10 Contributor's e	umplover/law firm			
	sue G. Engler, Ally	11 Law firm of contributor	s spouse	iii any)
	a child, law firm of parent(s) (if any)			
Date	Full name of contributor	D#: )	Amou	unt of contribution (\$)
05/14/15	San Juan Bekera		•	
·	Contributor address; City; State; 5328 Wend worth St. Fort Worth, Tx 76132	Zip Code	l	TAF
Contributor's p	principal occupation	Contributor's job title		
Deputy Consule Deputy		Deputy Co		
Contributor's e	mployer/law firm	Law firm of contributor	s spouse	ED COUNT
If contributor is	a child, law firm of parent(s) (if any)			NI Y 3: 27 TRATOR
Date	Full name of contributor	D#:)	Amoi	unt of contribution (\$)
21/11/20	Martha Williams		741104	
		Zip Code		500.92
	Fort Worth, Tx 76137			
Contributor's p	principal occupation	Contributor's job title		
Rodin	ا			
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.

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)
ostatis	6 Contributor address; City; State; 211 Buckinghan Arc.	Zip Code	500.∞_
8 Contributor's p	principal occupation	9 Contributor's job title	
AST +	7	TT amu	ultant
10 Contributor's		11 Law firm of contributor	
	,	TI LUV IIIII OI COMMIDGIO	o opedee (ii diiy)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor  out-of-state PAC	04.	Amount of contribution (\$)
	,	D#:)	
oslinlis	Jim Austin		
	Contributor address; City; State;	Zip Code	100.22
	2401 Scott Ave		(
Contributor's r	Ford Worth, Tx 76103	Contributor's job title	
		Contributor's job title	
CEO	Austin Companies		
Contributors e	mployer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		6 B
			TARF
Date	Full come of contributes		
		D#:)	Amount of contribution (\$)
oslialis	Mille Moncrict Campai	m	
• •	Contributor address; City; State:		150 % 300
	1777 Taylor St., Stc. 1030		20 G 2
	Fort Worth, Tx 76102		- 2 N Z
	principal occupation	Contributor's job title	
torn	ver Mayor		
Contributor's e	mployer/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

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 9 らも 2)
2 FILER NAME	JUDGE SERGIO L. DE LEON	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor  ut-of-state PAC II	D#: \	7 Amount of contribution (\$)
	1		
05/20/15	Kobert ternandez		2 03
	Robert Fernandez  6 Contributor address; City; State; 2305 Colonial Parkway Fork Worth, Tx 76109	Zip Code	250.º
Contributor's r	principal occupation	9 Contributor's job title	
_	Amelpar occupation	•	
CPA		CPA	
10 Contributor's e	employer/law firm	11 Law firm of contributor	s spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date			Amount of contribution (\$)
	Full name of contributor Out-of-state PAC		Amount of contribution (4)
05/10/15	Linebarger, Goggamy Rlaw,	& Sengen, we	1000.30
	Contributor address; City; State;	Zip Code	
Contributors r	Mustin, Tx 78760	Contributor's job title	
		·A 11	0 P
	s at how	Ktorys, a	Row
Contributor's e	employer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		ARRAIN IS JUL CFRANK
Date	Full name of contributor Out-of-state PAC	D#: )	Amount of cambution (\$)
21/21/20	Wichael L. Pech		<b>Æ 3</b> 60
03/12/12	Withard L.		SIES CA
	Contributor address; City; State:	Zip Code	100.9
	4117 Glemmond Dine Ent Worth, Tx 7610	٩	₩ 60
Otile dada -		Contributor's job title	<b>.</b>
.A. I. I	orincipal occupation	۱ ۱۱۸۰ ا	
Contributaria	@ Vo-		do enqueo (if any)
_	employer/law firm	Law firm of contributor	s spouse (ii aliy)
Brown			
If contributor is	s 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.

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC ti	D#:)	7 Amount of contribution (\$)
oslislis	A AAA		100.90
8 Contributor's p	principal occupation	9 Contributor's job title	
G	SA	GSA	
10 Contributor's e		11 Law firm of contributor's	s spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)
05/28/15	Ed Canas		200.00
	Contributor address; City; State; 1441 N. Main St.  Fort Worth, Tx 76164	Zip Code	250,∞
Contributor's p	principal occupation	Contributor's job title	
Atter	at ha	Attu @ 1	ر سم
	employer/law firm	Law firm of contributor's	s spouse (if any)
Canas	* Flores		
	s a child, law firm of parent(s) (if any)		ARRA FINAL CTIONS
Date	Full name of contributor out-of-state PAC_II	D#:)	Amount of Carbibution (\$)
21/88/20	Dr. Dale L. White  Contributor address: City: State:  (141 Long Are.  Fort Worth, Tx 76114	Zip Code	PN 3:128 NISTRATOR
Contributor's p	principal occupation	Contributor's job title	
	objetie my	Doctor	
Contributor's e	employer/law firm	Law firm of contributor's	s spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

7	The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date 05/30/15	5 Full name of contributor out-of-state PAC	D#:)	7 Amount of contribution (\$)
02/30/12	6 Contributor address; City; State;		500.00
8 Contributor's	principal occupation	9 Contributor's job title	
10 Contributor's	employer/law firm	( 1,903.00	
10 Contributors	employer/law lifti	11 Law firm of contributor's	s spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date			Amount of contribution (\$)
	Full name of contributor Out-of-state PAC I	D#:)	Amount of contribution (4)
05/25/15	Shirley Moreno		100,00
-	· · · · · · · · · · · · · · · · · · ·	71-0-4-	(40)
	Contributor address; City; State;	Zip Code	
	Fort Worth, Tx T4103		
Contributor's	principal occupation	Contributor's job title	
Re di	•	, , , , , , , , , , , , , , , , , , , ,	
Contributor's e	employer/law firm	Law firm of contributor's	s spouse (ireny) & S
If contributor is	s a child, law firm of parent(s) (if any)		ANI ANI
			SE COM
Date			
	Full name of contributor Out-of-state PAC I	D#:	Amount of commutation (\$)
05/26/13	Stephen C. Moxwell		l≧ ä ⊒
	Contributor address; City; State:	Zip Code	101 = 3
	Fort Worth, Tx 741	07	
Contributor's	principal occupation	Contributor's job title	
ν.	111	, A LL	s
Contributor's s	employer/law firm	Law firm of contributors	a species (if any)
		Law firm of contributor's	s spouse (ii airy)
Mes	well four From		
If contributor is	s a child, law firm of parent(s) (if any)		
		Manual Control of the	A STATE OF THE STA

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 12 of 21
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date 05/21/15	5 Full name of contributor   out-of-state PAC    hee F. Christic  6 Contributor address; City; State; 306 W. 722 St., Ste. 901  For Worth Tx 74102	Zip Code	7 Amount of contribution (\$)
9 Contributor's	principal occupation	9 Contributor's job title	
	_	A N	0
	ty at Par	Atty 6	tand
10 Contributor's	employer/law firm	11 Law firm of contributor	s spouse (if any)
Page Ha	when, & Christie		
	s a child, law firm of parent(s) (if any)		
- II contained in	or a dime, law inition parameter, (ii arry)	·	
			9 E 8 _
			7 8 5 5
Date	Full name of contributor	D#:)	Amount of commutation (\$)
oslalis	Scott W. Green		NS L AN
	Contributor address; City; State; 3905 Summercrast 2r.	Zip Code	IS PH 3:
	Fort Worth, TX 7610	9	
Contributor's p	principal occupation	Contributor's job title	≨ <b>~</b> ~
Real t	·	Realton	9 6
Contributor's e	mployer/law firm	Law firm of contributor	s spouse (if any)
lé contributor i	a child low firm of posent/a) (if any)		
ii contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:	Amount of contribution (\$)
	_		.,,
06/01/15	Cade Lovelace		
· · ·		Zip Code	250.99
	Contributor address; City; State:	_,p 0000	
	Fort Worth, Tx 76110	Ì	
Contributor's	principal occupation	Contributor's job title	
W	Amoreu at how	Attorney	at few
Contributor's employer/law firm  Law firm of contributor			
		Latt IIIII of Contributor	
ren	lace law From		
If contributor is	s 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.

SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this f	orm.	1 Total pages Si 13 っよ	chedule A(J)1: Z
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethic	cs Commission Filers)
4 Date	5 Full name of contributor   out-of-state PAC    Trancisco Hernande		7 Amount of co	ontribution (\$)
06/01/15	6 Contributor address; City; State; 200 W. Weather In 1 St.	Zip Code	5000	<u>න</u>
8 Contributor's p	principal occupation	9 Contributor's job title	_	
1/1/1.	. 1 \ n /	Attorne	. + Bon	,
10 Contributor's e	en at how employer/law firm	11 Law firm of contributor	e spouse (if any)	
(1	. D	II Law littl of Contributor	s spouse (ii airy)	
Herman	der four Firm			
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full rooms of contributes	D#.	Amount of co	entribution (\$)
. 1 1	Full name of contributor	D#:		
21/10/00	Ulises Salgado		250	00
		Zin Code	250	
	Contributor address; City; State; 3822 £. Rosedale St.	Lip Code		
	Forh Worth, TX 76105			
Contributor's p	rincipal occupation	Contributor's job title		
1	Pastores, Owner Operator	Owner (Op	- retur	
Contributor's e	mployer/law firm	Law firm of contributor		
COMMIDATOR S C	inprojentar iiii	Law IIIII of Continuotor	s spouse (ii ame)	
				중품 🗲 꾸
If contributor is	a child, law firm of parent(s) (if any)			BE F ST
				<b>添っる 当</b>
				3 0
Date	Full name of contributor Out-of-state PAC	D#· \	Amount of co	
	_	Urr	7 41100111	30 W
	Deguna Wood			<b>S</b>
06/04/13	Contributor address; City; State:	Zip Code	23.9	<sup>20</sup> ⊊ 66 ~ ≦
	1709 Forn Drive	Zip Code	<b>*</b>	
-	Mansfield Tx 76043			
Contributor's p	rincipal occupation	Contributor's job title		
TIM	Ju	N 1	Relation	
	mployer/law firm	Law firm of contributor		<u> </u>
Contributor s e	inployernati ilini	Law IIIII of Contributor	a apouse (ii uiiy)	
If contributor is	a child, law firm of parent(s) (if any)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

7	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:
JUDGE SERGIO L. DE LEON			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)
06/05/15	6 Contributor address; City; State; 2324 Winton Terrace V	Zip Code	250.20
8 Contributor's p	principal occupation	9 Contributor's job title	
Own	er. B&G Rentals	-	
10 Contributor's e	employer/law firm	11 Law firm of contributor	s spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	477	
Date	Full name of contributor	D#-	Amount of contribution (\$)
obloblis			
00/00/13	Terry B. Thompson		25.20
	Contributor address; City; State;	Zip Code	
	For Worth, TX Toll		
Contributor's p	rincipal occupation	Contributor's job title	<u> </u>
Res	med !		SE AR
Contributor's e	mployer/law firm	Law firm of contributor's	s spouse (if any)
			=≥ = ==
If contributor is	a child, law firm of parent(s) (if any)		新一 Om
·i			TARRANT COUNTING S SPOUSE (If any) S SPOUSE (If any) S ADMINISTRA
Date	Full name of contributor  ut-of-state PAC II	D#:	Amount of comibutio (00)
oblodis	Antonio 6. Maraks		
			100.5
	Contributor address; City; State:	Zip Code	
	Fort Worth, Tx 76133		
Contributor's p	rincipal occupation	Contributor's job title	
Ros	ned		
Contributor's e	mployer/law firm	Law firm of contributor	s spouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
55			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A(J)1

	The state of the s			
ד	he Instruction Guide explains how to complete this f	orm.	1 Total pa	nges Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID	(Ethics Commission Filers)
4 Date	5 Full name of contributor	D#: )	7 Amoun	at of contribution (\$)
	lamas Atvinson			
06/06/15	6	Zip Code	50	, ২১
	Fork Worth, TX 74137			
8 Contributor's p	principal occupation	9 Contributor's job title		
Red	red			
10 Contributor's	employer/law firm	11 Law firm of contributor	's spouse (if	any)
· .				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date			Amoun	t of contribution (\$)
.1	Full name of contributor	D#:)	7 11110011	( or continuous. ( )
06/07/15	Mark Stelmas			
	Contributor address; City; State; 3237 Wa らるられ みた	Zip Code	2	90.00
	3237 Wabash Ave		**	8 6 8
Contributor's r	Fort Worth, Tx 76109 principal occupation	Contributor's job title	7-	2 a 3
	·	Contributors job title		
	Kred			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Contributors e	mployer/law firm	Law firm of contributor	's spouse (if	72 -
If contributor is	a child, law firm of parent(s) (if any)			ED COUNT
				\$ =
				3 8 -
Date	Full name of contributor  ut-of-state PAC	D#:)	Amoun	t of contribution (\$)
06/05/15	Michelle L. Winters			
, , , ,	Contributor address; City; State: 2630 Lake point Dr. Apt. 1125	Zip Code	5	50.80
		75050-0602		
Contributor's r	principal occupation	Contributor's job title		
Homewaller				· ·
Contributor's employer/law firm Law firm of contributor			's snouse (if	any)
Contributor's employemant firm			a apouse (ii	arry)
if contributor is	a child, law firm of parent(s) (if any)			Ì

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:		
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)		
06/06/13	6 Contributor address; 7425 Ewing Are. For Worth, The Mullip		45.80		
8 Contributor's p	principal occupation	9 Contributor's job title			
Pho	tography by Emerics	Own			
10 Contributor's e	tography by Emerics mployer/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	Full name of contributor	O# .	Amount of contribution (\$)		
	<b>1</b>	D#:	,,,		
1 .	Tari Bauer				
OVIDIS Contributor address: City: State: Zip Code 327.20					
, , -					
	colleyville TX 74034				
Contributor's p	rincipal occupation	Contributor's job title			
Hom	e maller.				
Contributor's e	mployer/law firm	Law firm of contributor	s spouse (if any		
If contributor is	a child, law firm of parent(s) (if any)	v.	JUL 1:		
Date	Full name of contributor		Amount of controlling (5)		
	Full name of contributor	U#:	Amount of contraction (C)		
	Juana Granados		200 200 5		
06/05/12		Zip Code	30 2 3 27 X		
	Fort Worth, Tx 76	134			
Contributor's p	rincipal occupation	Contributor's job title			
Res	$\sim \lambda$				
Contributor's employer/law firm Law firm of contributo			's spouse (if any)		
If contributor is	If contributor is a child, law firm of parent(s) (if any)				
ii continuator is	· a sime, tare title of pareinto) (ii airy)				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

SCHEDULE A(J)1

The Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1:		
2 FILER NAME JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)		
4 Date 5 Full name of contributor  out-of-state PAC II	D#: )	7 Amount of contribution (\$)		
_				
6 Contributor address: City: State:	Zin Code	30.20		
6 Contributor address; Loud Lange 1504 White willow Lange Pur Tx 76002				
8 Contributor's principal occupation	9 Contributor's job title			
City of Fre World	•			
10 Contributor's entoloyer/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 Full name of contributor	D#:	Amount of contribution (\$)		
odoblis Jaime S. Martine	2	1.0-		
	Zip Code	145,00		
Contributor address; City; State;	_,			
Contributor's principal occupation	Contributor's job title			
IT Consultant	Contributor's job title			
Contributor's employer/law firm	Law firm of contributor's	snouse (if anth		
	Law limit of Contributor 3			
If contributor is a child, law firm of parent(s) (if any)		52 € \$		
		UL I		
Date Full name of contributor out-of-state PAC_II	)#: )	Amount of contaction (\$)		
		<b>2 ≥</b> 50		
Oblob 15 Stack In Reimer		الق في القرار		
Contributor address; City; State:		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
5724 Reminden ct. upt Fort Worth, Tx Tu		•		
Contributor's principal occupation	Contributor's job title			
Contributor's employer/law firm	spouse (if any)			
If contributor is a child, law firm of parent(s) (if any)				
·				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:   り ッチ こ
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	D#:)	7 Amount of contribution (\$)
oc/ab/is	6 Contributor address; wech car.  For + Worth, To 7603	Zip Code	80.00
a Contributors			
1 1 1	orincipal occupation  The maken	9 Contributor's job title	
10 Contributor's e	employer/law firm	11 Law firm of contributor	's spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
12 ii contributor is	s a crind, law mill of parends) (if any)		·
Date	Full name of contributor	D#:	Amount of contribution (\$)
06/06/13	Margie Salinas		
(	Contributor address; City; State;	i	100.00
	Took Worth, Tx 7611)		
Contributor's p	principal occupation	Contributor's job title	部を発
Resi		1	SE FEN
	employer/law firm	Law firm of contributor	's spouse (if apple 30 CM
If contributor is	a child, law firm of parent(s) (if any)		STRATOR
Date	Full name of contributor out-of-state PAC_I	D#:)	Amount of contribution (\$)
obloslis	Contributor address; Kandrick; State:	100.20	
	For Worth, Tx 761	0°1	
•	principal occupation	Contributor's job title	
WA	orney at Lan	Attorney	at for
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)
	s a child, law firm of parent(s) (if any)		
	ATTACH ADDITIONAL CODIES	AT THIS SOUEDIN E AS A	NEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A(J)1

Т	he Instruction Guide explains how to complete this f	orm.	1 Total pa	ages Schedule A(J)1:
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID	(Ethics Commission Filers)
4 Date	5 Full name of contributor  ut-of-state PAC I	D#:)	7 Amour	nt of contribution (\$)
poloplis			१७४	ص <sup>و</sup> . ر
8 Contributor's p	rincipal occupation	9 Contributor's job title		
10 Contributor's e		11 Law firm of contributor	's spouse (if	any)
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor	D#:)	Amoun	t of contribution (\$)
aldolis	Sonia Martinez		2	<b>4</b> 6 8
	Contributor address; City; State; 1209 Rumfield Kul,  Fort Worth, Tr 7610	Zip Code	di	TARRANT 115 JUL 13 BEFRANK PH SEFTIONS ADD
Contributor's p	rincipal occupation	Contributor's job title		+ <del>                                     </del>
Q.A		•		屋 の 一口
Contributor's en	mployer/law firm	Law firm of contributor	's spouse (if	COUNT PH 3:
If contributor is	a child, law firm of parent(s) (if any)			ਹਿਨ 28 <b>≺</b>
Date	Full name of contributor	D#:)	Amoun	t of contribution (\$)
aplapliz	Contributor address; City; State:		14	00.œ
Contributor's p	rincipal occupation	Contributor's job title		
WA	torner at har	12Hum	cod	
Contributor's e	mployer/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

SCHEDULE A(J)1

7	The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedu		
2 FILER NAME	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Co.	mmission Filers)	
4 Date	5 Full name of contributor  out-of-state PAC I	D#:)	7 Amount of contrib	ution (\$)	
06/06/15	6 Contributor address; City; State; 9108 Cliffside Tx 7	Zip Code	200,2		
9 Contributor's	principal occupation	9 Contributor's job title			
	Ave I	9 Contributor's job title			
10 Contributor's	employer/law firm	11 Law firm of contributor	's spouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor	D#:)	Amount of contribu	ution (\$)	
or ladis	Contributor address; City; State; Zip Code 1305 Greenway That,		100.2		
	For worth TX	16116	6		
Contributor's r	principal occupation	Contributor's job title	<b>a</b> [2]	2	
		Contributor 3 job title	7 8	<b>3</b> 7	
1-1-	Consultand			2 2	
Contributor's e	employer/law firm	Law firm of contributor	's spouse (if any)	L RAN	
If contributor is	s a child, law firm of parent(s) (if any)		MINISTR	<b>E HJ</b> 6	
Date	Full name of contributor Out-of-state PAC I	D#:)	Amoun of co	ution (25)	
B606/15	Steven R. Posle		•		
•	Contributor address; State:		250,80		
	Ford Worth, TX 7610				
Contributor's p	orincipal occupation	Contributor's job title			
UEA. of Fort Worth Direct			~		
		Law firm of contributor	r's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 (JUDICIAL) 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. of 21 3 Filer ID (Ethics Commission Filers) 2 FILER NAME JUDGE SERGIO L. DE LEON Date 7 Amount of contribution (\$) 5 Full name of contributor out-of-state PAC ID#; 150,00 9 Contributor's job title 8 Contributor's principal occupation Redney 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 Amount of contribution (\$) Full name of contributor out-of-state PAC ID#:\_\_\_\_ Ellerlan North Richard Hills, TX 76180 Contributor's principal occupation Contributor's job title Alvarado 12 Mercian Contributor's employer/law firm Law firm of contributor's spouse (if an 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 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.

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising 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 Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) JUDGE SERGIO L. DE LEON 087 4 Date 5 Payee name Dick Abrams vee address; City; State; Zip Code 06-15-15 6 Amount (\$) 7 Payee address; UI45 Wedgwood Dr. 1000.00 Fort worth, Tx 76133 (a) Category (See categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, complete Schedule T PURPOSE Check if Austin, TX, officeholder living expense wan fayment **EXPENDITURE** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date AT + T 06-29-15 City; State; Zip Code P.O. Box 537104 154.00 Atlanta, GA. Description Check if travel outside of Texas, company **PURPOSE** Check if Austin, TX, officeholder living exp OF Campaign cell phose **EXPENDITURE** Complete ONLY if direct Office sought Office held Candidate / Officeholder name expenditure to benefit C/OH Payee name Date 06-29-15 Jacinto Ramos Campaign Payee address; City; State; Zip Code Amount (\$) P.O. Box 4885 Ford Worth, TX 76164 100/2 Category (See categories listed at the top of this schedule) Description PURPOSE Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **EXPENDITURE** Conditiontin Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Advertising Expense **Event Expense** Solicitation/Fundraising Expense Accounting/Banking 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) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME JUDGE SERGIO L. DE LEON 1 of 7 4 Date 5 Payee name Amael Lucbanes 01-01-15 7 Payee address; 6 Amount (\$) 3321 Ryan Are Fort Worth, TX 74110 120.00 (a) Category (See categories listed at the top of this schedule) (b) Description 8 \_\_ Check if travel outside of Texas, complete Schedule T **PURPOSE** Donation by officeholder OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date Booker Industries 01/02/15 Payee address; City; State; Zip Code 2344 Farrington 75,00 Dallas, Tx 75207 Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, **PURPOSE** OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Consulting expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date Amount (\$) 100.00 Fort Worth, TX 76107 Category (See categories listed at the top of this schedule) Description Check if travel outside of Texas, complete Schedule T PURPOSE Advertising Foxpense OF Check if Austin, TX, officeholder living expense EXPENDITURE Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officebolder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica	·	ages/Contract Labor	Other (enter a category not listed above)	)
	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission File	ers)
4 Date	5 Payee name			
01/22/15	AT. T			
6 Amount (\$)	7 Payee address; City; State; Zip Code P.O. Box 53710中			
100,2	Atlanta, GA 30353-710			
8	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE		Check if travel	outside of Texas, complete Schedule T	
OF EXPENDITURE	Campaign cel phone	Check if Austin	7, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/O				
Date	Payee name			ا بعد
01/23/15	Ruben Garcia Campa Payee address; City; State; Zip Code	ign 🔩	87: E 20 1A	1
Amount (\$)			<b>₩</b> ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩	5
100.2	300 W. Bellenip		NS P AN	<u> </u>
10	Fortworth, TX 46196		글 및 C 그	
PURPOSE	Category (See categories listed at the top of this schedule)	Description  Check if travel of	outside of Tixas; compets Schedule T	O
OF EXPENDITURE	Condibution	Check if Austin,	TX, officeholder living expense -	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OH	1			
Date	Payee name			
03/03/15	U.S. Post Office			
Amount (\$)	Payee address; City; State; Zip Code			
64.0°	Feel Worth, TX 70147		Application of the second of t	
	Category (See categories listed at the top of this schedule)	Description		
PURPOSE		Check if travel	outside of Texas, complete Schedule T	
OF EXPENDITURE	Postaje	Check if Austin	, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

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 co	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
3 of 7			
04/2/15	5 Payee name	an 4	
6 Amount (\$)	7 Payee address; City; State; Zip Code	· ·	
13	2808 Shamricke Am, sk.	c	
287.13	Ford worth, Tx 76107		
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE		Check if travel of	outside of Texas, complete Schedule T
OF EXPENDITURE	Printing Exponer	Check if Austin,	TX, officeholder living expense
EXPENDITORE	٦		
	Candidate / Officeholder name	Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office Sought	M Y
Date	Payee name		7 5 <b>3</b> 3
'			ARRA IS JUL ECTIONS
05/09/15	Far Greater Historical	N.A.	SE P AT
Amount (\$)	Payee address; City; State; Zip Code		\$± ω ∃Γ
	2902 Lulu		<b>是 20</b> 00000000000000000000000000000000000
100.00	Fort Worth, Tx 76104		<b>%</b> ₹ <b>5</b>
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE		· —	utside of exas, complete Schmule T
OF EXPENDITURE	nonation	Check if Austin,	TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/O	<del>1</del>		
Date	Payee name		
	•		
05/16/15	Tarront Co. Demo.	Party	
Amount (\$)	Payee address; City; State; Zip Code	·	
- 6 00	2812 Race Street		
125.00	Fort Worth, Tx 761	1:1	
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE	,	. —	outside of Texas, complete Schedule T
OF EXPENDITURE	Donation Condition	Check if Austin,	TX, officeholder living expense
	,		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/Ol		•	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

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

Contributions/Donations Made B Candidate/Officeholder/Politica		nting Expense laries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide explains ho	ow to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME JUDGE SERGIO L. DE LEON		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05 22 15	Sergio L. DeLeon		
6 Amount (\$)*	7 Payee address; City; State; Zip C	ode	
100.00	Fort Worth, Tx 701	٦٥	
8	(a) Category (See categories listed at the top of this schedul		
PURPOSE	Pactial	Check if travel o	outside of Texas, complete Schedule T
OF EXPENDITURE	Reimbursement	Check if Austin,	TX, officeholder living expense
	Kembon		
9 Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		2 E 8
- ما ممارح	N= T		
05 22 15 Amount (\$)	Payee address; City; State; Zip C	ada	TARRANT 15 JUL 13 ECFRANK PHECFIONS ADD
Amount (4)	P.O. Box 537104	ode	
130.50	·	niad	
	Category (See categories listed at the top of this schedu		
			utside of Texas, casplete Schedule
PURPOSE OF	languige are phone		TX, officeholder leng experies
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OI-	Candidate / Officeholder name I	Office sought	Office held
Date	Payee name		
05/22/14	NALTO Educational F		
Amount (\$)	Payee address; City; State; Zip C	ode	
400.00	1122 W. Washington 13h	المار مارد مار	
400.0	Los Angeles CA 9		
	Category (See categories listed at the top of this schedu	le) Description	
PURPOSE		Check if travel or	utside of Texas, complete Schedule T
OF EXPENDITURE	Conference registration	Check if Austin,	TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	1		
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED	DED

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Accounting/Banking Fees Consulting Expense Food/Bevera Contributions/Donations Made By Gift/Awards/I Candidate/Officeholder/Political Committee Legal Service		Food/Beverage Exp Gift/Awards/Memor Legal Services	Office Overhead/Rental Expense T Beverage Expense Polling Expense T wards/Memorials Expense Printing Expense T		Transportation I Travel In Distric Travel Out Of D	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
4 7-1-1 0-11-1- 51-			•		•	2 5iles ID (5	thing Con		Filom
1 Total pages Schedule F1:	JUDO	E SERGIO L.	DE LEON	I		3 Filer ID (E	tnics Con	MISSION	i Filers)
4 Date	5 Payee na								
06-01-13	E	eward '	Perkin	ر					
6 Amount (\$)	7 Payee a		ty; State; Z						
(00.80	I	24 Combo	•	(-					
	Tov	+ Worth,	7× 76	247					
8	(a) Category	/ (See categories listed	at the top of this s	chedule)	(b) Description				
PURPOSE						l outside of Texas,			
OF EXPENDITURE	Consi	ulting Toxy	unse		Check if Aust	in, TX, officeholder	living exper	se	
		. 7							
9 Complete ONLY if direct		late / Officeholder	name		Office sought	¥; 8	C Offic	id.	
expenditure to benefit C/O	1				<u>and the first fir</u>	F	0	<u>en</u>	<u> </u>
Date	Payee na	ame					98		20
						1 .	ご美	-	Z_
06-03-15	Sen	Mia L.	De Les	<b>0</b> ~			축꽃	ω	
Amount (\$)	Payee a	Majo L.  ddress; Ci	tv: State: 7	ip-Code			室		80
	45	21 0.42	A~.	.,, 0000			473		<u></u>
176,00	, , ,			<b></b> .			200	*	=
	to	+ Worth	$\cdot$ , $\cdot$ $\times$	7618	97	7.5	<b>=</b>	8	·<
	Category	(See categories listed	at the top of this s	chedule)	Description				
PURPOSE						outside of Texas, c	-		
OF EXPENDITURE	Rein	burrement			L Check if Austi	n, TX, officeholder li	iving expen	3 <b>e</b>	
					<u> </u>	Marie			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ate / Officeholder	name		Office sought		Offic	e held	
expenditure to benefit C/O/	•								
Doto	Payee n	ame							
Date	1 ayee ii	anne							
06-06-15	Beni	to Gav	1110						
Amount (\$)	Payee a	ddress; Ci	ty; State; Z	ip Code					
	640	n wim	iste RV	M					
375.00	5	· Wath	TV	16183					
	X				Description				
Category (See categories listed at the top of this schedule)  PURPOSE  Category (See categories listed at the top of this schedule)  Description  Check if travel outside of Texas, complete Schedule T									
OF	_					n, TX, officeholder I	-		
EXPENDITURE Food & Beverage Check if Austin, TX, officeholder living expense									
zyme									
Complete ONLY if direct Candidate / Officeholder name Office sought Office held									
expenditure to benefit C/Oh									
	ΛТ	TACH ADDITIO	VAL CODIES	OF THIS	SCHEDULE AS NE	EDED			
	ΑI	I VOLI VODI I IOI	AL COPIES	or mis	COLIEDOLL AO NE				

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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:			3 Filer ID (Ethics Commission Filers)		
4 Date			L		
	5 Payee name				
06-06-15	Jeft Davis				
6 Amount (\$)	7 Payee address; City; State; Zip Code 420 Throckmatm, Ste. 240				
3,500.5	Fort Worth, Tx Trig	2			
8	(a) Category (See categories listed at the top of this schedule)	(b) Description	l outside of Texas, complete Schedule T		
PURPOSE OF	_	. —			
EXPENDITURE	Final bon payment	CHECK II Austii	n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oi	Candidate / Officeholder name H	Office sought	Office held		
Date	Payee name				
06-06-15	Juan Perez		701 1.EC		
Amount (\$)	Payee address; City; State; Zip Code		ARR FRAN		
2,500.00	Ceder Hill, Tx 7510	o4	AND AND		
	Category (See categories listed at the top of this schedule)	Description	l 起,cm		
PURPOSE			outside of Texas, compet School T		
OF EXPENDITURE	Firel ban payment	Check if Austin	n, TX, officerbider lives expenses		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held		
Date	Payee name				
Ob. 08-15 North Side Legacy Foundation Amount (5) Payee address; City; State; Zip Code					
Amount (\$)	Payee address; City; State; Zh Code				
100.00	For worth, TX 76167				
	Category (See categories listed at the top of this schedule)	Description			
PURPOSE	- 11	Check if travel	outside of Texas, complete Schedule T		
OF EXPENDITURE	Donation	Check if Austin	n, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

### POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) (of 3 JUDGE SERGIO L. DE LEON 4 Date 5 Payee name 7 Payee address; City; State; Zip Code 03-19-15 6 Amount (\$) Arlington Heights Station political contributions Fort Worth, TX 76147 intended (b) Description (a) Category (See categories listed at the top of this schedule) 8 **PURPOSE** Check if travel outside of Texas, OF **EXPENDITURE** postage Check if Austin, TX, officeholder Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH Date Payee name 04-04-15 Juan Perez City; State; Zip Code Amount (\$) 1000,00 9108 Cliffside Reimbursement from Cedar Hill, Tx 75104 Category (See categories listed at the top of this schedule) (b) De political contributions intended (b) Description **PURPOSE** Check if travel outside of Texas, complete Schedule T OF **EXPENDITURE** loan payment Check if Austin, TX, officeholder living expense Office sought Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH Payee name ee address; City; State; Zip Code 04-21-15 Amount (\$) 2808 Shamrock Ave, Ste C 200,00 Reimbursement from political contributions Fort Worth, TX intended Category (See categories listed at the top of this schedule) (b) Description **PURPOSE** Check if travel outside of Texas, complete Schedule T OF Printing expense EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
2 . 8 3	JUDGE SERGIO L. DE LEON				
4 Date	5 Payee name				
05-14-15	7 Payee address; City; State; Zip Code				
6 Amount (\$)					
,	Arlington Height, Stad				
Reimbursement from political contributions intended	Fort Worth, Tx 7				
8	(a) Category (See categories listed at the top of this schedule)	(b) Description			
PURPOSE		Check if travel outside of Texas, complete Schedule T			
EXPENDITURE	postage	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought Office held			
Date	Payee name				
05/20/15	Payee address; City; State; Zip Code	BY: €			
Amount (\$)					
5,88	Arlington Heights Statis				
Réimbursement from political contributions intended	Fort Worth, Tx 761				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas, complete the comple			
Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH					
Date	Payee name				
06/20/15	Office Depot				
Amount (\$)	Payee address; City; State; Zip Code				
73.50	401 Cansoll Street				
Reimbursement from political contributions intended	Fort Worth, TX 7	6107			
PURPOSE	Category (See categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas, complete Schedule T			
OF EXPENDITURE	event expunse	Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Waces/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

`	Candidate/Officeholder/Politi	•	al Services	Salaries/Wages/	Contract Labor	Other (enter a cate		ve)
_		Th	e Instruction Guide explains	how to compl	ete this form.			
1	Total pages Schedule G:	2 FILER NAME				3 Filer ID (Ethi	cs Commission	Filers)
	3043	JUDGE	SERGIO L. DE LEO	N				
4	Date	5 Payee name						
	06/06/15		yrens					
6	Amount (\$)	7 Payee address						
	26.00	3100	McCart					
	Reimbursement from political contributions intended	Fort	McCart - Worth, Tx					
8	PURPOSE	(a) Category (See ca	tegories listed at the top of this sche	dule) (b) De	escription			
	OF					tside of Texas, complete		
<u> </u>	EXPENDITURE		expense		Check if Austin, 1.	X, officeholder living ex	pense	
9	Complete ONLY if direct expenditure to benefit C/0		Officeholder name	Office	e sought		Office held	
F	Date	Payee name						
								4.
	Amount (\$)	Payee address;	City; State; Zip	Code		BY:	2015 J	<b>d</b>
						lä	5 L	ARR.
	Reimbursement from political contributions					35		<b>Σ</b> Τ
_	intended	Category (See ca	tegories listed at the top of this sche	dule) (b) De	escription		<u>~</u> ~	<b>-</b>
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	and the second		_ '	side of Texas, compl	Schedule	200 200
	EXPENDITURE			E	_	X, officeholder living		
	Complete ONLY if direct expenditure to benefit C/C		Officeholder name	Office	e sought	<b>\$</b>	Offi <b>®</b> held	<b>.</b>
	Date	Payee name						
	/							
	Amount (\$)	Payee address;	City; State; Zip	Code				
	(,,	,			.*			
	Reimbursement from political contributions intended							
	PURPOSE	Category (See ca	tegories listed at the top of this sche	dule) (b) De	escription			
	OF			-	7	side of Texas, complete		
	EXPENDITURE				☐ Check if Austin, TX	X, officeholder living ex	pense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		Officeholder name	Office	e sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

### **OUTSTANDING LOANS**

### SCHEDULE L

The	Instruction Guide explains how to complete this form.	Total pages Schedule L:     1		
2 FILER NAME JUDGE SERG	GIO L. DE LEON	3 Filer ID (Ethics Commission Filers)		
LENDER INFORMATION	4 Name of lender  DICK ABRAMS  5 Lender address; City; State; Zip Code  6145 WEDGWOOD DRIVE , FORT WORTH, TEXAS 76	6133		
GUARANTOR INFORMATION   Moreovery of the control of	6 Name of guarantor  N/A  7 Guarantor address; City; State; Zip Code			
LENDED	Name of lender			
LENDER INFORMATION	Lender address; City; State; Zip Code	85 E ≥		
GUARANTOR INFORMATION	Name of guarantor	FRANK PI		
not applicable	Guarantor address; City; State; Zip Code	NT CO.		
LENDER INFORMATION	Name of lender	3: 29 8 RATOR		
	Lender address; City; State; Zip Code			
GUARANTOR INFORMATION	Name of guarantor			
not applicable	Guarantor address; City; State; Zip Code			
LENDER INFORMATION	Name of lender			
	Lender address; City; State; Zip Code			
GUARANTOR INFORMATION	Name of guarantor			
not applicable	Guarantor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				