## JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 ACCOUNT # (Ethics Commission Filers) n/a	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER		FIRST	MI	OFFICE USE ONLY
NAME	NICKNAME Cole	LAST	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SU	ITE#; CITY;	STATE; ZIPCODE	Date Hand-delivered of Postmarked
change of address 5 CANDIDATE/	AREA CODE PHONE	NUMBER	EXTENSION	Receipt # Amount
OFFICEHOLDER PHONE				Date Processed
6 CAMPAIGN TREASURER	MS/MRS/MR M	r. Bensoi	MI 1	Date Imaged
NAME		arghese	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PL	EASE); APT/SUITE#;	CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE	NUMBER	extension	·
9 REPORT TYPE	X January 15 3	0th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 8	ith day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 06 / 30 / 2013	THROUGH	Month Day 12 / 31	Year 2013
11 ELECTION	Month ELECTION DATE Year 03 04 2014	ELECTION TYPE    X   Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (If know Judge, County Crim	m) inal Court Three, Tarrant County

**GO TO PAGE 2** 

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Case	y Cole		15 ACCOUNT # (Ethics Commission Filers) n/a
16 NOTICE FROM POLITICAL	CANDIDATE / OFFICEH	DE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADIOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIOS AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF TO	DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	201 ELEC 87:	
	GENERAL SPECIFIC	COMMITTEE ADDRESS	ARRAHIT
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	I. IUIAL	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$ 60
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$7,125
EXPENDITURE TOTALS	3. TOTAL P	MIZED \$0	
	4. TOTAL	\$9419.43	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST REPORTING PERIOD	\$36335.12
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	THE \$15,000
AFFIX NOTARY STA	escribed before	true and correct and includes all in under Title 15, Election Code.  Signature of Care	f perjury, that the accompanying report is information required to be reported by me included and included an
Signature of officer adm	inistering oath	Print name of officer administering oath	Title of officer administering oath

#### SCHEDULE A (J)

				***************************************	
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A(J):	
2 FILER NAME Casey Cole			3 ACCOUNT # (Et n/a	thics Commission F	ilers)
11/22/13	5 Full name of contributorput-of-state PAC (ID#:  Jerry Crockett  6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$) 1000	8 In-kind con description(if	
	200 S Biscayne Blvd, Ste 4100 Miami, FL 33129		(If travel outside o	of Texas, complete	Schedule T)
9 Contributor's pi Attorney	nincipal occupation	10. Contributor's job to Attorney	title		
11 Contributor's en Retired	mployer/law firm	12 Law firm of contri	butor's spouse (if any	")	
13 If contributor is	a child, law firm of parent(s) (if any)				
11/11/13	Full name of contributorbut-of-state PAC (ID#:  Don Bodenhammer  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind con description(if	
	108 Main St. Fort Worth, TX 76102		(If travel outside	of Texas, complete	Schedule T)
Attorney	rincipal occupation	Attorney	title		
Contributor's each	Don Bodenhammer	Law firm of contri	butor's spouse (if any	()	
If contributor is	a child, law firm of parent(s) (if any)			***************************************	
Date 11/11/13	Full name of contributorbut-of-state PAC (10#: Brian Goza Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind cor description(If	
	2201 N. Collins St. Suite 170, Arlington	on TX 76011	(If travel outside	  ⊃ ☐ of Texas, complete	Schedule T
Attorney Contributor's p	rincipal occupation	Attorney Contributor's job	title	322	\$ 3
Goza and Ca	mployer/law firm ITCETAS	Law firm of contri	butor's spouse (if any	) (A.E.	
If contributor is	a child, law firm of parent(s) (if any)				7 3
				TRATER.	80 :- YTM

#### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	dule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (Eth	ics Commission Filers)
4 Date 10/1/13	5 Full name of contributor Dut-of-state PAC (ID#:		contribution (\$) 500	8 In-kind contribution description(if applicable)  of Texas, complete Schedule T)
9 Contributor's po Bondsman		Bail Bondsmar	<del>title</del> 1	
\$11 Contributor's e	mployer/law firm	12 Law firm of contri	butor's spouse (if any	
13 If contributor is	a child, law firm of parent(s) (if any)			
Date 10/1/13	Full name of contributor   Dut-of-state PAC (ID#		Amount of contribution (\$)  50  (If travel outside of	In-kind contribution description(if applicable)  of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney	title	
Barrows Law	mployer/law firm FIRM	Law firm of contri	butor's spouse (if any	}
If contributor is	s a child, law firm of parent(s) (if any)			
Date 10/1/13	Full name of contributor Dut-of-state PAC (ID#:	rth, TX 76102	Amount of contribution (\$)	In-kind contribution description(if applicable)
Attorney Contributor's p	rincipal occupation	Attorney	title	35 5
Law Office of	mpleyer/law.firm i Shane Lewis	Law firm of contri	ibutor's spouse (if any	
If contributor is	s a child, law firm of parent(s) (if any)			= = =
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#### SCHEDULE A (J)

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J):		
2 FILER NAME Casey Cole			3 ACCOUNT # (E	thics Commission Filers)	
4 Date	5 Full name of contributorout-of-state PAC (ID#:	)	7 Amount of	8 In-kind contribution	
10/7/13	Randy Bowers		contribution (\$)	description(if applicable)	
10///13	6 Contributor address: City: State: Zin Code		50 <sub> </sub>		
	6 Contributor address; City; State; Zip Code				
	3505 Airport Freeway, Fort Worth TX	76111			
			(If travel outside	of Texas, complete Schedule T)	
9 Contributor's p Attorney	rincipal occupation	10. Contributor's job Attorney	title		
11 Contributor's e Randy Bowe	mployer/law firm rs, Attorney at Law	12 Law firm of contri	butor's spouse (if any	y)	
13 If contributor is	a child, law firm of parent(s) (if any)				
10/14/13	Full name of contributorout-of-state PAC (ID#:		Amount of	In-kind contribution	
10/14/13	Gary Smart		contribution (\$)	description(if applicable)	
	Contributor address; City; State; Zip Code		50		
	3020 Matlock Rd # 210				
	Arlington, TX 76015		(If travel outside	of Texas, complete Schedule T)	
Attorney	rincipal occupation	Attorney	L		
Robinson and	mployer/law firm d Smart	Law firm of contri	butor's spouse (if any	y) .	
If contributor is	a child, law firm of parent(s) (if any)				
Date	Full according to the second		Amount of	In-kind contribution	
	Full name of contributorbut-of-state PAC (ID#:		contribution (\$)	description(if applicable)	
10/14/13	Thomas Myers		100	EL!	
	Contributor address; City; State; Zip Code		100		
	4004 Sullivan Ct, Arlington TX 76016		i de la companya de l	54 3 3	
			(If travel outside	of Texas, complete Schedule T)	
Attorney	rincipal occupation	Attorney			
Brackett & El	mployer/law firm IIS	TX DPS contri	butor's spouse (if an	y)	
If contributor is	a child, law firm of parent(s) (if any)			<sup>원</sup>	

#### SCHEDULE A (J)

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The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (EI	thics Commission Filers)
10/14713	Samantha Hill		7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
	701 W. Belknap, Fort Worth, TX 7610	)2	(If travel outside	of Texas, complete Schedule T)
9 Contributor's pr Attorney	rincipal occupation	10 Contributor's job of Attorney	title	
11 Contributor's at Samantha Hi	mpkover/law firm II, P.C.	12 Law firm of contril	butor's spouse (if any	0
13 If contributor is a child, law firm of parent(s) (if any)				
10/3/13	Full name of contributorbut-of-state PAC (ID#: Brian Willett		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code		100	
	1113 Bedford Rd, Suite B Bedford TX 76022		(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Contributor's job	title	
Contributor's e	mployer/law firm	Law firm of contri	ibutor's spouse (if any	) B E D
If contributor is	s a child, law firm of parent(s) (if any)	Particular and the second seco		AP.
11/4/13	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		250	
	3001 Halloran St. Fort Worth, TX 761	107	(If travel outside	of Texas, complete Schedule T)
Attorney	principal occupation	Attorney	title	
Law Office of	rmelover/law firm f Charles Hamm	Law firm of contri	ibutor's spouse (if any	N)
If contributor is	s a child, law firm of parent(s) (if any)			

#### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	s form.	1 Total pages Scho	edule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (EI n/a	hics Commission Filers)
11/30713	6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
	3712 Collinwood Ave. Fort Worth, TX	70107	(If travel outside	of Texas, complete Schedule T)
9 Contributor's pi Attorney	rincipal occupation	10 Contributor's job that Attorney	title	
11 Contributor's el Law Office of	mployer/law firm Ryan Hardy	12 Law firm of contri	butor's spouse (if any	')
13 If contributor is	a child, law firm of parent(s) (if any)			-
11/30/13	Full name of contributor Dul-of-state PAC (ID# Elizabeth Cortright		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zlp Code		150	
	701 E. Blush #3311, Fort Worth, TX 7	76102	(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney	title	
Dunham Law	mployer/lew firm FIFM	Law firm of contri	butor's spouse (if any	")
If contributor is	a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorbut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code		200	
	115 W. 2nd St. Fort Worth, TX 76102	?	ੀ travel outside	of Texas (complete Schedute 1)
Attorney	rincipal occupation	Attorney	title	
Self Contributor's e	mployer/law firm	Law firm of contri	butor's spouse (if any	" 85 5 ===
If contributor is	a child, law firm of parent(s) (if any)			
				And and
				09 CTOR

### SCHEDULE A (J)

The	e Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A(J):
2 FILER NAME Casey Cole	D-1		3 ACCOUNT # (Et	hics Commission Filers)
11/30/13	5 Full name of contributorout-of-state PAC (ID#:		7 Amount of contribution (\$) 250	8 In-kind contribution description(if applicable)
	7809 Purdue, Dallas, TX 75225		(If travel outside	of Texas, complete Schedule T)
9 Contributor's Attorney	principal occupation	10. Contributor's job Attorney	title	
11 Contributor's Shaw and A	employer/law firm SSOCIATES	12 Law firm of contri	butor's spouse (if any	·)
13 If contributor	is a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorout-of-state PAC (ID#:Felipe Calzada  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description(if applicable)
	2724 Kimbo Rd. Fort Worth TX 76111		<del> </del>	of Texas, complete Schedule T)
Attorney	principal occupation	Attorney	title	
Law Office of	employer/law.firm of Felipe Calzada	Law firm of contri	butor's spouse (if any	)
If contributor	is a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorbut-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description(if applicable)
·.	Contributor address; City; State; Zip Code	_	100	TAR TAR
	P.O. Box 201913, Arlington, TX 76000	6	(If travel outside	of Texas, complete Schedule T)
Attorney	principal occupation	Claims Counse	title el	
Professiona	employer/law.firm Claims Managers, Inc.	Law firm of contri	ibutor's spouse (if any	, 55 2 5
If contributor	is a child, law firm of parent(s) (if any)			

### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A(J):
2 FILER NAME Casey Cole	:		3 ACCOUNT # (E n/a	thics Commission Filers)
11/30713	5 Full name of contributorbut-of-state PAC (ID#: Terry Barlow 6 Contributor address; City; State; Zip Code 7809 Purdue, Dallas, TX 75225		7 Amount of contribution (\$) 100	8 In-kind contribution description(if applicable)
9 Contributor's p Attorney	I. rincipal occupation	Attorney		or rexas, complete Schedule 1)
11 Contributor's e Bailey and G	mplpyer/law firm aylen	12 Law firm of contri	butor's spouse (if an	у)
13 If contributor is	s a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributor  but-of-state PAC (ID#		Amount of contribution (\$)  500	In-kind contribution description(if applicable)
	principal occupation Drage	Proprietor Proprietor	title	
Self Contributor's e	mployer/law firm	Law firm of contri	ibutor's spouse (if an	у).
If contributor is	s a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorbut-of-state PAC (ID#:	001	Amount of contribution (\$)	(in kind contribution) description(if applicable) of Texas, complete Schedule 1)
TAR	PRANT COUNTY CLERK	Contributor's job	title 16/N6 C	LERK
	employer/law firm	Law firm of contr	ibutor's spouse (if an	m 8 0
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)

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (E n/a	thics Commission Filers)
11/30/13	5 Full name of contributorbut-of-state PAC (IDIt: Patrick Curran		7 Amount of contribution (\$)	8 In-kind contribution description(if applicable)
	1		100	 
	2101 Moneda St. Haltom City, 76117		(16 travel autolica	f Towns complete Schodule T)
9 Contributor's p Attorney	rincipal occupation	Attorney		of Texas, complete Schedule T)
11 Contributor's e Patrick Curra	mployer/law firm in, Attorney at Law	12 Law firm of contril	butor's spouse (if an	y)
13 If contributor is	s a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributor		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code		200	<b> </b>
	700 NE Loop 820, Suite 214, Hurst T	X 76093	(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney		
Law Office of	mployer/lew-firm i Drake Dunnavent	Law firm of contri	butor's epouse (if an	<b>y</b> )
If contributor is	s a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorbut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code		500	[ 
	6205 Airport Freeway, Fort Worth, TX	C 76117	(If travel outside	e of Texas, complete Schedule T)
Contributor's p	rincipal occupation	Contributor's job	title	
Attorney Attorney Attorney		butor's spouse (if an		
Law Office of	s a child, lawfirm of parent(s) (if any) I KeIth McCay		, 1 AMP 11	
			:	高高
if con	ATTACH ADDITIONAL COPIES Of tributor is out-of-state PAC, please see instr			3 6 3

### SCHEDULE A (J)

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The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (E	thics Commission Filers)
11/30/13	Gary Medlin 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$) 500	8 In-kind contribution description(if applicable)
	1300 S. University, Suite 602, Fort W 76107	orui, i A	(If travel outside	of Texas, complete Schedule T)
9 Contributor's p Attorney	vincipal occupation	Attorney	title	
11 Contributor's e Law Office of	mgloyer/law firm Gary Medlin	12 Law firm of contri	butor's spouse (if an	у)
13 If contributor is	s a child, law firm of parent(s) (if any)			
11/30/13	Full name of contributorbut-of-state PAC (iD#: Edward Jones		Amount of contribution (\$)	In-kind contribution description(if applicable)
	Contributor address; City; State; Zip Code		500	1
	1519 Ballinger St. Fort Worth, TX 76	102	(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney	title	
Attorney Edv	mployer/law firm Vard Jones	Law firm of contri	butor's spouse (if an	у)
If contributor is	s a child, law firm of parent(s) (if any)			
8/14/13	Full name of contributor Dut-of-state PAC (ID#  Howard Rosenstein  Contributor address: City: State: Zio Code 6448 Parkmont Dr. Arlington, TX 760		Amount of contribution (\$)	In-kind contribution description(if applicable)
			(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney	title	
Law Office of	mployer/law/firm THoward Rosenstein	Law firm of contri	butor's spouse (if an	у)
If contributor is	s a child, law firm of parent(s) (if any)			30 T
If con	ATTACH ADDITIONAL COPIES C tributor is out-of-state PAC, please see instr			ARRANT COUNTY STEW AAROUNT OF PH. 1: C
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#### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	nedule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (E n/a	thics Commission Filers)
4 Date	5 Full name of contributor Dut-of-state PAC (ID#:	)	7 Amount of	8 In-kind contribution
0/4/40	William Ray		contribution (\$)	description(if applicable)
8/4/13	6 Contributor address; City; State; Zip Code		200	
	512 Main Street, Suite 308, Fort World	th, TX 76102		 
9 Contributor's p Attorney	rincipal occupation	10. Contributor's job Attorney		of Texas, complete Schedule T)
11 Contributor's e	molever/law firm	12 Law firm of contri	hutore enquee (if an	
Law Office of	Bill Ray	12 Law Important	Dutor's spouse (n an	у)
13 If contributor is	a child, law firm of parent(s) (if any)			
Date 8/4/13	Full name of contributor	)	Amount of contribution (\$)	in-kind contribution description(if applicable)
8/4/13	Contributor address; City, State; Zip Code		100	
	721 W. Division St., Arlington TX 761	02	(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney	title	
Law Office of	moloyer/lew firm Donald Feare	Law firm of contri	butor's spouse (if an	y) .
If contributor is	s a child, law firm of parent(s) (if any)		Access of Marketine and Access of the Marketine and Access	
Date	Full name of contributorout-of-state PAC (ID#:	)	Amount of contribution (\$)	In-kind contribution description(if applicable)
8/5/13	Daniel Hernandez		CORFIDUROR (4)	Gescription(ii applicable)
0/0/10	Contributor address; City; State; Zip Code		250	
	800 West Weatherford St., Fort Wortl	h. TX 76102		1
			(If travel outside	of Texas, complete Schedule T)
Attorney	rincipal occupation	Attorney		
Law Office of	mboyevlaw film Daniel Hernandez	Law firm of contri	butor's spouse (if an	χ <sub>Β</sub> Υ Ε
If contributor is a child, law firm of parent(s) (if any)				
				ST I ST
	ATTACH ADDITIONAL CODIES (	SE SUIO COLIEDIU E	A & AICEDED	CO 145
If con	ATTACH ADDITIONAL COPIES O tributor is out-of-state PAC, please see instru			na regulrements
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#### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A(J):
2 FILER NAME Casey Cole			3 ACCOUNT # (E n/a	thics Commission Filers)
11/8/13	1/8/13  5 Full name of contributor Dut-of-state PAC (ID#:)  Adam Burney  6 Contributor address; City; State; Zip Code 1235 Litchfield Lane  Burleson, TX 76028			8 in-kind contribution description(if applicable)
9 Contributor's p	rincipal occupation	10 Contributor's job		of Texas, complete Schedule T)
9 Contributor's pa Attorney	III Open Occupation	Attorney		
11 Contributor's employer/law firm SCOTT, MCNeil, & Burney				y)
13 If contributor is	a child, law firm of parent(s) (if any)			
10/15/13	Full name of contributorbut-of-state PAC (ID#: Raul Nevarez	Amount of contribution (\$)	In-kind contribution description(if applicable)	
	Contributor address; City; State; Zip Code		250	
	4004 FM 5 Aledo, TX 76008		(If travel outside	of Texas, complete Schedule T)
Attorney		Attorney	title	
Raul Nevarez	mployer/lew firm z, P.C.	Law firm of contri	butor's spouse (if an	y).
If contributor is	a child, law firm of parent(s) (if any)			
Date 7/2/13	Full name of contributorout-of-state PAC (ID# Michael Schneider		Amount of contribution (\$)	In-kind contribution description(if applicable)
10/15/13    Full name of contributor   Dut-of-state PAC (ID#: Raul Nevarez			(If travel outside	of Texas; complete Schedule 1)
Attorney Contributor's p	rincipal occupation	Attorney	title	35 5 EE
Law Office of	mployer/law firm Michael Schneider	Law firm of contri	butor's spouse (if an	y Regio
If contributor is	s a child, law firm of parent(s) (if any)			3 5 3
				9 0

#### SCHEDULE A (J)

The	Instruction Guide explains how to complete this	s form.	1 Total pages Sch	nedule A(J):		
2 FILER NAME Casey Cole			3 ACCOUNT # (E n/a	thics Commission	n Filers)	
4 Date 7/1/13	Connie Gilfeather  6 Contributor address; City; State; Zip Code  P.O. Box 711, Glen Rose, TX 76043			-	contribution (if applicable)	
Contributor's pi	rincipal occupation BT	Court Reporter		or locas, compre	te Schedule 1)	
11 Contributor's er	1 Contributor's employer/law firm 12 Law firm of contributor's self			у)		
13 If contributor is	a child, law firm of parent(s) (if any)					
Date  Full name of contributorbut-of-state PAC (ID#:)  Kim Campbell  Contributor address; City; State; Zip Code  5719 Airport Freeway Fort Worth, TX 76117			Amount of contribution (\$) In-kind contribution description(if applicable)  500  (If travel outside of Texas, complete Schedule T)			
Attorney	rincipal occupation	Attorney		Ol loads, compa	is concedio 1)	
Self Contributor's er	nployer/law firm	Self - Abe	butor's spouse (if any	y)		
If contributor is	a child, law firm of parent(s) (if any)					
Date	Full name of contributorbut-of-state PAC (ID#:		Amount of contribution (\$)		ontribution (if applicable)	
	Contributor address; City; State; Zip Code			of Texas	120 TARRING TO Stee Schedule T)	
Contributor's p	rincipal occupation	Contributor's job	title	20.5 20.5 20.5		
Contributor's ea	mployer/law firm	Law firm of contril	butor's spouse (if any	ý) <u> </u>	2 ED	
If contributor is	a child, law firm of parent(s) (if any)				* 17	
				S	G ~	

#### PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B (J)

	The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule B(J):
2	FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
	CA	SEY COLE		nla	
4		OF UNITEMIZED PLEDGES: ⇒	D D	t) t)	\$
5	Date	6 Full name of pledgor □ out-of-state PAC (ID#:		8 Amount of pledge (\$)	9 In-kind description (if applicable)
		7 Pledgor address; City; State; Zip Code			
				h	of Texas, complete Schedule T)
10	Pledgor's princ	ipal occupation	11 Pledgor's job title		
12					
14	If pledgor is a	child, law firm of parent(s) (if any)		100-50- A, 19-2-5 - 10-2-5	
	Date	Full name of pledgor out-of-state PAC (ID#:	}	Amount of	In-kind description
	Date	Out-of-size Fac (in)#		pledge (\$)	(if applicable)
		Pledgor address; Clty; State; Zip Code			
					of Texas, complete Schedule T)
	Pledgor's princ	sipal occupation	Pledgor's job title	)	
	Pledgor's emp	loyer/law firm	Law firm of pledg	or's spouse (if any)	
	If pledgor is a	child, law firm of parent(s) (if any)			
	Date	Full name of pledgor out-of-state PAC (ID#:		Amount of pledge (\$)	In-kind description (if applicable)
		} • • • ±.• • • • • • • • • • • • ±.• • • ±.• • ± • • ± • • • •			TARRA  2011 JAN  STE
		Pledgor address; City; State; Zip Code			TARRA ZOLL JAN LECTIONS
ł					
				(If travel outside	of Texas, complete Schedule T)
	Pledgor's prine	cipal occupation	Pledgor's job title		
-	Pledgor's emp	lover/law firm	Law firm of pledo	or's spouse (if any)	and the land
				,	many states and states
	If pledgor is a	child, law firm of parent(s) (if any)		-	3 0 2
					<u> </u>

LOANS (J	UDICIAL)
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### SCHEDULE E (J)

The leastweller Aulds welster have to consider the					schedule E(J):			
2 FILER NAME Casey Cole			1 -	(Ethics Commission Filers)				
4 тота	AL OF UNITEMIZED LOANS: ⇒	÷ ÷ ÷	<b>\$</b>	\$0				
5 Date of loan 12/20/13					9 Loan Amount (\$) 10,000			
6 Is lender a financial Institution?		Code		10 Interes	t rate			
Y N X Mansfield, TX 76105  12 Lender's Principal Occupation 13 Lender's Job Title				11 Maturity date				
Attorney		13 Lender's Job Tit Attorney	le					
14 Lender's Employer/ Law Office of Ca	/Law Firm asey Cole	15 Law Firm of lend	ler's spouse (if any)	iny)				
16 If lender is child, la	w firm of parent(s) (if any)							
17 Description of Colla	ateral	18 Check if persona	al funds were depos	sited into poli	tical acc	ount		
X none	<u> </u>	<b>Š</b>		<b>.</b>				
19 GUARANTOR INFORMATION  INFORMATION  Inot applicable	20 Name of guarantor 21 Guarantor address; City; State	e; Zip Code	••••••••••••••••••••••••••••••••••••••	22 Amoun	t Guarar	iteed (\$)		
			q	7 13	~>>			
23 Guarantor's Princip	pal Occupation	24 Guarantor's Job	Title	ECTION S	<u></u>	TAR		
25 Guarantor's Employer/Law Firm 26 Law Firm of guarantor's spouse (if a			201	- Z- - O1				
27 If guarantor is child	l, law firm of parent(s) (if any)		-		7	3		
				RATOR	<del>::</del> 9			

	EXPENDITURE	CATEGORIES	FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Co Solicitation/Fundrai Travel In District Travel Out Of District Office Overhead/R	ontract Labor Lising Expense (	Fransportation I Contributions/D Candidate/C	Repayment/Reimbursement sportation Equipment & Related Expense tributions/Donations Made By andidate/Officeholder/Political Committee ER (enter a category not listed above)			
	The Instruction Guide	explains how to	complete this form	n.				
1 Total pages Schedule F:	2 FILER NAME Casey Cole			n/a	JNT # (Ethics C	Commission Filers)		
4 Date	5 Payee name Texas Conservatives Car	ndidate Fair						
6 Amount (\$) 759.99	7 Payee address; City; St. 1601 Campus Drive Hurst TX 76053	ate; Zip Code			-			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top Event Expense	p of this schedule)	(b) Description ( Tarrant Cou			Schedule T)		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought		Offic	æ held		
Date	Payee name					4		
Amount (\$)	Payee address; City; St	ate; Zip Code						
PURPOSE OF EXPENDITURE	Category (See categories listed at the to	p of this schedule)	Description (	If travel outside of	Texas, complete S	Schedule T)		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H		Office sought	·	Offic	e held		
Date 9/26/13	Payee name Tarrant County Bar Assoc	ciation	ACCOUNTS OF THE PROPERTY OF TH		, 1, , , , , , , , , , , , , , , , , ,			
Amount (\$)	Payee address; City; St	ate; Zip Code		8Y:	<u>En</u>	2		
40.60	1315 Calhoun Street Fort Worth, Texas 76102				LECTION			
PURPOSE	Category (See categories listed at the to	p of this schedule)	Description	(If travel outside of	Texas complete S			
OF EXPENDITURE		-			Þri Es	이 독류		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought	t .	S Office S S	apeld 20		
Date	Payee name Envelopes.com			Company of the Compan	AT OR	: 09		
Amount (\$) 692.67	Payee address; City; St 5300 New Horizons Blvd Amityville, NY 11701	ate; Zip Code		ē.				
PURPOSE OF	Category (See categories listed at the to	p of this schedule)	Description Envelopes,	•	Texas, complete S	Schedule T)		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sough			ce held		
	ATTACH ADDITIONAL C	OPIES OF THIS	SCHEDULE AS I	NEEDED				

### POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services S Food/Beverage Expense T Polling Expense T	alaries/Wages/Con olicitation/Fundrais ravel In District ravel Out Of Distri office Overhead/Re	ntract Labor ing Expense ct ntal Expense	Loan Repayme Transportation Contributions/I Candidate/OTHER (enter	Equipmonic Equipmonic Constitution Constitution Contraction Contra	ent & Relat s Made By Ider/Politica	d Commi	ittee
1 Total pages Schedule G:	2 FILER NAME Casey Cole	plants now to o			UNT # (	Ethics Com	mission F	ilers)
4 Date 7/1/13	5 Payee name Pritchett Campaign Strateg	ies	***************************************					
6 Amount (\$) 1000 Reimbursement from political contributions intended	7 Payee address; City; State 512 Main Street 717 Fort Worth, TX 76102	e; Zip Code						
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of Consulting	this schedule)	(b) Description Outline fo	r securing				
Date 11/14/13	Payee name Frankie's Sports Bar							
Amount (\$) 300  Reimbursement from political contributions intended	Payee address; City; State 425 W. 3rd St. Fort Worth, TX 76102	e; Zip Code						
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of Event Expense	f this schedule)	Description Paid for for	n (If travel outside ood and be				
Date 7/5/13	Payee name Pritchett Campaign Strateg	jies			. 4			
Amount (\$) 1000 Reimbursement from political contributions intended	Payee address; City; State 512 Main Street 717 Fort Worth, TX 76102	e; Zip Code			8Y:	ELECTIONS STEW	2014 JAN	TARRAN
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of Consulting	fthis schedule)	Descriptio Consulting	n (If travel outside	of Texas,	complete Sch	edőle <sup>(†)</sup>	300
Date 12/5/13	Payee name Tarrant County GOP					RATOR	3	
Amount (\$) 2500 Reimbursement from political contributions intended	Payee address; City; State 2405 Gravel Dr Fort Worth, TX 76118	e; Zip Code			; 3			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top o	f this schedule)	Description Filing Fee	n (If travel outside	of Texas,	complete Sch	edule T)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITUR Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	E CATEGORIES F Salaries/Wages/Con Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Rei	tract Labor ing Expense	Loan Repayment/Re Transportation Equip Contributions/Donati	oment & Related Ex ions Made By holder/Political Co	mmittee
	The Instruction Guid	de explains how to co	omplete this fo	rm.		
1 Total pages Schedule G:	2 FILER NAME Casey Cole			3 ACCOUNT	# (Ethics Commission	on Filers)
4 Date 8/4/13	5 Payee name Plan A & B Advisors, L.L	C				
6 Amount (\$) 805.88 Reimbursement from political contributions intended	7 Payae address; 420 Throckmorton, Suite Fort Worth, TX 76102	State: Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the Other: Design Services		1	n (If travel outside of Texa gn, maintenar		
Date 9/1/13	Payee name Plan A & B Advisors, L.L	C				
Amount (\$) 644.66  Reimbursement from political contributions intended	Paves address; 420 Throckmorton, Suite Fort Worth, TX 76102	State: Zip Code e 200				
PURPOSE OF EXPENDITURE	Category (See categories listed at the Other: Design Services		· ·	n (If travel outside of Texa ce envelopes,		. 1
Dete 10/1/13	Payee name Plan A & B Advisors, L.L	C	Annual			
Amount (\$) 820.15  Reimbursement from political contributions intended	420 Throckmorton, Suite Fort Worth, TX 76102	State: Zip Code e 200			BY: STEV	TARRA 2011 JAN
PURPOSE OF EXPENDITURE	Category (See categories listed at the Other: Design Services		1_	n (If travel outside of Texa S, bumper stic	200	PH C
Date 11/3/13	Payee name Plan A & B Advisors, L.L	C			A	1:09
Amount (\$) 855.48 Reimbursement from political contributions intended	Payer address; 420 Throckmorton, Suite Fort Worth, TX 76102	State: Zip Code 9 200				
PURPOSE OF EXPENDITURE	Category (See categories listed at the Other: Design Services			n (If travel outside of Texas and Pushca		T)

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