



# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

14 C/OH NAME

*Lewis, David A. (Hon.)*

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

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

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 535.00

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 3,907.66

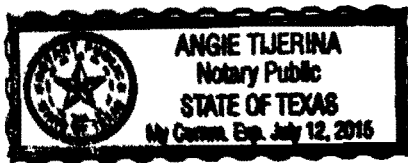
OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 250.00

18 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

*David A. Lewis*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said David A. Lewis, this the 5th day of January, 20 12, to certify which, witness my hand and seal of office.

*Angie Tijerina*

Signature of officer administering oath

Angie Tijerina

Print name of officer administering oath

Notary Public

Title of officer administering oath

**LOANS (JUDICIAL)**

**SCHEDULE E (J)**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

1 of 1 / 3 of 5

2 FILER NAME

Lewis, David A. (Hon.)

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

5 Date of loan

9-29-09

7 Name of lender

David & Joyce Lewis

out-of-state PAC (ID# \_\_\_\_\_)

9 Loan Amount (\$)

\$ 250.00

6 Is lender a financial institution?

Y    N

8 Lender address; City; State; Zip Code

Terrell, Tx 75160

10 Interest rate

0

11 Maturity date

9-29-10

12 Lender's Principal Occupation

13 Lender's Job Title

Judge

14 Lender's Employer/Law Firm

Kauffman County

15 Law Firm of lender's spouse (if any)

N/A

16 If lender is child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account

19 GUARANTOR INFORMATION

not applicable

20 Name of guarantor

21 Guarantor address; City; State; Zip Code

22 Amount Guaranteed (\$)

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is child, law firm of parent(s) (if any)

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

**POLITICAL EXPENDITURES**

**SCHEDULE F**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 1 of 2 / 4 of 5	<b>2</b> FILER NAME Lewis, David A. (Hou.)	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 7-7-2011	<b>5</b> Payee name Louis Club
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<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code Kaufman, Tx - 75142
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Club dues	(b) Description (If travel outside of Texas, complete Schedule T) dues
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9-1-2011	Payee name Mike Chitty campaign
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Amount (\$) \$100.00	Payee address; City; State; Zip Code Terrell, Tx 75160
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) donation	Description (If travel outside of Texas, complete Schedule T) Campaign fund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name Friends of Bob Deuell
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Amount (\$) \$100.00	Payee address; City; State; Zip Code Greenville, Tx
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) donation	Description (If travel outside of Texas, complete Schedule T) campaign fund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9-8-2011	Payee name Texas Association of CC Law Judges
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Amount (\$) \$35.00	Payee address; City; State; Zip Code Austin, Tx.
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) dues	Description (If travel outside of Texas, complete Schedule T) association dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES**

**SCHEDULE F**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <i>1 of 2 / 5065</i>	<b>2</b> FILER NAME <i>Lewis, David A. (Hon.)</i>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date <i>10-4-2011</i>	<b>5</b> Payee name <i>Lance Gooden</i>
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<b>6</b> Amount (\$) <i>\$100.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>Terrell, Tx</i>
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>donation</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>campaign fund</i>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12-15-2011</i>	Payee name <i>Texas Access to Justice Foundation</i>
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Amount (\$) <i>\$100.00</i>	Payee address; City; State; Zip Code <i>Austin, Tx</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>donation</i>	Description (If travel outside of Texas, complete Schedule T) <i>charity</i>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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