

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081691	2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Linda M.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/12/2019
	NICKNAME Marie	LAST Dunson	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 670785 Houston, TX 77267			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Tracy D.	MI	
	NICKNAME	LAST Good	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 700 Milam, Ste. 1300 Houston, TX 77002			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(713)	227-4663		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 10/28/2018	THROUGH	Month Day Year 12/31/2018	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Family District Court Judge District 309 Harris		12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 22

13 C / OH NAME Dunson, Linda M. (Ms.) **14** Filer ID (Ethics Commission Filers)
00081691

15 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.

Additional Pages

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,114.12
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,288.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,267.39
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,750.00

17 AFFIDAVIT

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

Ms. Linda M. Dunson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Dunson, Linda M. (Ms.)		19 Filer ID 00081691	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
	NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	7,732.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	382.12
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,268.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	20.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	289.49
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abraham, Jetty (Ms.)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Sugar Land, TX 77479-8853		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Jetty Abraham		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Nicole (Ms.)	Amount of Contribution (\$) \$140.00
Contributor address; City; State; Zip Code Houston, TX 77018		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of N. Bates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmore, Dana (Ms.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Los Angeles, CA 90081		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Dana T. Blackmore		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlin, Amy (Ms.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77002-2040	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Carlin 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 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clevenger, George (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm George T. Clevenger, Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Cheryl (Ms.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77007-2733	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law offices of Coleman & Associates PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cusic, Desiray (Ms.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77060-5915		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Cusic 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 12/05/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortson, Alicia (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of AG Fortson PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghutzman, Phillip (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Phillip G. Ghutzman PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 11/06/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldsberry, Shari (Ms.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Goldsberry & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Ashley (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of A. Green		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Myrna (Ms.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Myrna S. Guidry Attorney At Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/31/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Bridget (Dr.)	7 Amount of Contribution (\$) \$382.00
	6 Contributor address; City; State; Zip Code Spring, TX 77379	
8 Contributor's Principal Occupation minister		9 Contributor's Job Title Pastor
10 Contributor's employer/law firm New Light Church		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Fay (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77002-3181	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of James & Stagg		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allison (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77008	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lockwood & Jones P.L.L.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Rodney (Mr.)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code Houston, TX 77036		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Rodney Jones Law Group		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey-Pottinger, Allecia (Mrs.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Bellaire, TX 77401		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Allecia Lindsey-Pottinger Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manns, Qiana (Ms.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77245		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Manns Law Offices PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFerren, Eric T (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code houston, TX 77074		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Eric T. McFerren & Associates Law Office		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phea, Angela (Ms.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77271		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Angela Phea Attorney At Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Ivy V (Ms.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77054-1373		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Ivy V. Ricketts, Attorney At Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Ronique Bastine (Mrs.)	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Stafford, TX 77477	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Bastine Law Group		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Dwayne (Mr.)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Simpson Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Thomas (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Cypress, TX 77433	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Thomas Singleton, Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprott Jr., Oliver (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77004	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Oliver Wendell Sprott Jr., Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Enrique (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77018	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Torres Law Group PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Thao (Ms.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77098-1863	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of Law T. Tran		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/22
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691
4 Date 11/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Connie (Ms.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Vasquez Harrison PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/22	
2 FILER NAME Dunson, Linda M. (Ms.)		3 Filer ID (Ethics Commission Filers) 00081691	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/14/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grubb, Elyse (Ms.)	8 Amount of contribution (\$) \$243.56	9 In-kind contribution description pop up judge-elect banner from kwik kopy
	7 Contributor address; City; State; Zip Code Houston, TX 77010	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) none		13 Contributor's job title (FOR JUDICIAL) (See instructions) none	
14 Contributor's employer/law firm (FOR JUDICIAL) none		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintana, Christopher (Mr.)	Amount of contribution (\$) \$138.56	In-kind contribution description cupcakes and lite bites at Holman Street Draft House fundraiser
	Contributor address; City; State; Zip Code Houston, TX 77010	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Medical Device sales		Contributor's job title (FOR JUDICIAL) (See instructions) salesman	
Contributor's employer/law firm (FOR JUDICIAL) Genesis Lab		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 1/5 Rpt: 15/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
4 Date 10/31/2018	5 Payee name Amegy Bank	
6 Amount (\$) \$8.00	7 Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77227-7459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense service fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2018	Payee name Amegy Bank	
Amount (\$) \$17.00	Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77227-7459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense service fee and statement fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2018	Payee name Amegy Bank	
Amount (\$) \$17.00	Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77227-7459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service fee and statement fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 2/5 Rpt: 16/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
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4 Date 12/21/2018	5 Payee name Amegy Bank
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6 Amount (\$) \$8.00	7 Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77227-7459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee for cashier's check
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/03/2018	Payee name FatCow
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Amount (\$) \$16.99	Payee address; City; State; Zip Code 70 Blanchard Rd Burlington, MD 01803
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly website expense
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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 12/21/2018	Payee name Foster, Erica (Mrs.)
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Amount (\$) \$500.00	Payee address; City; State; Zip Code 9211 Dulcimer Houston, TX 77051
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense balance paid, campaign consultant fee
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 3/5 Rpt: 17/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
4 Date 11/26/2018	5 Payee name Foster, Erica (Mrs.)	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 9211 Dulcimer Houston, TX 77051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense partial fee for campaign consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2018	Payee name GoFundMe We Pay	
Amount (\$) \$28.48	Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2018	Payee name GoFundMe We Pay	
Amount (\$) \$20.05	Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 4/5 Rpt: 18/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
4 Date 12/19/2018	5 Payee name GoFundMe We Pay	
6 Amount (\$) \$8.20	7 Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2018	Payee name GoFundMe We Pay	
Amount (\$) \$8.20	Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2018	Payee name GoFundMe We Pay	
Amount (\$) \$8.20	Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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 F1: Sch: 5/5 Rpt: 19/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
4 Date 11/16/2018	5 Payee name GoFundMe We Pay	
6 Amount (\$) \$2.28	7 Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2018	Payee name GoFundMe We Pay	
Amount (\$) \$8.20	Payee address; City; State; Zip Code P.O. Box 1329 Redwood City, CA 94063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees for processing contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2018	Payee name PayPal	
Amount (\$) \$17.70	Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131-2021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee for sending payment to campaign consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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
Credit Card Payment

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: Sch: 1/1 Rpt: 20/22	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
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4 Date 12/06/2018	5 Payee name Houston GLBT Political Caucus
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6 Amount (\$) \$10.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) dues	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sustaining member dues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/06/2018	Payee name Houston GLBT Political Caucus
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Amount (\$) \$10.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) dues	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sustaining member 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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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Dunson, Linda M. (Ms.)	3 Filer ID (Ethics Commission Filers) 00081691
4 Date 11/13/2018	5 Payee name Chapman & Kirby	
6 Amount (\$) 19.49	7 Payee Address; City; State; Zip 2118 Lamar St Houston, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) food at HCDLA meet the newly elected officials
Date 12/28/2018	Payee name Choir Robe Creations	
Amount (\$) 150.00	Payee Address; City; State; Zip 3804 Poplar St. Houston, TX 77087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) tailor judicial robe	(b) Description (See instructions regarding type of information required.) Robe
Date 12/17/2018	Payee name Texas Center for the Judiciary	
Amount (\$) 60.00	Payee Address; City; State; Zip 1210 San Antonio St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Education	(b) Description (See instructions regarding type of information required.) Family Judicial Conference
Date 11/11/2018	Payee name Texas Center for the Judiciary	
Amount (\$) 60.00	Payee Address; City; State; Zip 1210 San Antonio St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) education	(b) Description (See instructions regarding type of information required.) new judges school

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 22/22

2 FILER NAME
Dunson, Linda M. (Ms.)

3 Filer ID (Ethics Commission Filers)
00081691

LENDER
INFORMATION

4 Name of lender
Dunson, Linda (Ms.)

5 Lender address; City; State; Zip Code

HOUSTON, TX 77267

GUARANTOR
INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER
INFORMATION

Name of lender
Dunson, Linda

Lender address; City; State; Zip Code

HOUSTON, TX 77267

GUARANTOR
INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code