

# 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)	2 Total pages filed: <span style="font-size: 2em; color: blue;">18</span>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <i>Judge</i> FIRST: <i>SALLY</i> MI: <i>L.</i> NICKNAME: <i>Montgomery</i> LAST:      SUFFIX:	<b>OFFICE USE ONLY</b> Date Received: <span style="font-size: 1.5em; color: blue;">2022 FEB 22 PM 4:59</span> Date Hand-delivered or Date Postmarked: Receipt #      Amount \$ Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:      APT / SUITE #:      CITY:      STATE:      ZIP CODE <i>13901 Midway Rd Ste 102 Box 315</i> <i>Dallas, TX 75244</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(972) 247-7354</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: <i>Andrew</i> FIRST:      MI: <i>M.</i> NICKNAME: <i>"Andy"</i> LAST: <i>Trusevich</i> SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #:      CITY:      STATE:      ZIP CODE <i>5748 Kate Avenue</i> <i>Plano, TX 75024</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION <i>(972) 849-4063</i>		
9 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month      Day      Year      THROUGH      Month      Day      Year <i>01 / 21 / 2022</i> THROUGH <i>02 / 22 / 2022</i>		
11 ELECTION	ELECTION DATE:      ELECTION TYPE: Month      Day      Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <i>03 / 01 / 2022</i> <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) <i>County Court-at-Law #3</i>	13 OFFICE SOUGHT (if known)	
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	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 <input type="checkbox"/> GENERAL      COMMITTEE ADDRESS <input type="checkbox"/> SPECIFIC      COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

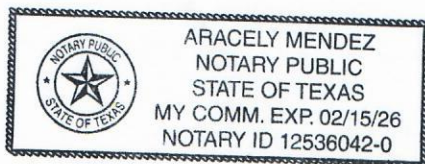
15 JC/OH NAME <i>SALLY L. Montgomery</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <i>-0-</i>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <i>26,200</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <i>50.00</i>
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>96766.48</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>21,137.48</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>-0-</i>

18 SIGNATURE 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.

*Sally L. Montgomery*  
Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Sally L. Montgomery* this the *22nd* day of *February*, 20*22*, to certify which, witness my hand and seal of office.

*Aracely Menendez*      *Aracely Menendez*      *Asst. Manager*  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - JC/OH**

**FORM JC/OH  
COVER SHEET PG 3**

<b>19 FILER NAME</b> <i>SALLY L. Montgomery</i>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>26,200</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>-0-</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>-0-</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>96,716.48</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>-0-</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>2554.75</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>-0-</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>-0-</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>-0-</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>-0-</i>

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

13.7

2 FILER NAME

Sally L Montgomery

3 Filer ID (Ethics Commission Filers)

4 Date

1/21/2022

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

hyens & Simmons, LLP  
 6 Contributor address; City; State; Zip Code  
 2101 Cedar Springs Rd. Ste 1900 DALLAS, TX 75201

7 Amount of contribution (\$)

\$1000.00

8 Contributor's principal occupation

attorneys

9 Contributor's job title

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

1/24/2022

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Law Office of Jay J. Murray, P.C.  
 Contributor address; City; State; Zip Code  
 2512 State Street Dallas, TX 75201

Amount of contribution (\$)

\$1000.00

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

1/24/2022

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Lisa Blue Baron, Esq.  
 Contributor address; City; State; Zip Code  
 4047 Cochran Chapel Rd Dallas, TX 75209

Amount of contribution (\$)

\$5000.00

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Baron And Blue

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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

2177

2 FILER NAME

SALLY L. Montgomery

3 Filer ID# (Ethics Commission Filers)

4 Date

1/23/22

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Chris HAMILTON, Esq

6 Contributor address; City; State; Zip Code

5521 Swiss Ave  
DALLAS, TX 75214

7 Amount of contribution (\$)

\$5000.00

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

HAMILTON WINGO, LLP

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

1/21/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Scott Barber, Esq

Contributor address; City; State; Zip Code

2908 Masters Circle  
Plano, TX 75093

Amount of contribution (\$)

\$1000.00

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Scott Barber Law Office

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/3/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Grace Weatherly

Contributor address; City; State; Zip Code

3541 Teasley Lane, Ste 100  
Denton, TX 76210

Amount of contribution (\$)

\$1000.00

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Wood Weatherly TRIAL LAW

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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3 of 7

2 FILER NAME

SALLY L. Montgomery

3 Filer ID# (Ethics Commission Filers)

4 Date

2/3/22

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Brent Walker, Esq.

7 Amount of contribution (\$)

\$2,500.00

6 Contributor address; City; State; Zip Code

4311 Oak Lawn Ave. Ste 150 Dallas, TX 75219

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

Aldous Walker, LLP

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/4/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Brian Sanford

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

1910 Pacific Ave Ste 15400 Dallas, TX 75201

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

The Sanford Firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/7/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Math McKool, Esq.

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

16326 SW 97th Ter Miami, FL 33196

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

MAT MCKOOL, ATTORNEYS

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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

487

2 FILER NAME

Sally L. Montgomery

3 Filer ID# (Ethics Commission Filers)

4 Date

4/8/22

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Larry Lassiter, Esq.

7 Amount of contribution (\$)

\$200.00

6 Contributor address; City; State; Zip Code

17024 Knots Landing  
Addison, TX 75001

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

Miller Weissbrod, LLP

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/9/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Andrew Lee, Esq.

Amount of contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

P.O. Box 190833  
Dallas, TX 75219

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Lee Law, PLLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/10/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Ted Akin

Amount of contribution (\$)

\$2500.00

Contributor address; City; State; Zip Code

2511 Highland Park Village, Ste 100-505  
Dallas, TX 75205

Contributor's principal occupation

attorney - ADR

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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

587

2 FILER NAME

Sally L. Montgomery

3 Filer ID (Ethics Commission Filers)

4 Date

2/11/22

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Michael Mitchell, Esq

6 Contributor address; City; State; Zip Code

7227 Abrams Place Ct  
DALLAS, TX 75231

7 Amount of contribution (\$)

\$500.00

8 Contributor's principal occupation

attorney

9 Contributor's job title

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

2/15/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Anjel AVANT

Contributor address; City; State; Zip Code

11616 High Forest Dr.  
DALLAS, TX 75230

Amount of contribution (\$)

\$250.00

Contributor's principal occupation

attorneys

Contributor's job title

Contributor's employer/law firm

AVANT LAW FIRM

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/18/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Rosanne Mills

Contributor address; City; State; Zip Code

6906 Casa Loma Ave  
DALLAS, TX 75214

Amount of contribution (\$)

\$150.00

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Rosanne Messineo Mills, Atty & Counselor

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.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

677

2 FILER NAME

Sally L. Montgomery

3 Filer ID (Ethics Commission Filers)

4 Date

2/18/22

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

JACK PEACOCK

7 Amount of contribution (\$)

\$750.00

6 Contributor address; City; State; Zip Code

1347 Empire Central Dr. DALLAS, TX 75247  
Ste 500, L.B. 56

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

Gagnon, Peacock & Verecke, P.C.

11 Law firm of contributor's spouse (if any)

Gagnon, Peacock & Verecke, P.C.

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/21/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Ben Martin, Esq.

Amount of contribution (\$)

\$1000.00

Contributor address; City; State; Zip Code

3141 Hood St. Ste 600  
DALLAS, TX 75219

Contributor's principal occupation

attorneys

Contributor's job title

Contributor's employer/law firm

Martin Baughman, PLLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/2/22

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

George Tex Quesada, PC

Amount of contribution (\$)

\$2500.00

Contributor address; City; State; Zip Code

3811 Turtle Creek Blvd Ste 1400  
DALLAS, TX 75219

Contributor's principal occupation

attorneys

Contributor's job title

Contributor's employer/law firm

Sommerman, McCafferty & Quesada, LLP

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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: **787**

2 FILER NAME

*Sandy L. Montgomery*

3 Filer ID# (Ethics Commission Filers)

4 Date

*1/24/22*

5 Full name of contributor

*D. MARK DANIEL*

out-of-state PAC ID#: \_\_\_\_\_

7 Amount of contribution (\$)

*\$350.00*

6 Contributor address; City; State; Zip Code

*2911 Riverhollow Ct.  
Ft. Worth, TX 75119-0803*

8 Contributor's principal occupation

*attorney*

9 Contributor's job title

10 Contributor's employer/law firm

*Phelps Dunbar, LLP*

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

*2/9/22*

Full name of contributor

*Atenevall Democrats of Dallas*

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

*\$250.00*

Contributor address; City; State; Zip Code

*P.O. Box 192305 Dallas, TX 75219*

Contributor's principal occupation

*PAC*

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

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.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | 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)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>1-275</i>	<b>2</b> FILER NAME <i>Sawt L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>1/27/22</i>	<b>5</b> Payee name <i>Public Policy Polling</i>	
<b>6</b> Amount (\$) <i>\$1000.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>2000 Highwoods Blvd Ste 20 Raleigh, North Carolina 27604</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Polling expense</i>	<b>(b)</b> Description <i>Dallas County Primary Polling</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>1/27/22</i>	Payee name <i>The Order Desk</i>	
Amount (\$) <i>\$37,198.39</i>	Payee address; City; State; Zip Code <i>9840 Monroe Dr. Ste 104 DALLAS, TX 75220</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising expense</i>	Description <i>postage - primary mailing</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>2/3/2022</i>	Payee name <i>American Express</i>	
Amount (\$) <i>\$3433.71</i>	Payee address; City; State; Zip Code <i>P.O. Box 650448 DALLAS, TX 75265-0448</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Credit Card payment</i>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | 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)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>2 of 5</i>	<b>2</b> FILER NAME <i>Sally L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>2/7/2022</i>	<b>5</b> Payee name <i>AMAC Productions</i>	
<b>6</b> Amount (\$) <i>\$5000.00</i>	<b>7</b> Payee address; <i>4042 Huckleberry Circle</i> <i>DALLAS, TX 75216</i>	City; State; Zip Code
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>advertising expense</i>	<b>(b)</b> Description <i>RADIO</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date <i>2/8/2022</i>	Payee name <i>Reilly Echols Printing, Inc.</i>		
Amount (\$) <i>\$18,106.44</i>	Payee address; <i>1710 South HARWOOD</i> <i>DALLAS, TX 75215</i>	City;	State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Printing - MAILERS x 3 rounds</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/9/2022</i>	Payee name <i>Sylvia Lagos</i>		
Amount (\$) <i>\$250.00</i>	Payee address; <i>131 N. Montclair</i> <i>DALLAS, TX 75208</i>	City;	State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>mailing - slate cards</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | 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)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>375</b>	2 FILER NAME <b>SALLY L. Montgomery</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>2/13/2022</b>	5 Payee name <b>Beyond The Slogan</b>
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6 Amount (\$) <b>\$1848.00</b>	7 Payee address; <b>2710 Routh Creek #4120 Richardson, TX 75082</b>	City:	State:	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>	(b) Description <b>Walk program</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>2/13/2022</b>	Payee name <b>Beyond The Slogan</b>
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Amount (\$) <b>\$5500.00</b>	Payee address; <b>2710 Routh Creek #4120 Richardson, TX 75082</b>	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>text messaging program</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>2/13/2022</b>	Payee name <b>AMAC PRODUCTION</b>
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Amount (\$) <b>\$5000.00</b>	Payee address; <b>4042 Huckleberry Circle DALLAS, TX 75216</b>	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>radio</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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.

<b>1</b> Total pages Schedule F1: <i>4 of 5</i>	<b>2</b> FILER NAME <i>Sally L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>2/13/22</i>	<b>5</b> Payee name <i>Democracy Toolbox</i>	
<b>6</b> Amount (\$) <i>\$5000.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>a/n: Jeff Dalton 8552 Royal County Down Drive McKinney, TX 75070</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Consulting expense</i>	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <i>2/15/2022</i>	Payee name <i>Frederick D. Lewis</i>	
Amount (\$) <i>\$1000.00</i>	Payee address; City; State; Zip Code <i>P.O. Box 1526 DALLAS, TX 75313-1526</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <i>2/16/2022</i>	Payee name <i>Taylor Hogeland</i>	
Amount (\$) <i>11,305.00</i>	Payee address; City; State; Zip Code <i>6301 Gaston Ave Ste 1216 DALLAS, TX 75214</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>mailers + ad in Examiner</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **575**      2 FILER NAME: **Sally L. Montgomery**      3 Filer ID (Ethics Commission Filers)

4 Date: **2/16/2022**      5 Payee name: **Edward Gray**

6 Amount (\$): **\$165.00**      7 Payee address: **4001 Airport Fwy**      City:      State:      Zip Code: **Bedford, TX 76021**

8 PURPOSE OF EXPENDITURE: (a) Category (See Categories listed at the top of this schedule): **Advertising expense**      (b) Description: **podcast**

(c)  Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held

Date: **2/17/2022**      Payee name: **Ecolatino Radio**

Amount (\$): **\$900.00**      Payee address: **3606 S. Tyler St.**      City:      State:      Zip Code: **Dallas, TX 75224**

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): **Advertising**      Description: **radio ads**

Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held

Date: **2/22/2022**      Payee name: **Reilly Echols Printing, Inc.**

Amount (\$): **\$999.94**      Payee address: **1710 South HARWOOD**      City:      State:      Zip Code: **DALLAS, TX 75215**

PURPOSE OF EXPENDITURE: Category (See Categories listed at the top of this schedule): **Advertising**      Description: **Poll cards**

Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH      Candidate / Officeholder name      Office sought      Office held

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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: <i>173</i>	<b>2</b> FILER NAME <i>Sally L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date <i>12/16/21</i>	<b>6</b> Payee name <i>Terrace Bistro</i>	
<b>7</b> Amount (\$) <i>\$215.11</i>	<b>8</b> Payee address; City; State; Zip Code <i>1325 S LAMAR ST DALLAS, TX 75215</i>	
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Event expense</i>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>XMAS lunch for staff</i>
	<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	

Date <i>12/17/21</i>	Payee name <i>Needle In A Haystack, Inc.</i>		
Amount (\$) <i>\$789.68</i>	Payee address; City; State; Zip Code <i>6911 Preston Rd Dallas, TX 75205</i>		
<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Gifts</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>XMAS cards to supporters</i>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	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.

<b>1</b> Total pages Schedule F4: <i>2 F43</i>	<b>2</b> FILER NAME <i>Sally L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date <i>12/20/21</i>	<b>6</b> Payee name <i>Dr Delphinium's Designs</i>	
<b>7</b> Amount (\$) <i>\$317.18</i>	<b>8</b> Payee address; City; State; Zip Code <i>5806 Lovers Lane Dallas, TX 75225</i>	
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Gifts</i>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>XMAS gifts to staff</i>
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <i>12/21/21</i>	Payee name <i>Staples</i>		
Amount (\$) <i>\$265.18</i>	Payee address; City; State; Zip Code <i>4400 Beltline Rd Addicks, TX 75001</i>		
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Office Overhead</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Printer ink cartridges</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | 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.

<b>1</b> Total pages Schedule F4: <i>373</i>	<b>2</b> FILER NAME <i>SALLY L. Montgomery</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date <i>1/11/2022</i>	<b>6</b> Payee name <i>Extra Space Storage</i>	
<b>7</b> Amount (\$) <i>\$217.00</i>	<b>8</b> Payee address; City; State; Zip Code <i>2422 Marsh Lane Carrollton, TX 75006</i>	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Rent</i>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <i>Sign Storage</i>
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <i>1/12/2022</i>	Payee name <i>TEXAS Jewish Post</i>		
Amount (\$) <i>\$750.00</i>	Payee address; City; State; Zip Code <i>7920 Belt Line Rd Ste 680 DALLAS, TX 75254</i>		
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Ads</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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