

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: **23**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Audrey
NICKNAME LAST SUFFIX
Moorhead

OFFICE USE ONLY

Date Received

2023 JUL 11 11 45 AM '23
FILED
BY: [unclear] 30

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE
**P.O. Box 763984
Dallas, Texas 75376**

Change of Address

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 929-0667

Receipt # Amount \$

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Trinidad
NICKNAME LAST SUFFIX
Garza

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE
2235 W. Colorado Dallas, TX 75211

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 597-3260

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year
01 / 01 / 23 THROUGH 06 / 30 / 23

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
11 / 8 / 22 General Special

12 OFFICE

OFFICE HELD (if any)
Judge, Dallas County CCC3

13 OFFICE SOUGHT (if known)

14 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
COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

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JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

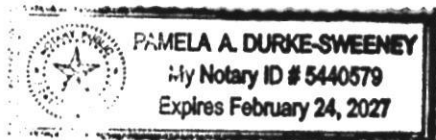
15 JC/OH NAME <u>Audrey Moorehead</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>11,550⁻</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>9,736⁸²</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>2411.52</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Audrey Moorehead
Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Audrey Moorehead this the 14th day of July, 2023, to certify which, witness my hand and seal of office.

Pamela A. Durke-Sweeney Pamela A. Durke-Sweeney Notary Public
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**

19 FILER NAME *Audrey Moorehead* **20** Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,550
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 9736.82
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 12
2 FILER NAME Audrey Moorehead		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Martin Lowy	7 Amount of contribution (\$) \$100-
6 Contributor address; City; State; Zip Code 7793 Royal Lane Dallas TX 75230		
8 Contributor's principal occupation Unemployed		9 Contributor's job title Unemployed
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 2/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Katherine McGovern	Amount of contribution (\$) \$50-
Contributor address; City; State; Zip Code 4364 Royal Ridge Dallas TX 75229		
Contributor's principal occupation Unemployed		Contributor's job title Unemployed
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 2/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ben Taylor	Amount of contribution (\$) \$100-
Contributor address; City; State; Zip Code 2654 Lakewood Court Dallas TX 75214		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Red Byron & Associates, P.C.		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)**

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2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/11/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Nancy Wallace</i>	7 Amount of contribution (\$) <i>\$250-</i>
6 Contributor address; City; State; Zip Code <i>9720 Coit Road Plano, TX 75025</i>		
8 Contributor's principal occupation <i>IT Program Manager</i>		9 Contributor's job title <i>Omnicomgroup</i>
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 <i>2/13/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Penny Robe</i>	Amount of contribution (\$) <i>\$100-</i>
Contributor address; City; State; Zip Code <i>7017 Carta Valley Plano, TX 75094</i>		
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title <i>Lawyer</i>
Contributor's employer/law firm <i>Robe Law Firm</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>2/14/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Maedgen Ward</i>	Amount of contribution (\$) <i>\$50-</i>
Contributor address; City; State; Zip Code <i>8144 Walnut Hill Dallas TX 75231</i>		
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title <i>Lawyer</i>
Contributor's employer/law firm <i>B. Ward Maedgen</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

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2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/15/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Krisi Kastl</i>	7 Amount of contribution (\$) <i>\$ 500</i>
6 Contributor address; City; State; Zip Code <i>4144 N. Central Expressway Dallas, TX 75231</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Kastl Law, PC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>2/22/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Aubrey "Nick" Pittman</i>	Amount of contribution (\$) <i>\$ 1,000</i>
Contributor address; City; State; Zip Code <i>100 Crescent Court Suite 1000 Dallas TX 75204</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>The Pittman Law Firm</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>2/23/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Cynthia Nunn</i>	Amount of contribution (\$) <i>\$ 50</i>
Contributor address; City; State; Zip Code <i>918 Heather Knoll Desoto TX 75115</i>		
Contributor's principal occupation <i>Unemployed</i>		Contributor's job title <i>Unemployed</i>
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
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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

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2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/25/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>David Bradley</i>	7 Amount of contribution (\$) <i>\$50-</i>
6 Contributor address; City; State; Zip Code <i>2504 Summit Irving TX 75062</i>		
8 Contributor's principal occupation <i>Accounting</i>		9 Contributor's job title <i>Accounting/Collections Supervisor</i>
10 Contributor's employer/law firm <i>Dallas County</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>2/26/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Tamra Williams</i>	Amount of contribution (\$) <i>\$50-</i>
Contributor address; City; State; Zip Code <i>5518 Miller Heights Rowlett TX 75088</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of Tamra W. Williams, PC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>2/27/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Andrea Chism</i>	Amount of contribution (\$) <i>\$100-</i>
Contributor address; City; State; Zip Code <i>420 Buffalo Creek Desoto TX 75115</i>		
Contributor's principal occupation <i>Health care</i>		Contributor's job title <i>Senior Business Partner</i>
Contributor's employer/law firm <i>City of Garland</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
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2 FILER NAME: <u>Audrey Moorehead</u>		3 Filer ID (Ethics Commission Filers)
4 Date: <u>2/27/23</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <u>Xavier Walker</u>	7 Amount of contribution (\$) <u>\$ 100</u>
6 Contributor address; City; State; Zip Code <u>9600 N. 96th Apt #162 Scottsdale, AZ 85258</u>		
8 Contributor's principal occupation <u>Executive</u>		9 Contributor's job title <u>Vice President</u>
10 Contributor's employer/law firm <u>NPI International</u>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date: <u>3/2/23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <u>Sonya Irby</u>	Amount of contribution (\$) <u>\$ 50</u>
Contributor address; City; State; Zip Code <u>7400 Bishop Road Plano TX 75094</u>		
Contributor's principal occupation <u>Customer Service</u>		Contributor's job title <u>Customer Experience</u>
Contributor's employer/law firm <u>Linked Logistics</u>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date: <u>3/4/23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <u>Brandy Fine</u>	Amount of contribution (\$) <u>\$ 250</u>
Contributor address; City; State; Zip Code <u>6908 Brentfield Dallas TX 75248</u>		
Contributor's principal occupation <u>Attorney</u>		Contributor's job title <u>Attorney</u>
Contributor's employer/law firm <u>Alexandra Gezzi PLLC</u>		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

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2 FILER NAME Audrey Moorehead		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Heather Barbieri	7 Amount of contribution (\$) 1,000 -
6 Contributor address; City; State; Zip Code 7000 Preston Rd #100 Plano TX 75025		
8 Contributor's principal occupation Attorney		9 Contributor's job title Owner
10 Contributor's employer/law firm Barbieri 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 2/19/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Randall Isenberg	Amount of contribution (\$) 500 -
Contributor address; City; State; Zip Code		
Contributor's principal occupation Attorney		Contributor's job title Owner
Contributor's employer/law firm Randall Isenberg Atty P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 3/8/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Mark Latham	Amount of contribution (\$) 250 -
Contributor address; City; State; Zip Code 5906 Bruce Raton Dallas 75230		
Contributor's principal occupation Owner/Operator		Contributor's job title Entrepreneur
Contributor's employer/law firm Non-Legal		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
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2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/1/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jeffery Rosenfeld</i>	7 Amount of contribution (\$) <i>250</i>
	6 Contributor address; City; State; Zip Code <i>7812 Glenneagle Dallas TX 75248</i>	
8 Contributor's principal occupation <i>Retired</i>		9 Contributor's job title <i>Retired</i>
10 Contributor's employer/law firm <i>Retired</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/1/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jim Burnham</i>	Amount of contribution (\$) <i>250</i>
	Contributor address; City; State; Zip Code <i>6116 N Central Expw. Dallas TX 75206</i>	
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Jim Burnham</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/1/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>John Lee Proctor</i>	Amount of contribution (\$) <i>250</i>
	Contributor address; City; State; Zip Code <i>1524 Oak Meadow Dallas TX 75233</i>	
Contributor's principal occupation <i>Exec Director</i>		Contributor's job title <i>CEO RCD</i>
Contributor's employer/law firm <i>Regional Contractors Assoc</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
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2 FILER NAME Audrey Moorehead		3 Filer ID (Ethics Commission Filers)
4 Date 3/7/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jeff Tillotson PC	7 Amount of contribution (\$) 2,500
6 Contributor address; City; State; Zip Code 1807 Ross Suite 325 Dallas 75201		
8 Contributor's principal occupation Law Firm		9 Contributor's job title Law firm
10 Contributor's employer/law firm SAT		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 3/7/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Thomas Wynne	Amount of contribution (\$) 500-
Contributor address; City; State; Zip Code 2828 N. Hurwood #1950 Dallas TX 75201		
Contributor's principal occupation Attorney		Contributor's job title Atty
Contributor's employer/law firm Thomas Wynne Atty @ Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 3/7/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jayla Willkerson	Amount of contribution (\$) 50-
Contributor address; City; State; Zip Code 14001 Zippo Haslet Way Haslet TX 76027		
Contributor's principal occupation Lawyer		Contributor's job title Lawyer
Contributor's employer/law firm Law Office of Jayla Willkerson PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

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2 FILER NAME Audrey Moorehead		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/03	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Monique Ward	7 Amount of contribution (\$) 100 ⁻
6 Contributor address; City; State; Zip Code 1910 Pacific #6030 Dallas, TX 75201		
8 Contributor's principal occupation Lawyer		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Monique Ward		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 3/1/03	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ken Molberg	Amount of contribution (\$) 100 ⁻
Contributor address; City; State; Zip Code 2214 Main Dallas TX 75201		
Contributor's principal occupation Judge		Contributor's job title Judge
Contributor's employer/law firm Campaign Committee		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 3/1/03	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sheridan Lewis	Amount of contribution (\$) 200 ⁻
Contributor address; City; State; Zip Code 6478 Bordeaux Dallas TX 75209		
Contributor's principal occupation Lawyer		Contributor's job title Attorney
Contributor's employer/law firm Anton Udeshin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/7/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Michelle O'Neil</i>	7 Amount of contribution (\$) <i>\$1,000</i>
6 Contributor address; City; State; Zip Code <i>4707 River Hill Circle Dallas TX 75287</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>O'Neil Wysocki, PC</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/7/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Bruce Anton</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>9420 Springwater Dallas TX 75228</i>		
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/7/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Amy Carter</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>3865 Krest Meadow Dallas TX 75233</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Carter Law Group</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>12</i>
2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/7/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Kandel Cross</i>	7 Amount of contribution (\$) <i>\$ 250</i>
6 Contributor address; City; State; Zip Code <i>3 Brookside Court #530 Dallas TX 75243</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Law Office of Kandel Cross</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/7/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Adam Serdel</i>	Amount of contribution (\$) <i>\$ 250</i>
Contributor address; City; State; Zip Code <i>6243 Velasco Dallas TX 75214</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <i>3/7/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Antoine + Joyce Roach</i>	Amount of contribution (\$) <i>\$ 100</i>
Contributor address; City; State; Zip Code <i>381 E. Greenbriar #704 Dallas TX 75203</i>		
Contributor's principal occupation <i>Executive Mgmt</i>		Contributor's job title <i>VP</i>
Contributor's employer/law firm <i>All Stars Project</i>		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

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>12</i>
2 FILER NAME <i>Audrey Moorehead</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/8/23</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Grace Lewis</i>	7 Amount of contribution (\$) <i>\$ 500</i>
6 Contributor address; City; State; Zip Code <i>109 Hanover St. Grand Prairie TX 75052</i>		
8 Contributor's principal occupation <i>Unemployed</i>		9 Contributor's job title <i>Unemployed</i>
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 <i>3/8/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Rosie Abrams</i>	Amount of contribution (\$) <i>\$ 500</i>
Contributor address; City; State; Zip Code <i>10300 N. Central #203 Dallas TX 75231</i>		
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)		

Date	Full name of contributor <input type="checkbox"/> 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.

1 Total pages, Schedule F1: 1 of 8	2 FILER NAME Audrey Moorehead	3 Filer ID (Ethics Commission Filers)
4 Date 7/10/23	5 Payee name Democracy TOOLBOX	
6 Amount (\$) 250	7 Payee address; 8552 Royal County Downs McKinney TX 75070	City: State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting	(b) Description Consulting
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7/31/23	Payee name St. Luke Community United Methodist Church		
Amount (\$) 100-	Payee address; 5710 E. R.L.Thornton Dallas, TX 75223		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation	
	<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 3/30/23	Payee name Huston T. Holston I A A		
Amount (\$) 525.30	Payee address; 900 Chicon Austin, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Sponsorship Donation	Description Sponsorship Donation	
	<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: <i>2 of 8</i>	2 FILER NAME <i>Audrey Moorehead</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/31/23</i>	5 Payee name <i>Dallas Hispanic Bar Foundation</i>	
6 Amount (\$) <i>250</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 1523 Dallas TX 75221</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Sponsorship Donation</i>	(b) Description <i>Sponsorship Donation</i>
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/4/23</i>	Payee name <i>Dallas Bar Foundation - Bar None</i>		
Amount (\$) <i>350</i>	Payee address; City; State; Zip Code <i>2101 Ross Avenue Dallas TX 75201</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Sponsorship</i>	Description <i>Event</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>4/11/23</i>	Payee name <i>Dallas Summit</i>		
Amount (\$) <i>311.00</i>	Payee address; City; State; Zip Code <i>11223 Park Central Dallas TX 75230</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Fees</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: 3 of 8	2 FILER NAME Audrey Moorehead	3 Filer ID (Ethics Commission Filers)
4 Date 4/13/23	5 Payee name Texas Criminal Defense Lawyers Association	
6 Amount (\$) 495-	7 Payee address; City; State; Zip Code 6808 Hill Meadow Austin TX 787376	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Sponsorship	(b) Description Sponsorship
	(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 4/18/23	Payee name NPH USA
Amount (\$) 250-	Payee address; City; State; Zip Code 134 North LaSalle Street, #500 Chicago TX 60602

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Sponsorship	Description Sponsorship/Event
	<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 4/19/23	Payee name Our Redeemer Lutheran School
Amount (\$) 95.00	Payee address; City; State; Zip Code 7611 Park Ln Dallas TX 75225

8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Sponsorship	Description Event / sponsorship
	<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	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: 4008	2 FILER NAME Audrey Mooreheads	3 Filer ID (Ethics Commission Filers)
4 Date 4/26/23	5 Payee name Hell on HEELS CLE	
6 Amount (\$) 3,444. ⁰⁰	7 Payee address; City; State; Zip Code 300 Franklin Avenue #101 Wyckoff NJ 07481	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Expenses Event	(b) Description Event Expenses
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/5/23	Payee name Texas Bar Foundation	
Amount (\$) 180	Payee address; City; State; Zip Code 515 Congress Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Sponsorship	Description Event Sponsorship/Exp
	<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 5/22/23	Payee name American Bar Association	
Amount (\$) 545. ⁰⁰	Payee address; City; State; Zip Code 321 N. Clark Street Chicago IL 60654	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expenses	Description Event Expenses
	<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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