

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:  9						
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS (MR) FIRST MI John F.	<div style="border: 2px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p style="margin: 5px 0;">Date Received</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">                 BY _____ DEPUTY             </div> <div style="text-align: center;">                 2022 FEB 21 AM 10:18                  JOHN F. WARREN                  COUNTY CLERK                  DALLAS COUNTY             </div> <div style="writing-mode: vertical-rl; font-size: 2em; font-weight: bold;">FILED</div> </div> <p style="margin: 5px 0;">Date Hand-delivered or Date Postmarked</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Receipt #</td> <td style="width:50%; border-bottom: 1px solid black;">Amount \$</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table> </div>		Receipt #	Amount \$	Date Processed		Date Imaged	
	Receipt #			Amount \$					
Date Processed									
Date Imaged									
NICKNAME LAST SUFFIX Warren									
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 222134 Dallas, Texas 75222-2134								
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 972 ) 523-0793								
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS (MR) FIRST MI Karl	Date Hand-delivered or Date Postmarked							
	NICKNAME LAST SUFFIX Warren								
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1304 Boardwalk Street Arlington Texas 76011								
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 817 ) 800-5016								
<b>9</b> 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)								
<b>10</b> PERIOD COVERED	Month Day Year      Month Day Year 01 / 21 / 2022      THROUGH      02 / 19 / 2022								
<b>11</b> ELECTION	ELECTION DATE Month Day Year 03 / 01 / 2022	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special							
	<b>12</b> OFFICE  OFFICE HELD (if any)  Dallas County Clerk	<b>13</b> OFFICE SOUGHT (if known)  Dallas County Clerk							

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

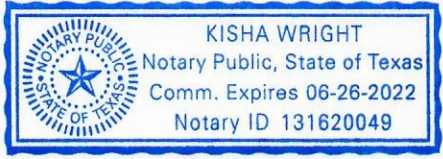
FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> John F. Warren	<b>15 Filer ID</b> (Ethics Commission Filers)
---------------------------------------	---

<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

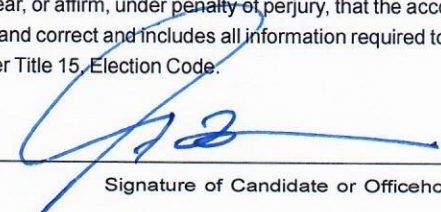
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,918.70
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 20,931.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,523.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 AFFIDAVIT**

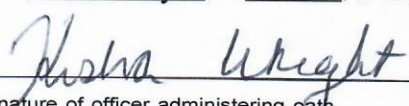


AFFIX NOTARY STAMP / SEAL ABOVE

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.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John F. Warren, this the 21 day of February, 2022, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath

Kisha Wright

 \_\_\_\_\_  
 Printed name of officer administering oath

Notary

 \_\_\_\_\_  
 Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> John F. Warren		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,918.70
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 20,931.77
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
1 of 3

2 FILER NAME  
John F. Warren

3 Filer ID (Ethics Commission Filers)

4 Date  
5 Feb 2022

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
John Cruzot

7 Amount of contribution (\$)  
\$1,500.00

6 Contributor address; City; State; Zip Code  
Dallas, TX 75201

8 Principal occupation / Job title (See Instructions)  
Criminal District Attorney

9 Employer (See Instructions)

Date  
5 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Velva Price

Amount of contribution (\$)  
\$48.06

Contributor address; City; State; Zip Code  
Austin TX

Principal occupation / Job title (See Instructions)  
District Clerk

Employer (See Instructions)  
Travis County Texas

Date  
9 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Todd Hill-Jones

Amount of contribution (\$)  
\$242.28

Contributor address; City; State; Zip Code  
Dallas TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
9 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Kurt Johnson

Amount of contribution (\$)  
\$290.28

Contributor address; City; State; Zip Code  
Grand Prairie, TX 75052

Principal occupation / Job title (See Instructions)  
Councilman

Employer (See Instructions)  
City of Grand Prairie

**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

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
2 of 3

2 FILER NAME  
John F. Warren

3 Filer ID (Ethics Commission Filers)

4 Date  
13 Feb 2022

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Carol Donovan

7 Amount of contribution (\$)  
\$485.06

6 Contributor address; City; State; Zip Code  
Dallas, TX

8 Principal occupation / Job title (See Instructions)  
Attorney

9 Employer (See Instructions)  
Self

Date  
15 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Craig Smith

Amount of contribution (\$)  
\$96.62

Contributor address; City; State; Zip Code  
Dallas TX

Principal occupation / Job title (See Instructions)  
Justice

Employer (See Instructions)  
5th Court of Appeals

Date  
15 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
LeRoy Wilkerson

Amount of contribution (\$)  
\$1,941.71

Contributor address; City; State; Zip Code  
12100 Ford St. Farmers Branch TX 75234

Principal occupation / Job title (See Instructions)  
Insurance Agent

Employer (See Instructions)  
Self

Date  
16 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Darryl Owens

Amount of contribution (\$)  
\$48.06

Contributor address; City; State; Zip Code  
6701 Coronation Arlington TX

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)

**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

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
3 of 3

2 FILER NAME  
John F. Warren

3 Filer ID (Ethics Commission Filers)

4 Date  
17 Feb 2022

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Larry Hall

7 Amount of contribution (\$)  
\$242.28

6 Contributor address; City; State; Zip Code  
Dallas, TX

8 Principal occupation / Job title (See Instructions)  
Self Employed

9 Employer (See Instructions)

Date  
17 Feb 2022

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dr. Pamela Grayson

Amount of contribution (\$)  
\$23.79

Contributor address; City; State; Zip Code  
Dallas TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**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

### 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: 1 of 3	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 26 Jan 2022	<b>5</b> Payee name Reilly Echols Printing	
<b>6</b> Amount (\$) \$541.25	<b>7</b> Payee address; 1710 S. Harwood Ave.,	City; State; Zip Code Dallas TX 75215
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Push Cards/Mailer	<b>(b)</b> Description Printing Expenses
	<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 John F. Warren	Office sought Office held County Clerk
Date 31 Jan 2022	Payee name The Order Desk	
Amount (\$) \$10,421.84	Payee address; 9840 Monroe Dr., # 104	City; State; Zip Code Dallas TX 75220
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Literature	Description Direct Mailing
	<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 John F. Warren	Office sought Office held County Clerk
Date 2 Feb 2022	Payee name Faith Leadership PAC	
Amount (\$) \$500	Payee address;	City; State; Zip Code Dallas TX
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation	Description Campaign Advertisement
	<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

### 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: 2 of 3	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 7 Feb 2022	<b>5</b> Payee name AMAC Productions	
<b>6</b> Amount (\$) \$2,500	<b>7</b> Payee address; City; State; Zip Code Dallas TX	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Radio Ad	<b>(b)</b> Description Advertising Expenses
	<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 John F. Warren	Office sought Office held County Clerk
Date 8 Feb 2022	Payee name Reilly Echols Printing	
Amount (\$) \$2,295	Payee address; City; State; Zip Code 1710 Harwood St. Dallas TX 75215	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Literature	Description Printing 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 John F. Warren	Office sought Office held County Clerk
Date 8 Feb 2022	Payee name Reilly Echols Printing	
Amount (\$) \$2,673.68	Payee address; City; State; Zip Code 1710 Harwood St. Dallas TX 75215	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Campaign Literature	Description Printing 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 John F. Warren	Office sought Office held County Clerk

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

## 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: 3 of 3	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 17 Feb 2022	<b>5</b> Payee name Beyond the Slogan	
<b>6</b> Amount (\$) \$2,000	<b>7</b> Payee address; City; State; Zip Code 2710 Routh Creek # 4120 Dallas TX 75082	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Text Messaging	<b>(b)</b> Description Advertising Expenses
	<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 John F. Warren	Office sought Office held County Clerk
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	Campaign Literature	Printing 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED