CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how t	o complete this form.	1 Filer ID (Ethics Commission	Filers) 2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Lauren	М1	OFFICE USE ONLY	
NAME	NICKNAME	LAST	SUFFI	Date Received	
		Davis			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	7130 Mimosa	APT / SUITE #, Ln Dallas Texas	75230	2023 JU 60 60 DA	
	1051 0005	PHONE NUMBER	EXTENSION		
5 CANDIDATE/ OFFICEHOLDER PHONE	(214)	4717762	EXTENSION	Date Hand delivered or Date Postmarked	
6 CAMPAIGN	MS / MRS / MR	FIRST	MI	品名服务	
TREASURER	Mrs	Lauren		Date Processed 2	
NAME	NICKNAME	LAST	SUFFI	Date Imaged	
		Davis		Date Imaged	
7 CAMPAIGN	STREET ADDRESS (I	NO PO BOX PLEASE); APT / S	SUITE #, CITY,	STATE; ZIP CODE	
TREASURER ADDRESS	7130 Mimosa	a Ln Dallas Tx 752	230		
(Residence or Business)					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE					
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)	
	July 15	8th day before e	Exceeded Mo Reporting Lim	, man report (man ,	
10 PERIOD	Month	Day Year		Month Day Year	
COVERED	1 ,	1 23	THROUGH	6 30 23	
11 ELECTION	ELECTION DA	TE	ELECTIO	DN TYPE	
	Month Day	Year	Runoff Other	er cription	
	11 0	2022 Genera		- Company	
	11/0/	2022 (Genera			
12 OFFICE	OFFICE HELD (if any)	•	13 OFFICE SOUGHT	(if known)	
			Dallas	County Judge	
14 NOTICE FROM POLITICAL THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTHE CANDIDATE'S OR OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDERS CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SU				THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR	
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN T	REASURER ADDRESS		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Lauren Davis	16	6 Filer ID	Ethics Co	ommission Filers)	
17 CONTRIBUTION TOTALS	 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)	\$	21	,200.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$		0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$	23	,332.49	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$		438.79	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$	i		
18 SIGNATURE I re	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	and correc	t and incl	ludes all information	
	\mathcal{A}	$\overline{}$			
	Signature of Can-	didate or (Officehold	der	
Please complete either option below:					
(1) Affidavit					
NOTARY STAMP/SE	AL				
Sworn to and subscribe	d before me by this the _		day of _	,	
20, to certif	y which, witness my hand and seal of office.				
Signature of officer adminis	tering oath Printed name of officer administering oath	Т	itle of offic	er administering oath	
	OR				
(2) Unsworn Declara					
My name is Lauren	Davis, and my date of birth is	11/11/	330		
My address is 7130 N	Mimosa Ln Dallas Lx	state) (z	230 ,	(country)	
Executed in Dallas	(street) (city) (street) (county, State of Texas , on the 4 day of July (month)		, 20 (year)		
	Signature of Candid	date/Officeh	nolder (De	eclarant)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

Instruction Guide explains how to	1 Total pages Schedule A1:		
ıvis			3 Filer ID (Ethics Commission Filers)
Ned Fleming 6 Contributor address;	City;	State; Zip Code	7 Amount of contribution (\$) 20,000.00
pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Full name of contributor Mary Louise Binning Contributor address; 5042 Westgrove Dr D	City;	State; Zip Code	Amount of contribution (\$) 1,000.00
pation / Job title (See Instructions)		Employer (See Instructive retired	tions)
Contributor address;	City;	State; Zip Code	Amount of contribution (\$) 200.00
pation / Job title (See Instructions)		Employer (See Instructive retired	ctions)
Full name of contributor Contributor address;			Amount of contribution (\$)
pation / Job title (See Instructions)		Employer (See Instruc	ctions)
ATTACH ADDITI	IONAL COPIES	OF THIS SCHEDULE AS	NEEDED
	Full name of contributor Ned Fleming 6 Contributor address; 5816 Glendora A pation / Job title (See Instructions) Full name of contributor Mary Louise Binning Contributor address; 5042 Westgrove Dr D pation / Job title (See Instructions) Full name of contributor Peter McCormick Contributor address; 3526 Caruth Blv pation / Job title (See Instructions) Full name of contributor Contributor address; Job title (See Instructions)	ATTACHADDITIONAL COPIES	Ned Fleming 6 Contributor address; City; State; Zip Code 5816 Glendora Ave Dallas tx 75230 pation / Job title (See Instructions) Full name of contributor Mary Louise Binning Contributor address; City; State; Zip Code 5042 Westgrove Dr Dallas TX 75248 pation / Job title (See Instructions) Full name of contributor Peter McCormick Contributor address; City; State; Zip Code Full name of contributor Peter McCormick Contributor address; City; State; Zip Code 3526 Caruth Blvd Dallas TX 75225 Ipation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries	vages/Contract Labor complete this form.	Other (enter a categor	y not listed above)
1 Total pages Schedule F1:			3 Filer ID (Ethics	Commission Filers)
4 Date 01/06/2023	5 Payee name Intuit Quick Books			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
85.28	online payment			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	accounting	monthly fee		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/06/2023	Intuuit Quick Books			
Amount (\$)	Payee address;	City;	State;	Zip Code
85.28	online payment			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	accounting	monthly fee		
	Check if travel outside of Texas. Complete Schedule T	T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/09/2023	Texting For Less			
Amount (\$)	Payee address;	City;	State;	Zip Code
22,342.18	354 State St #104 Hackensack NJ 0	/601		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	advertising	texting		
	Check if travel outside of Texas. Complete Schedule T	Check if Aust	tin, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/O	H Lauren Davis	Dallas County J	udge	
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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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)

Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to o	complete this form.		
Total pages Schedule F1:	2 FILER NAME Lauren Davis		3 Filer ID (Ethics	Commission Filers)
Date 03/15/2023	5 Payee name Mailchimp			
Amount (\$) 382.69	7 Payee address; online payment	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising	(b) Description email		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Lauren Davis	Office sought Dallas County Juu	dge	Office held
Date 03/28/2023	Payee name Mailchimp			
Amount (\$) 437.06	Payee address; online payment	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising	Description email		
	Check if travel outside of Texas. Complete Schedule T.			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Lauuren Davis	Office sought Office held Dallas County Judge		
Date 03/09/2023	Payee name Anedot			
Amount (\$)	Payee address; online payment	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) fees	credit card processing fee		
	The Control of the Control of T	Check if Austin, TX, officeholder living expense		
	Check if travel outside of Texas. Complete Schedule T			

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Fees Office Ov. Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/	xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
	The Instruction Guide explains how to	complete this form.				
1 Total pages Schedule F2:	2 FILER NAME Lauren Davis		3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UNITEN	IIZED UNPAID INCURRED OBLIGATION	IS	\$			
6 Date 06/26/2023	6 Payee name Texting For Less					
7 Amount (\$)	8 Payee address;	City;	State; Zip Code			
17,000.00	354 State St Ste 201 Hackensack N	J 07601				
9 TYPE OF EXPENDITURE	■ Political Non-P	olitical				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising	(b) Description texting				
	(c) Check if travel outside of Texas. Complete Schedule T	Check if Au	stin, TX, officeholder living expense			
11 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Lauren Davis Dallas County Judge						
Date	Payee name					
Amount (\$)	Payee address;	City;	State; Zip Code			
TYPE OF EXPENDITURE	Political Non-	Political				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description				
	Check if travel outside of Texas. Complete Schedule T.	Check if	Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						
	11 1 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Revised 8/17/2020			