

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs	FIRST Denise	MI MI
	NICKNAME	LAST Upchurch	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX: 1521 Creek Valley Road	APT / SUITE #:	CITY: Mesquite TX. ZIP CODE: 75181
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (972)	PHONE NUMBER 222-2595	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms	FIRST Wanda	MI MI
	NICKNAME	LAST Gober	SUFFIX
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4102 Indian Paintbrush Lane Forney, TX 75126		
8 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 934-4225	EXTENSION
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 11 / 19 / 2021 12 / 31 / 21		
11 ELECTION	ELECTION DATE Month Day Year 03 / 01 / 22		ELECTION TYPE <input checked="" type="checkbox"/> Primary Runoff <input type="checkbox"/> General Special Other Description
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Justice of the Peace Precinct 2 Place 2	
14 NOTICE FROM POLITICAL COMMITTEE(S) <small>Additional Pages</small>	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		

OFFICE USE ONLY

Date Received

Date Hand-delivered to Clerk

Receipt #

Date Processed

Date Imaged

2022 JAN 18 AM 9:51

JOHN F. BARNHART
COUNTY CLERK
DALLAS COUNTY

BY _____ DEPUTY

FILED

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
Denise Upchurch

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)	\$ 575
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,450
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 376.13
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,376.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Denise Upchurch, and my date of birth is 07-17-53.

My address is 1521 Creek Valley Rd, Mesquite, TX, 75181, Dallas.
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 18th day of January, 2022.
(month) (year)

Denise Upchurch
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME
Denise Upchurch

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 1,875

2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. SCHEDULE E: LOANS

\$

5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 1,000

6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED
TO FILER

\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1: 2
2 FILER NAME Denise Upchurch		3 Filer ID (Ethics Commission Filers)
4 Date 12/3/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Wanda Gober 6 Contributor address; City; State; Zip Code 4102 Indian Paintbrush Lane Forney TX. 75126	7 Amount of contribution (\$) \$110
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/09/2021	Full name of contributor out-of-state PAC (ID#: _____) Edna Burnett Contributor address; City; State; Zip Code 367 E Las Colinas Blvd # 145 Irving TX 75039	Amount of contribution (\$) \$100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Sherry Brown Contributor address; City; State; Zip Code 6812 Wilhelmina Drive Dallas TX 75237	Amount of contribution (\$) \$115
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2021	Full name of contributor out-of-state PAC (ID#: _____) Kathy Barron Contributor address; City; State; Zip Code 2306 N. Beltline Rd Apt 823 Mesquite. TX 75150	Amount of contribution (\$) \$100
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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1: 2
2 FILER NAME Denise Upchurch		3 Filer ID (Ethics Commission Filers)
4 Date 12/29/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Carmella Dominguez 6 Contributor address; City; State; Zip Code PO Box 2374 Addison TX 75001	7 Amount of contribution (\$) \$250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/13/2021	Full name of contributor out-of-state PAC (ID#: _____) Denise Upchurch Contributor address; City; State; Zip Code 1521 Creek Valley Road Mesquite TX 75181	Amount of contribution (\$) \$1,200
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	2 FILER NAME Denise Upchurch	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2021	5 Payee name Dallas County Democratic Party	
6 Amount (\$) 1,000.00	7 Payee address; 1414 Washington Avenue	City; State; Zip Code Dallas TX 75204
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Candidate Filing Fee
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 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
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
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
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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