

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: <div style="text-align: right; font-size: 1.2em;">20</div>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <div style="text-align: center; font-size: 1.2em;">Ms.</div>	FIRST <div style="text-align: center; font-size: 1.2em;">Carric</div>	MI <div style="text-align: center; font-size: 1.2em;">h</div>	<div style="border: 2px solid black; padding: 5px; font-weight: bold; font-size: 1.5em; transform: rotate(90deg);">FILED</div> <div style="border: 1px solid black; padding: 2px; font-size: 0.8em; transform: rotate(90deg);"> 2025 JUL 15 PM 1:58 JOHN F. WARRINEN COUNTY CLERK DALLAS COUNTY BY [Signature] INPUT </div>
	NICKNAME	LAST <div style="text-align: center; font-size: 1.2em;">Singleton</div>	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; <div style="text-align: center; font-size: 1.2em;">PO Box 386</div>	APT / SUITE #; <div style="text-align: center; font-size: 1.2em;">Cedar Hill TX</div>	STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">TX 75106</div>	
<input type="checkbox"/> Change of Address	AREA CODE <div style="text-align: center; font-size: 1.2em;">(817)</div>	PHONE NUMBER <div style="text-align: center; font-size: 1.2em;">435-1195</div>	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <div style="text-align: center; font-size: 1.2em;">Mr.</div>	FIRST <div style="text-align: center; font-size: 1.2em;">Walker</div>	MI <div style="text-align: center; font-size: 1.2em;">F.</div>	Date Received
	NICKNAME	LAST <div style="text-align: center; font-size: 1.2em;">Musgrave</div>	SUFFIX <div style="text-align: center; font-size: 1.2em;">III</div>	Date Hand-delivered or Date Postmarked
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); <div style="text-align: center; font-size: 1.2em;">6060 N. Central Expy Ste 500</div>		CITY; <div style="text-align: center; font-size: 1.2em;">Dallas</div>	STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">TX 75206</div>
(Residence or Business)	AREA CODE <div style="text-align: center; font-size: 1.2em;">(214)</div>	PHONE NUMBER <div style="text-align: center; font-size: 1.2em;">516-9769</div>	EXTENSION	Receipt #
8 CAMPAIGN TREASURER PHONE	AREA CODE <div style="text-align: center; font-size: 1.2em;">(214)</div>		PHONE NUMBER <div style="text-align: center; font-size: 1.2em;">516-9769</div>	Amount \$
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 checked="" type="checkbox"/> July 15 <input 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 <div style="text-align: center; font-size: 1.2em;">2 / 25 / 2025</div>		THROUGH	Month Day Year <div style="text-align: center; font-size: 1.2em;">6 / 30 / 2025</div>
11 ELECTION	ELECTION DATE Month Day Year <div style="text-align: center; font-size: 1.2em;">3 / 3 / 2026</div>		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">Judge, County Criminal Court 9</div>	
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.			
<input type="checkbox"/> Additional Pages	<input type="checkbox"/> GENERAL	COMMITTEE NAME		
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS		
		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 Carrie L Singleton		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)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,883.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,255.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 9,585.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

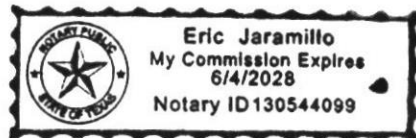
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Carrie L Singleton

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the 15th day of July.

20 25, to certify which, witness my hand and seal of office.

[Signature] Eric Jaramillo Notary
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 <i>Cornie L. Singleton</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>9,883.75</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>500.00</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>749.98</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>2,917.31</i>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>1,088.56</i>
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: 9
2 FILER NAME <i>Carrie L. Singleton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5/19/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Catherine Gould</i>	7 Amount of contribution (\$) <i>\$100</i>
6 Contributor address; City; State; Zip Code <i>PO Box 225620 Dallas TX 75222</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</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>5/25/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Suzanna Lee</i>	Amount of contribution (\$) <i>\$26.81</i>
Contributor address; City; State; Zip Code <i>61064 Louisiana 1046 Amite City LA 70422</i>		
Contributor's principal occupation <i>Travel Advisor</i>		Contributor's job title <i>Travel Advisor</i>
Contributor's employer/law firm <i>Peace Out Vacations</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>5/28/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Carol Donovan</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>6333 E Mockingbird Ln, Sk 147 Dallas, TX 75214</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Carol Crabtree Donovan, PC</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: 9
2 FILER NAME Carnie L Singleton		3 Filer ID (Ethics Commission Filers)
4 Date 5/29/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Randel Cross	7 Amount of contribution (\$) \$526.50
6 Contributor address; City; State; Zip Code 3 Brookside Ct Dallas TX 76063		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Randel Cross 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 5/30/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Krsti Kestl	Amount of contribution (\$) \$500
Contributor address; City; State; Zip Code 4144 N. Central Expy, Ste 1000 Dallas, TX 75204		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Kestl Law, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 6/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shedrick White	Amount of contribution (\$) \$50
Contributor address; City; State; Zip Code 7806 Glenside Dr Rowlett TX 75089		
Contributor's principal occupation Law Enforcement Officer		Contributor's job title Deputy Sheriff
Contributor's employer/law firm Dallas County		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)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 9
2 FILER NAME Carnie L. Singleton		3 Filer ID (Ethics Commission Filers)
4 Date 6/2/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Casel Henry, Jr.	7 Amount of contribution (\$) \$105.71
6 Contributor address; City; State; Zip Code 446 Euless Drive Cedar Hill TX 75104		
8 Contributor's principal occupation Cyber Security		9 Contributor's job title Director
10 Contributor's employer/law firm Global Payments		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 6/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Brook Busbee	Amount of contribution (\$) \$250
Contributor address; City; State; Zip Code 133 N. Riverfront Blvd Dallas TX 75207		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Dallas County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 6/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tina Boyd-Cooper	Amount of contribution (\$) \$50
Contributor address; City; State; Zip Code 720 N. Joe Wilson, #511 Cedar Hill TX 75104		
Contributor's principal occupation Court Coordinator		Contributor's job title Court Coordinator
Contributor's employer/law firm Dallas County		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)

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: 9
2 FILER NAME <i>Carmie L Singleton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6/2/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Celisse Rideaux</i>	7 Amount of contribution (\$) <i>\$100</i>
6 Contributor address; City; State; Zip Code <i>2625 Villa De Lago, Unit 6 Grand Prairie TX 75054</i>		
8 Contributor's principal occupation <i>Practice Administrator</i>		9 Contributor's job title <i>Practice Administrator</i>
10 Contributor's employer/law firm <i>Baylor Scott & White</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>6/2/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Reed Prospere</i>	Amount of contribution (\$) <i>\$150</i>
Contributor address; City; State; Zip Code <i>6440 N. Central Expy, Ste 601 Dallas TX 75206</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Prospere & Russell</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6/2/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Enol Phipps</i>	Amount of contribution (\$) <i>\$5,000</i>
Contributor address; City; State; Zip Code <i>10424 Westlawn Dr Dallas TX 75229</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>AT&T</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: 9
2 FILER NAME Carrie L Singleton		3 Filer ID (Ethics Commission Filers)
4 Date 6/2/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Christy Dean	7 Amount of contribution (\$) \$158.31
6 Contributor address; City; State; Zip Code 3839 Princess Lane Dallas TX 75229		
8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney	
10 Contributor's employer/law firm Dallas County	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		
Date 6/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Heath Hornis	Amount of contribution (\$) \$250
Contributor address; City; State; Zip Code 8111 Quicksilver Dallas TX 75249		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Heath Hornis		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 6/2/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shequita Kelly	Amount of contribution (\$) \$100
Contributor address; City; State; Zip Code PO Box 1835 Cedar Hill TX 75106		
Contributor's principal occupation Judge		Contributor's job title Judge
Contributor's employer/law firm Dallas County		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)

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: <p style="text-align: center;">9</p>
2 FILER NAME <i>Carmie L Singleton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6/3/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Christopher Buxell</i>	7 Amount of contribution (\$) <i>\$250</i>
6 Contributor address; City; State; Zip Code <i>209 Montreal Circle Birmingham AL 35211</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>SILG</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>6/3/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>M/C Criminal Law</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>13747 Montford Dr, Ste 315 Dallas TX 75240</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 <i>6/3/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Danielle Byrd</i>	Amount of contribution (\$) <i>\$105.71</i>
Contributor address; City; State; Zip Code <i>3219 Koscher Dr Cedar Hill TX 75104</i>		
Contributor's principal occupation <i>Teacher</i>		Contributor's job title <i>Teacher</i>
Contributor's employer/law firm <i>SWRC</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: 9
2 FILER NAME Carmie L Singleton		3 Filer ID (Ethics Commission Filers)
4 Date 6/3/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Natacha Pierre	7 Amount of contribution (\$) \$50
6 Contributor address; City; State; Zip Code 6810 Petty Lane Dallas TX 75217		
8 Contributor's principal occupation Locum Physician		9 Contributor's job title Physician
10 Contributor's employer/law firm Comp Health		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 6/3/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Charlie Humphreys	Amount of contribution (\$) \$200
Contributor address; City; State; Zip Code 11300 N. Central Expy, Ste 430 Dallas, TX 75243		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Humphreys & Peterson Law Firm PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 6/9/25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kenneth Medlock	Amount of contribution (\$) \$1000
Contributor address; City; State; Zip Code 1414 W Wheatland Rd, Ste 100 Duncanville TX 75116		
Contributor's principal occupation Real Estate Broker		Contributor's job title Broker
Contributor's employer/law firm Townview Realtors		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)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 9
2 FILER NAME <i>Came L. Singleton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6/9/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Chante Ginder</i>	7 Amount of contribution (\$) <i>\$105.71</i>
6 Contributor address; City; State; Zip Code <i>1939 Elderleaf Dr Dallas TX 75232</i>		
8 Contributor's principal occupation <i>Investigator</i>		9 Contributor's job title <i>Investigator</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	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Jason Bowes</i>	Amount of contribution (\$)
<i>6/17/25</i>	Contributor address; City; State; Zip Code <i>6613 Preston Rd, Apt 9 Dallas TX 75205</i>	<i>\$350</i>
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>J Bowes Law</i>		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#: _____ <i>Audrie Riley</i>	Amount of contribution (\$)
<i>6/17/25</i>	Contributor address; City; State; Zip Code <i>133 N. Riverfront Blvd, 6th Floor Dallas TX 75207</i>	<i>\$100</i>
Contributor's principal occupation <i>Judge</i>		Contributor's job title <i>Judge</i>
Contributor's employer/law firm <i>Texas Judiciary</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
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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: 9
2 FILER NAME <i>Carmie L Singleton</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>6/18/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ann Dorre Kirk</i>	7 Amount of contribution (\$) <i>\$30</i>
6 Contributor address; City; State; Zip Code <i>5709 Oakleaf Dr, #1704 Ft. Worth TX 76132</i>		
8 Contributor's principal occupation <i>Licensed Massage Therapist</i>		9 Contributor's job title <i>Licensed Massage Therapist</i>
10 Contributor's employer/law firm <i>Relaxation U Knead</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>6/20/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Myon Boyd</i>	Amount of contribution (\$) <i>\$25</i>
Contributor address; City; State; Zip Code <i>7598 Addison Dr NW Huntsville AL 35806</i>		
Contributor's principal occupation <i>Instructor</i>		Contributor's job title <i>Instructor</i>
Contributor's employer/law firm <i>AAMU</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>6/29/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Hazel Roper</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address; City; State; Zip Code <i>338 Blue Ridge Dr Powder Springs GA 30127</i>		
Contributor's principal occupation <i>Unemployed</i>		Contributor's job title
Contributor's employer/law firm <i>Unemployed</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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LOANS (JUDICIAL)

SCHEDULE E(J)

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 E(J): 1
2 FILER NAME Carrie L. Singleton		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 4/1/25	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie L. Singleton	9 Loan Amount (\$) \$500
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code PO Box 386 Cedar Hill TX 75106	10 Interest rate N/A
		11 Maturity date N/A
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Attorney
14 Lender's Employer/Law Firm Self-employed		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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
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.

1 Total pages Schedule F1: 3	2 FILER NAME Carrie L. Singleton	3 Filer ID (Ethics Commission Filers)
4 Date 5/30/25	5 Payee name Walmart	
6 Amount (\$) 13.42	7 Payee address; 930 W. Walnut Creek, Suite 800	City: Mansfield State: TX Zip Code: 76063
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description Campaign Envelopes & Mailing Labels
	(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 5/31/25	Payee name PayPal	
Amount (\$) 8.38	Payee address; 2211 N. 1st Street	City: San Jose State: CA Zip Code: 95131
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Electronic Donation Platform Fee
	<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 6/1/25	Payee name FedEx Office	
Amount (\$) 371.35	Payee address; 425 E. Pleasant Run Rd., Ste 275	City: Cedar Hill State: TX Zip Code: 75104
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign Poster
	<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.

1 Total pages Schedule F1: 3	2 FILER NAME Carrie L Singleton	3 Filer ID (Ethics Commission Filers)
4 Date 6/1/25	5 Payee name FedEx Office	
6 Amount (\$) 35.18	7 Payee address; 425 E Pleasant Run Rd., Ste 275	City; State; Zip Code Cedar Hill TX 75104
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Campaign Poster Mounting
	<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 6/4/25	Payee name Ultimate Tees Print Studio, LLC	
Amount (\$) 440.68	Payee address; 7940 Rodeo Trail, Ste 360	City; State; Zip Code Mansfield TX 76063
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign T-Shirts
	<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 6/10/25	Payee name Walmart	
Amount (\$) 10.79	Payee address; 930 N. Walnut Creek, Ste 800	City; State; Zip Code Mansfield TX 76063
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Campaign Envelopes
	<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

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

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.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4: 2	2 FILER NAME: Carrie L Singlebn	3 FILER ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 CREDIT CARD ISSUER	Name of financial institution Bank of America
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6 PAYMENT	(a) Amount Charged \$ 12.53	(b) Date Expenditure Charged 3/8/25	(c) Date(s) Credit Card Issuer Paid 3/10/25
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7 PAYEE	(a) Payee name Hostinger.com	(b) Payee address; City, State, Zip Code Hostinger, UAB Svitrigailos str. 34, 03230
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8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Website Email Hosting
	(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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PAYMENT	(a) Amount Charged \$ 100	(b) Date Expenditure Charged 4/4/25	(c) Date(s) Credit Card Issuer Paid 4/5/25
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PAYEE	(a) Payee name Ram Web Design	(b) Payee address; City, State, Zip Code PO Box 171752 Dallas TX 75217
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Logo
	(c) <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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PAYMENT	(a) Amount Charged \$ 13.85	(b) Date Expenditure Charged 5/2/25	(c) Date(s) Credit Card Issuer Paid 5/8/25
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PAYEE	(a) Payee name Office Depot Orders	(b) Payee address; City, State, Zip Code 6600 North Military Trail Boca Raton FL 33496
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PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Campaign Name Tag
	(c) <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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