JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1 Filer ID Total pages filed: The JC/OH Instruction Guide explains how to complete this form. 9 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Dominique NAME Date Received SUFFIX **NICKNAME** LAST Torres Williams Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** PO Box 226542 MAILING Receipt # Amount **ADDRESS** Change of Address Dallas, TX 75260 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI TREASURER NAME Mrs. Debra NICKNAME LAST SUFFIX Peek-Haynes CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: STATE: ZIP CODE **TREASURER ADDRESS** 2020 W. Wheatland Road, Dallas, TX 75232 (Residence or Business) CAMPAIGN PHONE NUMBER AREA CODE **EXTENSION** TREASURER PHONE REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 X appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit PERIOD Month Day Year Month Day Year COVERED THROUGH 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Dallas County Criminal Court No. 4 **GO TO PAGE 2**

FORM JC/OH

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 9

13 C / OH NAME	14 Filer ID										
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM POLITICAL COMMITTEE(S) candidate / officeholder. These expenditures may have been made without the candidate's or officeholders are required to report this information only if they receive required to report this information of the receiver required to report the receiver required to report this information of the receiver required to report this information of the receiver required to report this information of the receiver required to report the receiver required to repo										
Additional Pages	COMMITTEE TYPE COMMITTEE NAME GENERAL										
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	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00							
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00							
EXPENDITURE TOTALS	NDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES										
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 911.51							
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AST DAY OF THE	\$ 333.02								
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	OF THE LAST DAY	\$ 0.00								
AFFIX NO	JULIA VASQUE Notary ID # 133106 My Commission Exp 05-18-2025	Signature of		be reported by me							
Sworn to and subso	Sworn to and subscribed before me, by the said										
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath											

SUBTOTALS - JC/OH

FORM JC/OH

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	ER NAM				
		E SUBTOTALS SCHEDULE		\$	SUBTOTAL AMOUNT
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	911.51
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	. 🗆	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	. 🗆	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal S	ards/Memorials Ex ervices estruction Guid			ages	/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	
L	Sch: 1/6 Rpt: 4/9		Torres Willia	ams, [Dominique							
4	Date	5	Payee name									
	12/13/2024		DROPBOX									
6	Amount (\$)	7	Payee addres	ss;	City;	State	; Zip Co	de				
ı	\$12.78		1800 Owen	s St.								
ı												
			San Francis	sco, C	A 94158							
8		(a)	Category (Se	ee Categ	ories listed at the t	op of this sch	nedule)	(b)	Description			
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ed above)
1	Total pages Schedule F1: Sch: 2/6 Rpt: 5/9	Torres Williams, Dominique	
	Date 09/13/2024	5 Payee name DROPBOX	
6	Amount (\$) \$12.78	7 Payee address; City; State; Zip Code 1800 Owens St. San Francisco, CA 94043	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense ONLINE OFFICE SUPPORT SOFTWA CAMPAING	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date 08/13/2024	Payee name DROPBOX	
	Amount (\$) \$12.78	Payee address; City; State; Zip Code 1800 Owens St. San Francisco, CA 94043	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense ONLINE OFFICE SUPPORT SOFTWATCAMPAING	
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	Date 07/15/2024	Payee name DROPBOX	
	Amount (\$) \$12.78	Payee address; City; State; Zip Code 1800 Owens St. San Francisco, CA 94158	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule To Check if Austin, TX, officeholder living expense ONLINE OFFICE SUPPORT SOFTWA CAMPAING	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Reverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
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	5 Payee name
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	7 Payee address; City; State; Zip Code
\$12.79	1600 Amphitheatre Parkway
	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule T.
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	ONLINE OFFICE SUPPORT SOFTWARE FOR CAMPAING
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Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/04/2024	GSUITE
Amount (\$)	Payee address; City; State; Zip Code
\$12.79	1600 Amphitheatre Parkway
	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
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Date	Payee name
10/02/2024	GSUITE
Amount (\$)	Payee address; City; State; Zip Code
\$12.79	1600 Amphitheatre Parkway
	Mountain View, CA 94043
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Candidate/Officeholder/Political Credit Card Payment Total pages Schedule F1: Sch: 3/6 Rpt: 6/9 Date 12/02/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 11/04/2024 Amount (\$) \$12.79 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 11/04/2024 Amount (\$) \$12.79 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 10/02/2024 Amount (\$) \$12.79

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Services			ges/	Contract Labor		avel Out of District THER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 4/6 Rpt: 7/9	2	FILER NAME Torres Williams, Domi	nique			3	Fi	ler ID
4	Date 09/03/2024	5	Payee name GSUITE				•		
6	Amount (\$) \$13.69	7	Payee address; City; 1600 Amphitheatre Pa Mountain View, CA 94	rkway	Zip Cod	е			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories lis Office Overhead/Renta		dule) (I		Check if Austin, TX	X, off	of Texas. Complete Schedule T. iceholder living expense SUPPORT SOFTWARE FOR
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder na	me Off	fice sough	nt			Office held
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
L	Sch: 5/6 Rpt: 8/9	Torres Williams, Dominique
4	Date	5 Payee name
	12/16/2024	Godaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$22.77	2155 E. GoDaddy Way
L		Tempe, AZ 85284
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website hosting for campaign
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
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	07/15/2024	Godaddy
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$188.34	2155 E. GoDaddy Way
		Tempe, AZ 85284
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website hosting for campaign
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	expenditure to benefit C/OI	1
Г	Date	Payee name
	08/28/2024	MEXICAN AMERICAN BAR ASSOCIATION
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1150 S Olive St.
		Ste. 600
		Los Angelas, CA 90015
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense DUES FOR MEMBERSHIP
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) 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/Political Committee Credit Card Payment			mmittee	Legal Services The Instruction Gu				/Contract Labor ete this form.		OTHER (enter a	category not liste	d above)
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID		
	Sch: 6/6 Rpt: 9/9		Torres Will	iams, Dominique								
4	Date	5	Payee name	9								
	07/18/2024		SOUTHWE	EST AIRLINES								
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de					
	\$490.96		2702 Love	Field Dr.								
			Dallas, TX	75235								
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