CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Co	ommission Filers)	2 Total pages filed: 18	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME	John LAST		F. SUFFIX	OFFICE USE ONLY Date Received	à
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; P.O. Box 2	CONTROL OF CONTROL CON	CITY; STATE; S, Texas 75222-21	ZIP CODE	JOHN F W. COUNTY	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (972)523-	PHONE NUMBER	EXTENSIO	И	Date Hand delivered or Date Postm	arked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Karl		MI	Receipt # Amount \$ Date Processed	
	NICKNAME	Warren		SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / S alk Street		gton,	STATE; ZIP CODE Texas 76011	
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)800-	PHONE NUMBER	EXTENSIO	N.		
9 REPORT TYPE	January 15	30th day before e	ection Exce	off eded Modified orting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - R	FR)
10 PERIOD COVERED	Month 02	Day Year / 20 / 2022	E. S. STONGER M. STONGER	Month 05 13	Day Year / 2022 /	
11 ELECTION	Month Day	Year Primary	Runoff Special	Other Description		
12 OFFICE	OFFICE HELD (if any) Dallas County CI	erk		OUGHT (if known		
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFICE	EHOLDER. THESE EXPENDITURE	S MAY HAVE BEEN MADE W	THOUT THE CAN	ADE BY POLITICAL COMMITTEES TO SUDINATE'S OR OFFICEHOLDER'S KNOWLEI THEY RECEIVE NOTICE OF SUCH EXPENDI	DGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
Additional Pages	9511-00	COMMITTEE CAMBAICH TOP	ASURER NAME			
Additional Pages	SPECIFIC	COMMITTEE CAMPAIGN TRE				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	1	6 Filer ID (Ethics Commission 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)	\$21,257.16
Maro TALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$7,740.80
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$10,516.36
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	THE \$
(1) Affidavit	Please complete either option below:	idate or Officeholder
7 OF TO 10 No. 128	yssion Expires 8867671	6th day of May ,
20 22 , to certify	which witness my hand and seal of office.	notary Public
Signature of officer administe		Title of office administering oath
(2) Unavers Danks	OR	MANAGEMENT OF THE PARTY OF THE
(2) Unsworn Declarati	on	
My name is	, and my date of birth is	
My address is		
	(street) (city) (sta	te) (zip code) (country)
Executed in	County, State of , on the day of(month)	, 20 (year)
	Signature of Candidat	e/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Cor	mmission Filers)
John F. Warren		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 21,257.16
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	ONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	AL CONTRIBUTIONS	\$ 7,740.80
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITION	TICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONA	AL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	S TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITIC	CAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT	FRIBUTIONS RETURNED	\$

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: 1of 9
2 FILER NAME John F. W	arren		3 Filer ID (Ethics Commission Filers)
4 Date Mar 4, 2022	5 Full name of contributor ☐ out-of-state	PAC (ID#:)	7 Amount of contribution (\$) \$2,427.26
	6 Contributor address; City; 3300 Oak Lawn Ave., 3rd. Fl. [State; Zip Code Dallas, TX 75219	
8 Principal occu	pation / Job title (See Instructions) Attorney	9 Employer (See Instruction Self	ctions)
Date Mar 5, 2022	Full name of contributor	PAC (ID#:)	Amount of contribution (\$) \$96.62
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date Mar 7, 2022	Full name of contributor	PAC (ID#:)	Amount of contribution (\$) \$485.06
	Contributor address; City;	State; Zip Code	
	1304 Boardwalk St. Arlington	on TX 76011	
Principal occup	Deation / Job title (See Instructions) Information Technology	Employer (See Instru-	ctions)
Date Mar 8, 2022	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$) \$2,427.26
	Contributor address; City;	State; Zip Code	
	4311 Oak Lawn Ave. Suite 150 Da	illas, TX 75219	
Principal occup	pation / Job title (See Instructions) Attorney	Employer (See Instru Aldous\Walker Ll	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A1

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

The	Instruction Guide explains how to co	mplete this form.	1 Total pages Schedule A1: 2 of 9
2 FILER NAME John F. War	ren		3 Filer ID (Ethics Commission Filers)
4 Date Mar 14, 2022	Craig Smith	ut-of-state PAC (ID#:	7 Amount of contribution (\$) \$9662
	6 Contributor address; C	City; State; Zip Code	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Inst	ructions)
Date Mar 17, 2022	Jennifer Bennett	ut-of-state PAC (ID#:\$96.62	_) Amount of contribution (\$)
	Contributor address; C	City; State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Inst	ructions)
Date Mar 18, 2022	Full name of contributor on Mark Malveaux	ut-of-state PAC (ID#:	_) Amount of contribution (\$) \$242.28
		City; State; Zip Code	
	6130 Desco Dr. D	Pallas, TX 75225	
Principal occu	pation / Job title (See Instructions) Attorney	Employer (See Inst McCall, Parkhurst,	
Date Mar 25, 2022	Full name of contributor	ut-of-state PAC (ID#:	_) Amount of contribution (\$) \$96.62
	Contributor address; C	City; State; Zip Code	
	1011 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 Dallas, TX 75219	
	4311 Oak Lawn Ave. Suite 150		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how	to complete thi	s form.	1 Total pages Schedule A1: 3 of 9
2 FILER NAME John F. War				3 Filer ID (Ethics Commission Filers)
4 Date Mar 24, 2022	Full name of contributor Victoria Walton	out-of-state PA		7 Amount of contribution (\$) \$9662
	6 Contributor address;	City;	State; Zip Code	
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date Mar 26, 2022	Full name of contributor Sheldon Smith	out-of-state PA		Amount of contribution (\$) \$242.28
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date Mar 30, 2022	Full name of contributor Peter Malouf	out-of-state PA	C (ID#:)	Amount of contribution (\$) \$193.73
	Contributor address; P.O. BOx 12745	City; Dallas,	State; Zip Code TX 75225	
Principal occu	pation / Job title (See Instructions) Attorney		Employer (See Instruc McCall, Parkhurst, e	
Date Apr 2, 2022	Full name of contributor Sheldon Smith	out-of-state PA	C (ID#:)	Amount of contribution (\$) \$242.28
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruction Dallas County	ctions)
	ATTACHADDIT	IONAL COPIES	OF THIS SCHEDULE AS	NEEDED

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: 4 of 9
2 FILER NAME John F. War	ren	3 Filer ID (Ethics Commission Filers)
4 Date Apr 16, 2022	5 Full name of contributor out-of-state PAC (ID#: Leon Baylor	\$9662
	6 Contributor address; City; State; 2	
8 Principal occu	pation / Job title (See Instructions) 9 Employ	er (See Instructions)
Date Apr 20, 2022	Full name of contributor	\$242.28
	Contributor address; City; State;	
	P.O. Box 192305 Dallas TX 752	119
Principal occup	pation / Job title (See Instructions) Employ	er (See Instructions)
Date Apr 24, 2022	Full name of contributor	\$193.73
	Contributor address; City; State; 2	
Principal occu	pation / Job title (See Instructions) Employ	er (See Instructions)
Date Apr 27, 2022	Full name of contributor	Amount of contribution (\$) \$1,941.71
	Contributor address; City; State; Z	Cip Code
Principal occu	pation / Job title (See Instructions) President Employ GovOS	er (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

Instruction Guide explains how to c	omplete this t	orm.		1 Total pages Schedule A1: 5 of 9
				0 01 0
en				3 Filer ID (Ethics Commission Filers)
George & Larisa Williams				7 Amount of contribution (\$) \$1,500.00
6 Contributor address;	City;	State;	Zip Code	
9 Dolphin Row	Isle of Palms,	sc	29451	
pation / Job title (See Instructions)	9) Emplo	yer (See Instruct	ions)
Full name of contributor Steve Russell	out-of-state PAC (ID#:		Amount of contribution (\$) \$1000.00
Contributor address;	City;	State;	Zip Code	
2619 McKinney Ave., Apt. 1511	Dallas	TX	75204	
ation / Job title (See Instructions)		Emplo	yer (See Instruct	ions)
		KoFile	e Technologies	
Nomi Stone				Amount of contribution (\$) \$2,000.00
Contributor address;	City;	State;	Zip Code	
8600 Thackery St., # 7205	Dallas,	TX	75225	
ation / Job title (See Instructions)		25-10-10-10-10-10-10-10-10-10-10-10-10-10-		ions)
CWA - COPE PCC				Amount of contribution (\$) \$1,500.00
Contributor address;	City;		Zip Code	
1408 N Washington Ave., # 300	Dallas	TX	75204	
nation / Job title (See Instructions) President		Emplo	yer (See Instruct	tions)
	George & Larisa Williams 6 Contributor address; 9 Dolphin Row Dation / Job title (See Instructions) Full name of contributor Steve Russell Contributor address; 2619 McKinney Ave., Apt. 1511 ation / Job title (See Instructions) Full name of contributor Nomi Stone Contributor address; 8600 Thackery St., # 7205 Dation / Job title (See Instructions) Full name of contributor Contributor address; 8600 Thackery St., # 300 Dation / Job title (See Instructions)	5 Full name of contributor George & Larisa Williams 6 Contributor address; City; 9 Dolphin Row Isle of Palms, pation / Job title (See Instructions) Full name of contributor Steve Russell Contributor address; City; 2619 McKinney Ave., Apt. 1511 Dallas ation / Job title (See Instructions) Full name of contributor Nomi Stone Contributor address; City; 8600 Thackery St., # 7205 Dallas, pation / Job title (See Instructions) Full name of contributor Contributor address; City; 8600 Thackery St., # 7205 Dallas, pation / Job title (See Instructions) Full name of contributor CWA - COPE PCC Contributor address; City; 1408 N Washington Ave., # 300 Dallas	5 Full name of contributor George & Larisa Williams 6 Contributor address; City; State; 9 Dolphin Row Isle of Palms, SC Dation / Job title (See Instructions) Full name of contributor Steve Russell Contributor address; City; State; 2619 McKinney Ave., Apt. 1511 Dallas TX ation / Job title (See Instructions) Full name of contributor Nomi Stone Contributor address; City; State; 8600 Thackery St., # 7205 Dallas, TX pation / Job title (See Instructions) Full name of contributor Nomi Stone Contributor address; City; State; 8600 Thackery St., # 7205 Dallas, TX Pation / Job title (See Instructions) Full name of contributor CWA - COPE PCC Contributor address; City; State; 1408 N Washington Ave., # 300 Dallas TX Employed	5 Full name of contributor George & Larisa Williams 6 Contributor address; City; State; Zip Code 9 Dolphin Row Isle of Palms, SC 29451 pation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Steve Russell Contributor address; City; State; Zip Code 2619 McKinney Ave., Apt. 1511 Dallas TX 75204 ation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Nomi Stone Contributor address; City; State; Zip Code Nomi Stone Contributor address; City; State; Zip Code 8600 Thackery St., # 7205 Dallas, TX 75225 Pation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Nomi Stone Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior Full name of contributor CWA - COPE PCC Contributor address; City; State; Zip Code The Dallas Interior 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.

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: 6 of 9
2 FILER NAME John F. Wai				3 Filer ID (Ethics Commission Filers)
4 Date May 4, 2022	5 Full name of contributor Darryl Owens	***	C (ID#:)	7 Amount of contribution (\$) \$23.79
	6 Contributor address;	City;	State; Zip Code	
	6701 Coronation Ct.	Arlington,	TX 76017	
8 Principal occu	upation / Job title (See Instructions) Retired		9 Employer (See Instruc	ctions)
Date May 5, 2022	Full name of contributor Asha Kipepeo		C (ID#;)	Amount of contribution (\$) \$145.17
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date May 7, 2022	Full name of contributor Tre' Black	out-of-state PAC	> (ID#:)	Amount of contribution (\$) \$970.61
	Contributor address;	City;	State; Zip Code	
	1133 S. Madison Ave.	Dallas,	TX 75208	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
	CEO		On-Target Logistics	
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions) President		Employer (See Instruc	ctions)
	ATTACH ADDIT		OF THIS SCHEDULE AS I	

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: 7 of 9
2 FILER NAME John F. War	ren				3 Filer ID (Ethics Commission Filers)
4 Date Mar 30, 2022	5 Full name of contributor Helen Giddings	out-of-state PAC	Value of the second)	7 Amount of contribution (\$) \$100.00
	6 Contributor address;	City;	State;	Zip Code	
	400 S Zang Blvd. Ste. 1018	Dallas	TX	75208	
8 Principal occu	pation / Job title (See Instructions) State Representative		9 Empl	oyer (See Instruc	tions)
Date Apr 1, 2022	Full name of contributor Edward C. Bailey	Out-of-state PAC			Amount of contribution (\$) \$250.00
	Contributor address;	City;	State;	Zip Code	
	3435 Willow Crest Lane	Dallas	TX	75233	
Principal occup	pation / Job title (See Instructions) Retired		Empl	oyer (See Instruc	tions)
Date Mar 25, 222	Full name of contributor Brenda Allison	out-of-state PAC	C (ID#:)	Amount of contribution (\$) \$300.00
	Contributor address;	City;	State;	Zip Code	
	2504 Mesa Glen Dr.	Arlington	TX	76001	
Principal occup	pation / Job title (See Instructions) Retired		Empl	oyer (See Instruc	tions)
Date Mar 9, 2022	Full name of contributor Demetris Sampton	out-of-state PAC			Amount of contribution (\$) \$500.00
	Contributor address; P.O. Box 763834	City; Dallas		Zip Code 75376	
Principal occup	pation / Job title (See Instructions) Retired		Empl	oyer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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	s form.	1 Total pages Schedule A1: 8 of 9
2 FILER NAME John F. Warr	en			3 Filer ID (Ethics Commission Filers)
4 Date Mar 10, 2022 8 Principal occur	 5 Full name of contributor Linebarger Goggin Blair & San 6 Contributor address; 2777 N Stemmons Frwy., Ste 10 pation / Job title (See Instructions) 	mpson, LLP City;	State; Zip Code TX 75207 9 Employer (See Inst	7 Amount of contribution (\$) \$1,000.00
	Law Firm			
Date Mar 5, 2022	Full name of contributor Jennifer Mohn		C (ID#:	Amount of contribution (\$) \$2,000.00
	Contributor address; 604 Coquina Lane	City; Austin	State; Zip Code Texas 78746	
Principal occup	ation / Job title (See Instructions) Retired		Employer (See Inst	ructions)
Date Apr 15, 2022	Michael K Crosno	a	C (ID#:	Amount of contribution (\$) \$1,500
	Contributor address; 8408 Carranzo Dr.	City; Austin	State; Zip Code TX 78735	
Principal occup	ation / Job title (See Instructions) President		Employer (See Inst	ructions)
Date Apr 13, 2022	Full name of contributor Michael Hill	out-of-state PA	C (ID#:	Amount of contribution (\$) \$500.00
	Contributor address; 12291Lavender Loop	City; Bradenton	State; Zip Code FL 34212	
Principal occup	nation / Job title (See Instructions)		Employer (See Inst KiFile Techno	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE A1

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

1 he	e Instruction Guide explains how	v to complete th	is form.	1 Total pages Schedule A1: 9 of 9
John F. Wa				3 Filer ID (Ethics Commission Filers)
Date 1ay 11, 2022	5 Full name of contributor Michael B. Hurtt		AC (ID#:)	7 Amount of contribution (\$) \$250.00
	6 Contributor address;	City;	State; Zip Code	
	217 S Hampton Rd.	DeSoto	TX 75115	
Principal occi	upation / Job title (See Instructions)	9 Employer (See Instruct	tions)
	Self Employeed			
Date	Full name of contributor	out-of-state P/	AC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state P/	AC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state P/	AC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 8/17/2020

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 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

Total pages Schedule F1;	2 FILER NAME		3 Filer ID (Ethic	s Commission Filers)
1 of 6	John F. Warren		O THE TE (Ellie	o commission i heraj
Date Mar 11, 2022	5 Payee name Senatorial District 16th			
Amount (\$) \$50	7 Payee address;	City; Dallas	State; TX	Zip Code
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		7
PURPOSE OF EXPENDITURE	Event Sponsorship			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Mar 17, 2022	Dallas County Democratic Party			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$285	1414 N. Washington Ave.	Dallas	TX	75204
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Sponsorship			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		Office held
Date	Payee name			
Mar 28, 2022	Reilly Echols Printing			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$1,461.38	1710 S. Harwood St.	Dallas	TX	75215
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expenses	Campaign Doorhange		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries A The Instruction Guide explains how to a	Nages/Contract Labor	Other (enter a category not listed above)	
1 Total pages Schedule F1: 2 of 2	2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)	
4 Date Mar 29, 2022	5 Payee name Dallas AFL-CIO			
6 Amount (\$) \$100	7 Payee address;	City; Dallas	State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Sponsorship	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held	
Date	Payee name			
Mar 29, 2022	Elite News			
Amount (\$) \$400	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Publication	Description Newspaper	Ad	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held	
Date Apr 21, 2022	Payee name Ecolatino Radio			
Amount (\$) \$1,299	Payee address; Ecolatino Radio 3606 S Tyler St.	City; Dallas	State; Zip Code TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Radio Ad		
	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/OI	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

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 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
Other (once a extension and listed charge)

Candidate/Officeholder/Political Credit Card Payment	, mang L	Wages/Contract Labor	Other (enter a categor	
1 Total pages Schedule F1: 3 of 6	2 FILER NAME John F. Warren		3 Filer ID (Ethics	s Commission Filers)
4 Date Apr 25, 2022	5 Payee name Reilly Echols Printing			
6 Amount (\$) \$1,067.56	7 Payee address; 1710 S. Harwood St.	City; Dallas	State; TX	Zip Code 75215
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description Campaign Pushcards		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought Office held Dallas County C		Office held Dallas County Clerk
Date Mar 28, 2022	Payee name Custom Print DFW			
Amount (\$) \$1,569.56	Payee address; 806 S. Saint Paul St.,	City; Dallas	State; TX	Zip Code 75201
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description 4x4 Signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought Office held Dallas County Cl		
Date Mar 29, 2022	Payee name Out The Door Printing			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$618.50	28 W Spring St.	Cookeville	TX	38501
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expenses	Yard Signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought		Office held Dallas County Clerk
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

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

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	I Committee Legal Services Salaries A The Instruction Guide explains how to 6	Vages/Contract Labor complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 6	2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)
4 Date Mar 30, 2022	5 Payee name Alpha Merit Scholarship Foundation		
6 Amount (\$) \$100	7 Payee address;	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description Campaign Ad	
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk
Date Apr 5, 2022	Payee name Digitalwave		
Amount (\$) \$390	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses Description Illustration Software		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk
Date Apr 8, 2022	Payee name Democratic Monthly		
Amount (\$) \$475	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description Campaign Ac	d
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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 Dallas County Clerk
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries A The Instruction Guide explains how to	Wages/Contract Labor	of the control of the	
1 Total pages Schedule F1: 5 of 6	2 FILER NAME John F. Warren	3	Filer ID (Ethics Commission Filers)	
4 Date Apr 15, 2022	5 Payee name Ed Gray - Commis Radio Show			
6 Amount (\$) \$165	7 Payee address;	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description Radio Advertising		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense	
9 Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH John F. Warren		Office sought	Office held Dallas County Clerk	
Date Apr 16, 2022	Payee name Jacquin Headen for Grand Prairie City Coun	cil		
Amount (\$) \$100	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Political Contribution	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name John F. Warren	Office sought Office held Dallas County C		
Date Apr 18, 2022	Payee name Out The Door Printing			
Amount (\$) \$305.80	Payee address; 28 W Spring St.	City; Cookeville	State; Zip Code TN 38501	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description Campaign Signs	S	
	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/OF	Candidate / Officeholder name John F. Warren	Office sought	Office held Dallas County Clerk	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED!	ED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries A The Instruction Guide explains how to	Nages/Contract Labor	Other (enter a category not listed above)	
1 Total pages Schedule F1: 6 of 6	2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)	
4 Date May 2, 2022	5 Payee name TX Jewish Post			
6 Amount (\$) \$165	7 Payee address;	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(b) Description Newspaper Ad		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H John F. Warren	Office sought	Office held Dallas County Clerk	
Date May 10, 2022	Payee name Toothless Tiger Podcast			
Amount (\$) \$150	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description Campaign Ad		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name John F. Warren	Office sought Office held Dallas County C		
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expenses	Description Campaign Sig	ıns	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin,	, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	