JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) The JC/OH Instruction Guide explains how to complete this form. 2 Total pages filed: 10 3 CANDIDATE/ MS / MRS / MR **OFFICEHOLDER** OFFICE USE ONLY Ms. Elissa M. NAME Date Received NICKNAME Wev 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP CODE OFFICEHOLDER MAILING PO Box 226006 Dallas, TX 75222 **ADDRESS** Change of Address CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (214)PHONE 519 - 9361 6 CAMPAIGN MS / MRS / MR Receipt # FIRST TREASURER Mr. Roberto NAME Date Processed NICKNAME SUFFIX "Rob" Date Imaged Cañas 7 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: ZIP CODE TREASURER ADDRESS 4191 Gaston Ave. Dallas, TX 75246 (Residence or Business) AREA CODE 8 CAMPAIGN PHONE NUMBER EXTENSION TREASURER PHONE 528 - 4191 (214)REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD COVERED THROUGH 11 ELECTION ELECTION DATE ELECTION TYPE X Primary Runoff Month Other Description General 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) Judge of Dallas County Criminal Court 10 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. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

	Elissa Wev	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER TH PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN	\$ 3,590.21
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,208.79
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L OF REPORTING PERIOD	AST DAY \$ 8,992.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS LAST DAY OF THE REPORTING PERIOD	of THE \$ 1,500.00
	Signature of (Candidate/Officeholder
	Please complete either option belo	ow:
(1) Affidavit		
NOTARY STAMP/SE	Chian I Mad	
	d before me by	3
		e Februaryday of 25th
20 22 , to certif	fy which, witness my hand and seal of office. Mound Linda Brandenburg	······································
20 <u>aa</u> , to certif La Brande Signature of officer administ	fy which, witness my hand and seal of office.	***************************************
20 <u>a a</u> , to certif La Blom Le Signature of officer administ	fy which, witness my hand and seal of office. A da B Randahur 9 tering oath Printed name of officer administering oath	······································
20 aa , to certif La Blande Signature of officer administ	fy which, witness my hand and seal of office. A da B Randenburg 9 tering oath Printed name of officer administering oath OR	Linda Brandenburg My Commission Expires 10/31/2024 ID No 129/36/12/ficer administrating oath
20 22, to certife, to certife	fy which, witness my hand and seal of office. A da B Randahur 9 tering oath Printed name of officer administering oath	Linda Brandenburg My Commission Expires 10/31/2024 ID No 129/38/12/ficer administrating oath
20 aa, to certife and a signature of officer administration (2) Unsworn Declarate and a signature is	tering oath Printed name of officer administering oath Printed name of officer administering oath tion and my date of birth	Linda Brandenburg My Commission Expires 10/31/2024 ID No 129/38/12/ficer administrating oath is (state) (zip code) (country)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	FILER NAME Elissa Wev	mmission Filers)		
21	11 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3,140.21	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 450.00	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00	
4.	SCHEDULE E: LOANS	\$ 1,500.00		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
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 FU	\$ 0.00		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	\$ 0.00		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	\$ 0.00		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0.00	

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 comp	olete this form. 1 Total pages Schedule A(J)1: 2 see attached
FILER NAME	Elissa Wev	3 Filer ID (Ethics Commission Filers
Date	5 Full name of contributor out-of	-state PAC ID#:
	6 Contributor address; City	
Contributor's	principal occupation	9 Contributor's job title
Contributor's	employer/law firm	11 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 out-of-	state PAC ID#:
	Contributor address; City	; State; Zip Code
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	Full name of contributor ut-of-	state PAC ID#:
	Contributor address; City	State: Zip Code
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)	

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

8 day finance report - Contributions

Name	Employer	Occupation	Amount	Address	City	State	Postal Code	Date
Curtis Long	Snap Clean Car Wash	Regional Manager	\$1,038.73	1010 W. Kiest Blvd	Ennis	TX	75119	02/10/2022
Eric Esqueda	unemployed	unemployed	\$5.69	9731 Raisbeck Place	Houston	TX	77044	02/10/2022
Black American Futures PAC	N/A	PAC	\$519.52	PO Box 3050	Decatur	GA	30032	2/12/2022
Tara Wilson	HCA	RN	\$26.27	5404 Boca Agua Drive, apt 110	Fort Worth	TX	76112	2/18/2022
Mary Leyendecker	n/a	retired	\$500.00	5542 Monticello Ave	Dallas	TX	75206	2/18/2022
Stonewall Democrats of Dallas	n/a	n/a	\$250.00	PO Box 192305	Dallas	TX	75219	2/14/2022
Texas Latina List	N/A	PAC	\$300.00	PO Box 64025	Fort Worth	TX		2/14/2022
Hunter Lewis	Duffee + Eitzen	Attorney	\$500.00	4311 Oak Lawn Ave # 600	Dallas	TX	75219	2/17/2022

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

1 Total pages Schedule A2: 3 Filer ID (Ethics Commission Filers)
\$
8 Amount of 9 In-kind contribution Contribution \$ description
\$450 Yard signs
Check if travel outside of Texas. Complete Schedule T.
yer (FOR NON-JUDICIAL)(See Instructions)
butor's job title (FOR JUDICIAL)(See Instructions) etired
rm of contributor's spouse (if any) (FOR JUDICIAL)
Amount of In-kind contribution description
yer (FOR NON-JUDICIAL)(See Instructions)
butor's job title (FOR JUDICIAL) (See Instructions)
rm of contributor's spouse (if any) (FOR JUDICIAL)
OULE AS NEEDED
i Rii

LOANS (JUDICIAL)

SCHEDULE E(J)

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

The I	nstruction Guide explains how to complete this	form.	1 Total pages Schedule E(J):
2 FILER NAME Eli	ssa Wev		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	ITEMIZED LOANS	4	\$ 1,500
5 Date of loan 5-9-2021	7 Name of lender	(ID#:)	9 Loan Amount (\$) 1,500
6 Is lender a financial Institution?	8 Lender address; City; 502 S Winnetka Ave. Dallas,	10 Interest rate N/A 11 Maturity date N/A	
12 Lender's Principal Attorney		13 Lender's Job Title Assistant Distric	t Attorney
14 Lender's Employer Dallas Co	VLaw Firm Dunty District Attorney's Office	15 Law Firm of lender's spou	use (if any)
	law firm of parent(s) (if any)	4	
17 Description of Coll	ateral	Check if person account (See I	nal funds were deposited into political
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)
not applicable	21 Guarantor address; City;	State; Zip Code	
23 Guarantor's Princi	Dal Occupation	24 Guarantor's Job Title	
25 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's	spouse (if any)
27 If guarantor is a ch	nild, law firm of parent(s) (if any)	L	
If I	ATTACH ADDITIONAL COPIES		A STATE OF THE STA

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1 2 -Sep aHuck	bed Elissa Wev		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(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	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.	Check if Austin	n, TX. officeholder living expense
Complete ONLY 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.	Check if Austin.	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

8 DAY REPORT Expenditures

		Payee Info		Purpose of Expenditure		
Date	Payee Name	Amount	Address	Category	Description	
2/14/2022	Shell	\$54.68	500 W Kiest Blvd, Dallas, TX 75224	Travel in district	Gas	
02/14/2022	George Allen Garage	\$3.00	500 Elm Street, Suite 2100, Dallas, TX 75202	Travel in district	Parking	
02/17/2022	The Home Depot	\$53.97	2610 Fort Worth Ave, Dallas, TX 75211	Advertising Expense	Equipment for yard signs	
02/17/2022	The Home Depot - Lemmon	\$321.50	6110 Lemmon Ave, Dallas, TX 75209	Advertising Expense	Stakes for yard signs	
02/18/2022	The Dallas Voice	\$455.00	1825 Market Center Blvd. Suite 240 Dallas, TX 75207	Advertising Expense	Print Ad	
02/19/2022	Speedy Shop	\$56.73	Dallas, TX	Travel in district	Gas	
02/20/2022	KKDA AM FM RADIO	\$3,845.00		Advertising Expense	Radio Ad	
02/21/2022	FedEx Printing McKinney	\$119.06	2107 Eldorado Pkwy Suite 108, McKinney, TX 75070	Printing expense	Push cards	
20/21/2022	Print Place	\$299.85	1110 Avenue H East Arlington, TX 76011	Printing expense	Push cards	
TOTAL		\$5,208.79				

OUTSTANDING LOANS If the requested information is not applicable, DO NOT include this page in the report. SCHEDULE L The Instruction Guide explains how to complete this form. 1 Total pages Schedule L: 2 FILER NAME Filer ID (Ethics Commission Filers) Elissa Wev LENDER 4 Name of lender **INFORMATION** Elissa Wev 5 Lender address: City; State: Zip Code 1415 Eastus Dr. Dallas, TX 75208 **GUARANTOR** 6 Name of guarantor **INFORMATION** 7 Guarantor address: X not applicable City; LENDER Name of lender INFORMATION Lender address; City: Zip Code **GUARANTOR** Name of guarantor **INFORMATION** Guarantor address; not applicable City; State: Zip Code LENDER Name of lender INFORMATION Lender address; City; State: Zip Code **GUARANTOR** Name of guarantor **INFORMATION** Guarantor address; not applicable City; State; Zip Code LENDER Name of lender INFORMATION Lender address; City; State: Zip Code **GUARANTOR** Name of guarantor **INFORMATION** Guarantor address; not applicable City; State; Zip Code ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED