#### JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR FIRST OFFICE USE ONLY **OFFICEHOLDER** Ms. Elissa M. NAME Date Received NICKNAME LAST Wev 4 CANDIDATE / ADDRESS / PO BOX: APT / SUITE #; OFFICEHOLDER MAILING PO Box 226006 Dallas, TX 75222 **ADDRESS** Change of Address AREA CODE 5 CANDIDATE/ PHONE NUMBER EXTENSION **OFFICEHOLDER** (214)PHONE 519 - 9361 Receipt # Amounts MS / MRS / MR CAMPAIGN **TREASURER** Mr. Roberto NAME Date Processed NICKNAME SUFFIX Date Imaged "Rob" Cañas STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN ZIP CODE **TREASURER** 4191 Gaston Ave. Dallas, TX 75246 **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE (214)528 - 4191 9 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 Primary Runoff Other Description Month 13 OFFICE SOUGHT (if known) 12 OFFICE OFFICE HELD (if any) 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'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND 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

OAIIII AIGIN	I MANCE REPORT	COVER SHEET PG 2
15 JC/OH NAME	Wer	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$ 6.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$4,112.44
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$6,137.25
CONTRIBUTION BALANCE	<ol> <li>TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD</li> </ol>	\$ 10,833.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	
requ	ear, or affirm, under penalty of perjury, that the accompanying report is true ired to be reported by me under Title 15, Election Code.  Signature of Ca	ndidate/Officeholder
	Please complete either option below	r:
My Com	padalupe Saucedo mission Expires /8/2025 otary ID 6592301  pefore me by Elissa M. Wev this the	
20 <b>22</b> , to certify v	which, witness my hand and seal of office.	A NAME OF THE PROPERTY OF THE
Signature of officer administer	alup Souds Maria Gvadalupe Sa ing oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declaration	or n	
My name is	, and my date of birth is	
Executed in	(street) (city) (s County, State of , on the day of (month	state) (zip code) (country), 20 (year)
	Signature of Candid	late/Officeholder (Declarant)

### SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

19	FILER NAME		20 Filer ID (Ethics Co	mmission Filers)
	Elissa Wev			
21	SCHEDULE SUBTOT			SUBTOTAL AMOUNT
1.	SCHEDULI	EA1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,612.44.
2.	SCHEDULE	EA2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 1,612.44.
3.	SCHEDULE	E B: PLEDGED CONTRIBUTIONS		\$ 1,000
4.	SCHEDULE	E E: LOANS		\$ 1,500
5.	SCHEDULE	E F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 6,137.25
6.	SCHEDULE	E F2: UNPAID INCURRED OBLIGATIONS		\$ 0,00
7.	SCHEDULE	E F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (	CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE	E F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0,00
9.	SCHEDULE	E G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	\$0.00
10.	SCHEDULE	E H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$ 0,00
11.	SCHEDULE	E I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 0.00
12.	SCHEDULE	E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$ 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 complete this fo	rm.	1 Total pages Schedule A(J)1:  — See Attached
2 FILER NAME	Elissa Wev		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor  ut-of-state PAC ID	)#:)	7 Amount of contribution (\$)
	6 Contributor address; City;	State; Zip Code	
8 Contributor's	principal occupation	9 Contributor's job title	
10 Contributor's	employer/law firm	11 Law firm of contributor's	s spouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)		
Date	Full name of contributor	#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Contributor's	principal occupation	Contributor's job title	
Contributor's	employer/law firm	Law firm of contributor's	s spouse (if any)
If contributor	is a child, law firm of parent(s) (if any)		
Date	Full name of contributor	#:)	Amount of contribution (\$)
	Contributor address; City;	State: Zip Code	
Contributor's	principal occupation	Contributor's job title	
Contributor's	employer/law firm	Law firm of contributor's	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.

Name	Employer	Occupation	Am	ount	Address	City	State	Postal Code	Date
David Owens	The Owens Law Firm, PLLC	Attorney	\$	250.00	721 W ABRAM ST	Arlington	TX	76013	01/05/2022
Michael Ritter	Schmoyer Reinhard LLP	Attorney	\$	311.84	14030 Floral Ridge Drive	San Antonio	TX	78247	01/08/2022
Robert Hernandez	Hernandez & BAggett	Attorney	\$	104.15	7312 Sugar Maple Drive	Irving	TX	75063	1/11/2022
Bwana Payeye Kizito	Bwana Foundation	President	\$	5.50	716 Wisteria Drive	Nevada	TX	75173	1/15/2022
Tara Wilson	HCA	RN	\$	26.27	5404 Boca Agua Drive, apt 110	Fort Worth	TX	76112	1/18/2022
Edith Rodriguez	City of Dallas	Council Assistant	\$	104.15	308 Anchorage Circle	Dallas	TX	75217	1/19/2022
Kristin Treager	Dallas County	Prosecutor	\$	104.15	9083 Corsair Place	Dallas	TX	75218	1/20/2022
Kathryn Demander	State National Companies	attorney	\$	50.00	1415 Eastus Drive	Dallas	TX	75208	1/27/2022
Elisa Coronado	unemployed	unemployed	\$	104.15	17746 Hickory Road	Raymondville	TX	78580	1/29/2022
Brandon Waddell	Michigan Dept. of Corrections	Attorney	\$	52.23	2021 Tulane Drive	Lansing	MI	48912	2/8/2022
Maria Villarreal	Best Life Insurance Houston	Insurance Agent	\$	500.00	12256 Beamer Road	Houston	TX	77089	1/31/2022

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

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

ТІ	ne Instruction Guide explains how to complete this form	1.	1 Total pages Sched	ule A2:
2 FILER NAM	sa WeV		3 Filer ID (Ethics Co	mmission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 2,500.	00
	6 Full name of contributor out-of-state PAC (ID#:	TX TSW	Check if travel outsi	
10 Fillicipal occ	Supation 7 300 title (FOR NON-30DICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor		Amount of Contribution \$	I. In-kind contribution   description
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIA	
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firn	of contributor's spou	se (if any) (FOR JUDICIAL)
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
	ATTACH ADDITIONAL COPIES OF T			r requirements

### PLEDGED CONTRIBUTIONS (JUDICIAL) SCHEDULE B(J) If the requested information is not applicable, DO NOT include this page in the report. 1 Total pages Schedule B(J): The Instruction Guide explains how to complete this form. 2 FILER NAME Filer ID (Ethics Commission Filers) TOTAL OF UNITEMIZED PLEDGES \$ 1,000.00 6 Full name of pledgor out-of-state PAC (ID#: 5 Date In-kind contribution Amount of Pledge \$ description GIP Belt Line Rd (edw Hill, TX 7514) Check if travel outside of Texas. Complete Schedule T. 10 Pledgor's principal occupation 11 Pledgor's job title OWNER 12 Pledgor's employer/law firm Snay Clear Car Wash 14 If pledgor is a child, law firm of parent(s) (if any) Full name of pledgor out-of-state PAC (ID#: Date Amount In-kind contribution of Pledge \$ description Pledgor address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. Pledgor's principal occupation Pledgor's job title Pledgor's employer/law firm Law firm of pledgor's spouse (if any) If pledgor is a child, law firm of parent(s) (if any) Full name of pledgor out-of-state PAC (ID#: Date Amount In-kind contribution of Pledge \$ description Pledgor address; City; Zip Code Check if travel outside of Texas. Complete Schedule T. Pledgor's principal occupation Pledgor's job title Pledgor's employer/law firm Law firm of pledgor's spouse (if any) If pledgor 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.

## LOANS (JUDICIAL)

## SCHEDULE E(J)

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

The I	Instruction Guide explains how to complete this	form.	1 Total pages Schedule E(J):
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Elissa Wev			3 Ther ID (Ethics Commission Filers)
4 TOTAL OF UN	IITEMIZED LOANS		\$ 1,500
5 Date of loan	7 Name of lender  uut-of-state PAC	(ID#:	9 Loan Amount (\$)
5-9-2021	Elissa Wev		\$1,500
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate N/A
YN	502 S Winnetka Ave. Dallas, 7	ΓX 75208	11 Maturity date N/A
12 Lender's Principal		13 Lender's Job Title	
Attorne		Assistant Distric	t Attorney
14 Lender's Employe Dallas	r/Law Firm  County District Attorney's Office	15 Law Firm of lender's spou	
	, law firm of parent(s) (if any)		
17 Description of Coll	latoral	140	
	atera	Check if persor account (See I	nal funds were deposited into political Instructions)
19 GUARANTOR INFORMATION	20 Name of guarantor		22 Amount Guaranteed (\$)
	21 Guarantor address; City;	State; Zip Code	_
X not applicable			
23 Guarantor's Princip	pal Occupation	24 Guarantor's Job Title	
25 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's s	spouse (if any)
27 If guarantor is a ch	nild, law firm of parent(s) (if any)		
			,
			,
If le	ATTACH ADDITIONAL COPIES O ender is out-of-state PAC, please see instructi	F THIS SCHEDULE AS NE	EDED rting 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 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

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	- I many t	Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
Total pages Schedule F1: 2 - See affuch	2 FILER NAME Elissa Wev		3 Filer ID (Ethics Commission Filers)
Date	5 Payee name		
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 Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	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
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
STATE OF THE STATE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin.	, TX, officeholder living expense

		Payee Info	Payee Info		Purpose of Expenditure	
Date	Payee Name	Amount	Address	Category	Description	
1/11/2022	Deinde Group	\$2,000.00	916 Nolte Dr. Dallas, TX 75208	Consulting Expense	Fee	
02/09/2022	Deinde Group	\$4,137.25	916 Nolte Dr. Dallas, TX 75208	Printing Expense	Mailer	

#### **OUTSTANDING LOANS** SCHEDULE L If the requested information is not applicable, DO NOT include this page in the report. 1 Total pages Schedule L: The Instruction Guide explains how to complete this form. 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; State; Zip Code Name of lender LENDER **INFORMATION** Lender address; City; State; **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