

# 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:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

MS Cheryl

LAST

Williams

SUFFIX

**OFFICE USE ONLY**

Date Received

FILED  
2026 JAN 5 PM 3:43  
JONATHAN  
COUNTY CLERK  
DALLAS COUNTY  
BY

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 380392 Durcenville TX 75138

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 702-1609

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

NICKNAME

MR COREY

LAST

MAPLES

SUFFIX

Receipt # Amount \$

Date Produced

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

909 St George PL De Soto TX 75115

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 837-0332

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

11 / 5 / 2025

THROUGH

Month

Day

Year

12 / 31 / 2025

11 ELECTION

ELECTION DATE

Month

Day

Year

03 / 03 / 2025

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

None

13 OFFICE SOUGHT (if known)

Judge Dallas County Court of Criminal App 2

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

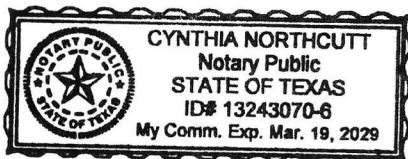
15 JC/OH NAME <i>Cheryl Williams</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,611 <sup>99</sup>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4727 <sup>38</sup>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2027 <sup>38</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2500 <sup>00</sup>

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.

*Cheryl Williams*  
Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by *Cheryl Williams* this the *15<sup>TH</sup>* day of *JANUARY*, 20 *26*, to certify which, witness my hand and seal of office.

*Cynthia Northcutt* *CYNTHIA NORTH CUTT* *Officer/Notary, II*  
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)

# 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:

4

2 FILER NAME

Cheryl Williams

3 Filer ID (Ethics Commission Filers)

4 Date

4/13/25

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Shirley Flinn

7 Amount of contribution (\$)

200.00

6 Contributor address; City; State; Zip Code

10101 Cliffwood Ct West Chester OH 45241-0526

8 Contributor's principal occupation

Retired

9 Contributor's job title

retired

10 Contributor's employer/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

4/13/25

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Erika Molete

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

418 Hageman Cedar Hill TX 75104

Contributor's principal occupation

CEO

Contributor's job title

CEO

Contributor's employer/law firm

Beyond the Ball

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

4/13/25

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Tracy Williams

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

1203 Fern ~~and~~ Glenn Trail Dallas TX 75241

Contributor's principal occupation

teacher

Contributor's job title

Teacher

Contributor's employer/law firm

DISD

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

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1 Total pages Schedule A(J)1: \_\_\_\_\_

2 FILER NAME

Cheryl Williams

3 Filer ID (Ethics Commission Filers) \_\_\_\_\_

4 Date

11/13/25

5 Full name of contributor

Randle Clay

out-of-state PAC ID#: \_\_\_\_\_

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

1603 Ferris Dr Titusville FL 32780

8 Contributor's principal occupation

Retired

9 Contributor's job title

retired

10 Contributor's employer/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

11/13/25

Full name of contributor

Willie Williams

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

2,500.00

Contributor address;

City;

State;

Zip Code

P.O. Box 7440 Huntsville TX 77342

Contributor's principal occupation

CEO

Contributor's job title

CEO

Contributor's employer/law firm

TRIPLE J LOGGING LLC

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

11/13/2025

Full name of contributor

Charles Maduka

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

1000.00

Contributor address;

City;

State;

Zip Code

2201 Main St. Ste 800 Dallas TX 75201

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Law Offices of Charles U. Maduka

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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1 Total pages Schedule A(J)1: \_\_\_\_\_

2 FILER NAME

Cheryl Williams

3 Filer ID (Ethics Commission Filers) \_\_\_\_\_

4 Date

11/13/25

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Linda Sorrells

7 Amount of contribution (\$)

~~250.00~~  
252.00 *ow*

6 Contributor address; City; State; Zip Code

6334 Elder Grove Dr Dallas TX 75232

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

Law Office of Linda G. Sorrells

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

*Be*

Date

11/13/25

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Loren Smith

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

712 Meadow Heath Ln Dallas TX 75232

Contributor's principal occupation

Program Manager

Contributor's job title

Program Manager

Contributor's employer/law firm

Dallas College

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

11/17/25

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Deborah Curney

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

7761 Royal Lane #B Dallas TX 75230

Contributor's principal occupation

CEO

Contributor's job title

CEO

Contributor's employer/law firm

D-Bodies INC

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: 1

2 FILER NAME

Cheryl Williams

3 Filer ID (Ethics Commission Filers)

4 Date

11/17/25

5 Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Leslie Patterson

7 Amount of contribution (\$)

50.00

6 Contributor address; City; State; Zip Code

5436 Brazier Dr Grand Prairie TX 75052

8 Contributor's principal occupation

Retired

9 Contributor's job title

Retired

10 Contributor's employer/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

11/21/25

Full name of contributor  out-of-state PAC ID#: \_\_\_\_\_

Jennifer Williams

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

208 Pinehurst St Decatur GA 30030

Contributor's principal occupation

Unemployed

Contributor's job title

Unemployed

Contributor's employer/law firm

Unemployed

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#: \_\_\_\_\_

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 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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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 A2: <b>2</b>	
2 FILER NAME <b>Cheryl Williams</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>11/13/2025</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sandra Bowie</b>	8 Amount of Contribution \$ <b>634.99</b>	9 In-kind contribution description <b>Campaign kitchen + photographer</b>
7 Contributor address; City; State; Zip Code <b>1321 Yardley Place DeSoto TX</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <b>Manager</b>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <b>CITY OF DALLAS</b>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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