FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065784 21 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Tonya NAME Date Received **ELECTRONICALLY FILED** 07/14/2018 NICKNAME LAST **SUFFIX** Parker CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 225031 MAILING Receipt # Amount **ADDRESS** Change of Address Dallas, TX 75222-5031 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Richard A. NAME NICKNAME LAST **SUFFIX** Dick Sayles **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 4400 Renaissance Tower **ADDRESS** (Residence or Business) Dallas, TX 75270 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 939-8701 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) Х PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2018 06/30/2018 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/06/2018 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

GO TO PAGE 2

District Judge District 116

District Judge District 116 Dallas

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 21

13 C / OH NAME	Parker, Tonya (The F	lonorable)		14 Filer ID 00065784	(Ethics Con	nmission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	l committees t iiceholder's kn notice of such						
Additional Pages COMMITTEE TYPE COMMITTEE NAME							
ш	GENERAL						
		COMMITTEE ADI	DRESS				
	SPECIFIC						
		COMMITTEE CAI	MPAIGN TREASURER NAME				
		COMMITTEE CAI	MPAIGN TREASURER ADDRES	SS			
16 CONTIBUTION TOTALS			NS OF \$50 OR LESS (OTHER T PANS), UNLESS ITEMIZED	ΓHAN PLEDGES,	\$	0.00	
		ICAL CONTRIBU		6)	\$	19,700.00	
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED					\$	0.00	
TOTALS	4. TOTAL POLIT	ICAL EXPENDIT	URES		\$	15,023.17	
					—	15,025.17	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	163,926.65	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00	
17 AFFADAVIT	•						
			I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	/ of perjury, that the a	accompanyinç d to be reporto	report is ed by me	
			The Hon	orable Tonya Park	ker		
			Signature of	Candidate or Officeh	nolder		
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subso	cribed before me, by the s	aid		, this the		day	
of	, 20, to co	ertify which, witness	s my hand and seal of office.				
Signature of office	eer administering oath	Printed name	e of officer administering oath	Title of office	cer administer	ing oath	

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 21
l -	ER NAN		19 Filer ID	(Ethics Commission Filers)
		onya (The Honorable)	00065784	_
l		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 19,700.00
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 CONTRIBUTION:	6	\$ 15,023.17
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	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	DNS	\$
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 50.00

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 1/4 Rpt: 4/21
2	FILER NAME Parker, Tony	/a (The Honorable)	3	Filer ID (Ethics Commission Filers) 00065784		
4 Date 01/12/2018 5 Full name of contributor out-of-state PAC (ID#:			7	Amount of Contribution (\$) \$1,500.00		
		Dallas, TX 75201				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm & Associates PC		11 Law firm of contributor's sp	ous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
01/12/2018 Cox, John "Trey" Contributor address; City; State; Zip Code						\$1,500.00
		Dallas, TX 75201				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm Cox & Hurst LLP		Law firm of contributor's sp	oous	se (If any)
		s a child, law firm of parent(s) (if	any)			
	ii contributor i	s a crilia, law litti of paretit(s) (ii	arry)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/13/2018	Cunningham Swaim LLP Contributor address; City; S				\$5,000.00
		Dallas, TX 75231				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL CO	ONTRIBUTIONS	S	SCHEDULE A(J)1
	The Instru	ction Guide explains how to	o complete this form	1.	1 Total pages Schedule A(J)1: Sch: 2/4 Rpt: 5/21
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Parker, Ton	/a (The Honorable)		00065784	
4	Date 5 Full name of contributor ut-of-state PAC (ID#:)				7 Amount of Contribution (\$)
	03/13/2018	Frank Branson PC			\$5,000.00
		6 Contributor address; City; State	; Zip Code		
		Dallas, TX 75205			
8	Contributor's	Principal Occupation	9	Contributor's Job Title	
10	Contributor's	employer/law firm	11	Law firm of contributor's sp	ouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any))		
H	Date	Full name of contributor	out-of-state PAC (ID#:	``	Amount of Contribution (\$)
	03/13/2018	Holmgren Johnson Mitchell M	•		\$1,000.00
	00/10/2010	Contributor address; City; State			41,000.00
	O - retaile steade	Dallas, TX 75240		O - maniferrate also Tale Title	
	Contributors	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/13/2018	Jansonius, John V	out 0. otato 1710 (15111		\$100.00
		Contributor address; City; State	; Zip Code		
		Dallas, TX 75209			
	Contributor's	Principal Occupation		Contributor's Job Title	
Attorney Attorney					
		employer/law firm		Law firm of contributor's sp	ouse (if any)
	Jackson & V				
	If contributor i	s a child, law firm of parent(s) (if any)			
\vdash					

	MONET	TARY POLITICAL CONTRIBUTI	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to complete this	form.	1	ages Schedule A(J)1 /4 Rpt: 6/21	L:
2	FILER NAME Parker, Tony	ya (The Honorable)		3 Filer ID 000657	(Ethics Commissi 784	on Filers)
4	Date 03/13/2018			7 Amount	t of Contribution (\$)	\$1,250.00
8	Contributor's f	Dallas, TX 75201 Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	 pouse (if any))	
12	: If contributor is	is a child, law firm of parent(s) (if any)				
	Date 03/13/2018	Full name of contributor out-of-state PAC (ID# Law Office of John Sherwood Contributor address; City; State; Zip Code	<i>t</i> :	Amount	t of Contribution (\$)	\$100.00
Dallas, TX 75201 Contributor's Principal Occupation Contributor's Job Title						
	Contributor's 6	employer/law firm	Law firm of contributor's sp	pouse (if any))	
	If contributor is	is a child, law firm of parent(s) (if any)				
	Date 03/08/2018	Full name of contributor out-of-state PAC (ID# Law Office of Joseph K Plumbar Contributor address; City; State; Zip Code Houston, TX 77002	t:)	Amount	t of Contribution (\$)	\$500.00
	Contributor's F	I Principal Occupation	Contributor's Job Title			
Contributor's employer/law firm Law firm of contributor's spouse (if any)						
	If contributor is	is a child, law firm of parent(s) (if any)				

MONET	ARY POLITICAL CONTRIBUT	ΓIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 4/4 Rpt: 7/21
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Parker, Tony	/a (The Honorable)		00065784
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/13/2018	Law Office of Julie Johnson PLLC		\$1,000.00
	6 Contributor address; City; State; Zip Code		
O Contributanta	Dallas, TX 75251	O Contribute de 1-la Tida	
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's 6	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	L	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/13/2018	Sommerman McCaffity & Quesada LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
O trib t - ul - 5	Dallas, TX 75219	Occasillation and Tale Title	
Contributors	Principal Occupation	Contributor's Job Title	
Contributor's 6	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/13/2018	Van Wey Law PLLC		\$250.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75230		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's 6	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	I	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica			emorials Expense		nting Expe laries/Wag		Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)	
	Credit Card Payment		The Instruct	tion Guide exp	olains how	to com	olete	e this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission File	rs)
	Sch: 1/12 Rpt: 8/21		Parker, Tonya (The H	onorable)					00065784		
4	Date	5	Payee name								
	06/06/2018		Amberjax								
6	Amount (\$)	7	Payee address; City	· 1	State; Zi	ip Code	è				
	\$161.31		3011 Gulden Ln								
		L	Dallas, TX 75212								
8	PURPOSE OF	(a)	Category (See Categories lis		this schedule	_{e)} (t) [Description			
	EXPENDITURE		Food/Beverage Exper	ise			F	Check if travel outsi Check if Austin, TX			
							S	그 Staff luncheon			
9	Complete ONLY if direct		Candidate/Officeholder na	me	Office	e sough	nt		Office he	eld	
	expenditure to benefit C/OI	H									
	Date		Payee name								
	06/13/2018		American Bar Associa								
	Amount (\$)		Payee address; City	;	State; Zi	ip Code	9				
	\$130.00		PO Box 4745								
			Carol Stream, IL 6019	7							
	PURPOSE OF	(a)	Category (See Categories lis	sted at the top of	this schedule	_{e)} (t) [Description	ide of Toyloo Com	inlata Cabadula T	
	EXPENDITURE		Fees				F	Check if travel outs Check if Austin, TX			
							N	 √lembership du	es		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder na	me	Office	e sough	nt		Office he	eld	
	experientare to benefit G/OI	_									
	Date		Payee name								
	02/28/2018		Brady & Peavey								
	Amount (\$)		Payee address; City	i	State; Zi	ip Code	9				
	\$1,000.00		PO Box 13132								
			: =\/ =0=44								
			Austin, TX 78711			1					
	PURPOSE OF	(a)	Category (See Categories lis	sted at the top of	this schedule	e) (b) [Description Check if travel outsi	ide of Texas. Com	inlete Schedule T	
	EXPENDITURE		Fees				F	Check if Austin, TX		•	
							F	Retainer fees fo	ır legal servi	ces	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder na	me	Office	e sough	nt		Office he	eld	
	experiulture to beliefft C/OI	1									

SCHEDULE F1

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 2/12 Rpt: 9/21	Parker, Tonya (The Honorable) 00065784						
4	Date	5 Payee name						
	01/29/2018	Costco Wholesale Store 1266						
6	Amount (\$) \$211.29	7 Payee address; City; State; Zip Code 8055 Churchill Way						
_		Dallas, TX 75251						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Snacks and supplies for jury room						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	05/14/2018	Dallas Bar Foundation						
	Amount (\$) \$130.00	Payee address; City; State; Zip Code 2101 Ross Ave Dallas, TX 75201						
	DUDDOCE							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertisement in Bar None XXXIII program						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	03/18/2018	Dallas County Democratic Party						
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 4209 Parry Ave						
		Dallas, TX 75223						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertisement in Senate District 9 Convention program						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

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 Gard F dyment	The Instruction Guide explains how to complete this fo	form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/12 Rpt: 10/21	Parker, Tonya (The Honorable)	00065784
4	Date	5 Payee name	
	03/18/2018	Dallas County Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	4209 Parry Ave	
		Dallas, TX 75223	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	•
	OF EXPENDITURE	Advertising Expense	eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense
		I — I — I — I	rtisement in Senate District 2 Convention
		progra	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	н	
_	Date	Payee name	
	03/18/2018	Dallas County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.00	4209 Parry Ave	
	!		
		Dallas, TX 75223	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	•
	EXPENDITURE	Navertising Expense	eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense
		,	rtisement in Senate District 8 Convention
		progra	am
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	4	
	Date	Payee name	
	05/31/2018	Dallas County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	4209 Parry Ave	
		Dallas, TX 75223	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	ption
	OF EXPENDITURE	Advertising Expense	eck if travel outside of Texas. Complete Schedule T.
		·	eck if Austin, TX, officeholder living expense rtising sponsorship of Annual Johnson Jordan
		Adverti	• .
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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 (enter a category not listed above)

	Candidate/Officeholder/Politica		mmittee	Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed above	e)
	Credit Card Payment			The Instruction G	uide explains	how to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ē					3	Filer ID	(Ethics Commission	Filers)
	Sch: 4/12 Rpt: 11/21		Parker, Ton	ya (The Honora	able)					00065784		
4	Date	5	Payee name									
	02/28/2018		Dallas Hispa	anic Law Found	lation							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$250.00		2250 Lakes	ide Blvd 5th Flo	or							
			Richardson,	, TX 75082								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising					Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE							—		officeholder living		
								luncheon	por	isorsnip ot a	annual Amanecer	
_		L										
9	Complete ONLY if direct expenditure to benefit C/Ol		Jandidate/Offic	ceholder name	C	Office sou	gnt			Office h	ela	
_		_										
	Date		Payee name									
	02/28/2018		Dallas Wom	en's Foundatio	n							
	Amount (\$)		Payee addres		State;	; Zip Co	de					
	\$350.00		8150 N Cen	itral Expy								
			Dallas, TX 7	75206								
	PURPOSE OF	(a)	Category (Se	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Event Exper	nse				<u></u>		de of Texas. Com officeholder living	plete Schedule T.	
								—			& Awards dinner	
										•		
	Complete ONLY if direct		 Candidate/Offi	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
	Date		Payee name									
	02/05/2018		Democracy	Toolbox								
	Amount (\$)		Payee addres		State;	; Zip Co	de					
	\$6,750.00		8813 Falcor	-	·	•						
			McKinney, 1	ΓX 75070								
	PURPOSE	(a)		ee Categories listed at	the ten of this eah	a dula)	(b)	Description				
	OF	(")	Consulting E		the top of this sch	ledule)	(~)		outsi	de of Texas. Com	nplete Schedule T.	
	EXPENDITURE									officeholder living		
								Campaign ma			ndraising and	
								Communicalic	<i>-</i> 113			
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Office	ceholder name	C	Office sou	ght			Office h	eld	
	poa.taro to borioni 0/01	•										

SCHEDULE F1

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/12 Rpt: 12/21	Parker, Tonya (The Honorable) 00065784
4	Date	5 Payee name
	04/09/2018	Ellen's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.64	1790 N Record St
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Court staff luncheon
		Court stail full circuit
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	06/06/2018	FedEx Office
H	Amount (\$)	Payee address; City; State; Zip Code
	\$32.37	902 Ross Ave
		Dallas, TX 75202
	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.
		Check if Austin, TX, officeholder living expense Photocopies for mentor event with women attorneys
		Thotocopies for mentor event with women attorneys
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/29/2018	JL Turner Legal Association
H	Amount (\$)	Payee address; City; State; Zip Code
	\$519.00	2101 Ross Ave
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Advertising sponsorship of Bedford Luncheon
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/12 Rpt: 13/21	Parker, Tonya (The Honorable) 00065784
4	Date	5 Payee name
	05/15/2018	Kroger
6	Amount (\$) \$165.14	7 Payee address; City; State; Zip Code 10677 E NW Hwy
		Dallas, TX 75218
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Snacks and supplies for jury room
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/12/2018	Lambda Upsilon Sigma Chapter of Sigma Gamma Rho Sorority Inc
	Amount (\$) \$150.00	Payee address; City; State; Zip Code 5760 Legacy Drive Ste B3-374 Plano, TX 75024
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event program advertisement
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/15/2018	NAACP Irving-Carrollton Branch
	Amount (\$) \$75.00	Payee address; City; State; Zip Code PO Box 166253
		Irving, TX 75016
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Half page ad in Spaghetti Luncheon program
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 14/21	Parker, Tonya (The Honorable) 00065784
4	Date	5 Payee name
	01/08/2018	National Association of Women Lawyers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	321 N Clark St MS 17.1
		Chicago, IL 60654
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising sponsorship of NAWL Conference
		Advertising Sponsorship of WWL Contention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
\vdash	Date	Davies same
		Payee name National Association of Woman Lawyers
	01/30/2018	National Association of Women Lawyers
	Amount (\$)	Payee address; City; State; Zip Code
	\$130.00	321 N Clark St MS 17.1
		Chicago, IL 60654
	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
		Annual membership dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		
	Date	Payee name
	03/13/2018	North Dallas Texas Democratic Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	17201 Hidden Glen Dr
		Dallas, TX 75248
	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.
	-	Club membership dues
		Ciub membership ddes
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/12 Rpt: 15/21	Parker, Tonya (The Honorable)	00065784
4	Date	5 Payee name	
	06/25/2018	Office Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$147.15	2929 Oak Lawn Ave	
		Dallas, TX 75219	
8	PURPOSE OF	l ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Anti-fatigue mat for court coordinator
			J
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	4	
	Date	Payee name	
	06/30/2018	PayPal Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.60	2211 North First Street	
		San Jose, CA 95131	
	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.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
			Transaction fees for online donations
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	
	Date	Payee name	
	02/08/2018	Preston Hollow Democrats	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.00	Po Box 59062	
	400.00		
		Dallas, TX 75229	
	PURPOSE	(1) -	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Fees	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Club membership dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Officebolder/Do Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 9/12 Rpt: 16/21	Parker, Tonya (The Honorable) 00065784
4	Date	5 Payee name
	03/18/2018	Redmond, Nigel
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 1910 Pacific Ave Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense Advertisement in Senate District 23 Convention program
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/18/2018	Senate District 16 Democratic Convention
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	17201 Hidden Glen Drive
		Dallas, TX 75248
	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
		Program ad in SD16 convention program
		1 Togram au in 3D10 convention program
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2018	South Dallas Business & Professional Women's Club Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$195.00	PO Box 764587
	Φ195.00	FO BOX 104301
		Dallas, TX 75376
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Full page ad and ticket to SDBPW annual event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide 6	Salaries/V	Vages	/Contract Labor		OTHER (enter a	category not listed above)	1
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission	Filers)
	Sch: 10/12 Rpt: 17/21	l	– nya (The Honorable)					00065784	()))	,
4	Date	5 Payee name	<u> </u>				<u> </u>			
	02/05/2018	l	Methodist Black Law	Student Associa	atior	า				
6	Amount (\$) \$100.00	7 Payee addre PO Box 75 Dallas, TX	0436	State; Zip Co	ode					
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising		or this scriedule)	,	Check if travel	, TX	officeholder living	plete Schedule T. g expense Black History Mon	th
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office he	eld	
	Date	Payee name	 e							
	02/28/2018	Southern N	Methodist University [Dedman School	of L	_aw				
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$500.00	PO Box 75	0116							
		Dallas, TX	75275							
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising		,		Check if travel			plete Schedule T.	
	EXPENDITORE					ш		officeholder living		
						Advertising splitting spli			31st Anniversary	
						Distiliguished		ullili Await		
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office he	eld	
	Date	Payee name)							
	02/28/2018	Southern N	Methodist University \	Women/LGBT C	Cent	er				
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$85.00	PO Box 75	0172							
		Dallas, TX	75275							
	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE					ш		officeholder living	•	
						Ticket for Wo	me	en's Sympos	ium Dinner	
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht (Office he	eld	
	expenditure to benefit C/OI			200 000	J			S00 III		
_										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 11/12 Rpt: 18/21	Parker, Tonya (The Honorable) 00065784	
4	Date	5 Payee name	
	02/28/2018	Sparkletts & Sierra Springs	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	PO Box 660579	
		Dallas, TX 75226	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Water for jury room and court offices	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OH		
	Date	Payee name	
	05/14/2018	State Bar of Texas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$315.00	PO Box 12030	
		Austin, TX 78711	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Bar dues and section fees	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
-	Date	Payee name	_
	05/08/2018	Stonewall Democrats of Dallas	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$120.00	PO Box 192305	
	¥==3.00		
		Dallas, TX 75219	
	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.	
	ZXI ZXIDITORE	Club mombarship duos	
		Club membership dues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 12/12 Rpt: 19/21	Parker, Tonya (The Honorable) 00065784	
4	Date	5 Payee name	_
	06/29/2018	The American Law Institute	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$125.00	4025 Chestnut St	
		Philadelphia, PA 19104	
8	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	
		Membership dues	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	05/14/2018	The William Mac Taylor Inn of Court c/o Nicole LeBoeuf	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.00	325 N St Paul Ste 3400	
		Dallas, TX 75201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Fee for joint Inns of Court dinner	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	
	05/22/2018	Varidesk	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$487.67	PO Box 3588	
		Coppell, TX 75019	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Purchase of standing desk for court coordinator	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	7	

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 20/21 2 FILER NAME Filer ID (Ethics Commission Filers) Parker, Tonya (The Honorable) 00065784 8 Amount (\$) Date 5 Name of person from whom amount is received 06/01/2018 \$50.00 Dallas Bar Association Community Service Fund 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75201 Purpose for which amount is received Check if political contribution returned to filer Credit - refund of overpayment for DBA Inaugural Ball event

ASSETS VALUED AT \$500 OR MORE			SCHI	EDULE	Λ
The Instruction Guide explains how to complete this form.	1		s Schedule M: Rpt: 21/21		_
FILER NAME Parker, Tonya (The Honorable)		Filer 0657	(Ethics Commiss	sion Filers)	
Description of Asset Ergonomic chairs for chambers, bench and court staff originally valued at \$1,601.02					
Description of Asset Judicial portrait for courtroom originally valued at \$600.00					_
Description of Asset Court chambers furniture originally valued at \$728.52					