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) 00084124 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Dana D. NAME Date Received **ELECTRONICALLY FILED** 08/15/2023 NICKNAME LAST **SUFFIX** Huffman CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 1901 N. Central Expressway MAILING Amount Receipt # **ADDRESS** Suite 200 Change of Address Richardson, TX 75080 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Penny NAME NICKNAME LAST **SUFFIX** Robe **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 1901 N. Central Expressway **ADDRESS** Suite 200 (Residence or Business) Richardson, TX 75080 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 998-0679 **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 modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE None

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Huffman, Dana D. (N	(Ethics Commissi	on Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. consent. Candidates an	eholder's knowled	lge or				
Additional Pages	COMMITTEE TYPE COMMITTEE NAME						
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS							
	2. TOTAL POLIT (OTHER THAN	\$	0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00				
	4. TOTAL POLITICAL EXPENDITURES						
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	\$	5,600.78				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	\$	0.00				
17 AFFIDAVIT							
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Ms. I	Dana D. Huffman				
		Signature of	Candidate or Officehol	lder			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
		aid	, this the	da	у		
of	, 20, to c	ertify which, witness my hand and seal of office.					
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oa	ath		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

	3 of 4								
l	ER NAN ffman,	(Ethics Commission Filers)							
I	HEDULI ME OF	SUBTOTAL AMOUNT							
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$					
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:	S	\$ 866.00					
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
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	ONS	\$					
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			By - Gift/Awards/Memorials Expense P.					Polling Expense Printing Expense Salaries/Wages/Contract Labor ow to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1: Sch: 1/1 Rpt: 4/4	2	FILER NAM Huffman, D		Ms.)					3	Filer ID 00084124	(Ethics Co	ommission Filers)		
	Date 01/10/2023	5	Payee name		/										
6	Amount (\$) \$866.00	7	Payee addre 203 S Beltl Irving, TX	ine RD	City;	State;	; Zip Co	ode							
8	PURPOSE OF EXPENDITURE	(a)	Category (s Advertising			top of this sch	iedule)		_	avel outsi	de of Texas. Co officeholder livir		е Т.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ficeholder	name	(Office sou	ght			Office h	ield			