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) 00085325 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Debra E. NAME Date Received **ELECTRONICALLY FILED** 07/02/2024 NICKNAME LAST **SUFFIX** Debby Gunter CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Dawn NAME NICKNAME LAST **SUFFIX** Franks **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (903) 617-6331 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 06/30/2024 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 District Judge District 241 Smith

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 8

13 C / OH NAME	Gunter, Debra E. (Th	e Honorable)	14 Filer ID 00085325	(Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or					
Additional Pages	COMMITTEE TYPE COMMITTEE NAME								
	GENERAL								
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
46 CONTRIBUTION	1 TOTAL INITEM	ZED DOUTION CONTRIBUTIONS/OTHER THAN	N.D.EDOES LOANS						
16 CONTRIBUTION TOTALS	OR GUARANTE	ZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00					
	2. TOTAL POLIT	\$ 0.00							
EXPENDITURE	` `	PLEDGES, LOANS, OR GUARANTEES OF LOAN ZED POLITICAL EXPENDITURES	3)	\$ 0.00					
TOTALS	4. TOTAL POLIT	9.00							
	101AL POLII	ICAL EXPENDITURES		\$ 1,065.70					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 14,774.02					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 7,500.00					
17 AFFIDAVIT									
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.							
		The Hono	orable Debra E. Gunt	er					
		Signature o	f Candidate or Officeho	lder					
AFFIX NOT	TARY STAMP / SEAL AB	OVE							
Sworn to and subsc	ribed before me, by the s	aid	, this the	day					
of	, 20, to ce	ertify which, witness my hand and seal of office.							
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	r administering oath					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 8								
18 FILER NA Gunter, D	ME Debra E. (The Honorable)	19 Filer ID 00085325	(Ethics Commission Filers)								
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE										
1.	1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)										
2.	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 CONTRIBUTIONS	S	\$ 1,065.70								
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 I 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		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	xpense		pense ages/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:	2 FILER N	IAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 1/5 Rpt: 4/8	Gunter	, Debra E. (The Honor	rable)				00085325		
4	Date	5 Payee r	name							
	01/08/2024	,	ell & Wansley							
6	Amount (\$)	7 Payee <i>a</i>		State:	Zip Cod	de				
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	+200.00									
		Tyler, 1	TX 75702							
8	PURPOSE		y (See Categories listed at the	top of this sche	edule)	(b) Description				
	OF EXPENDITURE	Consul	ting Expense			<u> </u>		side of Texas. Com		
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						- Janaan Ing	Juii	.paigii Maila	90/110/110	
9	Complete ONLY if direct	Candidate	e/Officeholder name		Office soug	ıht		Office he	eld	
	expenditure to benefit C/OI		o, c.noonoidor namo		oo oou	····				
	Date	Payee r								
L	01/25/2024	Cardwe	ell & Wansley							
	Amount (\$)	Payee a	nddress; City;	State;	Zip Cod	de				
	\$250.00	314 So	uth Broadway							
		Tyler, 1	TX 75702							
	PURPOSE	(a) Categor	y (See Categories listed at the	top of this sche	edule)	(b) Description				
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_	Complete ONLY if direct	Candidate	e/Officeholder name		Office soud	ıht		Office he	əld	
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			ansisco, CA 94107		-					
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	Complete ONLY if direct	Candidat	e/Officeholder name	C	Office soug	jht		Office he	eld	
	expenditure to benefit C/O	4								

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	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: 2/5 Rpt: 5/8	Gunter, Debra E. (The Honorable) 00085325
4	Date	5 Payee name
	02/14/2024	Digital Skyrocket
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.00	121 S Broadway Ave.
		#776
		Tyler, TX 75702
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 Website Management
		Website Management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/08/2024	Digital Skyrocket
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.00	121 S Broadway Ave.
		#776
		Tyler, TX 75702
	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 Website Management
		Website Management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/08/2024	Digital Skyrocket
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.00	121 S Broadway Ave.
		#776
		Tyler, TX 75702
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Website Management
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	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: 3/5 Rpt: 6/8	Gunter, Debra E. (The Honorable) 00085325
4	Date	5 Payee name
	05/08/2024	Digital Skyrocket
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.00	121 S Broadway Ave.
		#776
		Tyler, TX 75702
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 Website Management
		Website Management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-1
	Date	Payee name
	06/10/2024	Digital Skyrocket
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.00	121 S Broadway Ave.
		#776
		Tyler, TX 75702
	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
		Website Management
		Wessite management
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/01/2024	Smith County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 8175
		Tyler, TX 75711
	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.
		Cookie Auction
		Cooke / Wellon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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/Award/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nbursement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal S	ards/Memorials Expervices struction Guide			ages	/Contract Labor		Travel Out of D OTHER (enter	vistrict a category not listed	above)
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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		mmittee	Gift/Awards/ Legal Servic	age Expense Memorials Expense les uction Guide expla	Printino Salarie		e Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers	;)
Ļ	Sch: 5/5 Rpt: 8/8	_			he Honorable)					00085325		
4	Date 05/31/2024	5	Payee nam		vice Charge							
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8	PURPOSE OF	(a)		(See Categories	s listed at the top of thi	s schedule)	(b)	Description				
	EXPENDITURE		Fees					<u> </u>		ide of Texas. Com , officeholder living		
								П Bank Fee				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/O	fficeholder r	name	Office s	ought			Office he	ıld	