CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

		Remember To Att Nee	ach Any Part Of ded To Report A				ort Form	
	Signature of offic	er administering oath	Printed name of of	ficer administe	ering oath	ז ו ד	itle of officer adminis	stering oath
	of	, 20, to cert	ify which, witness my h	nand and seal	of office.			
		ribed before me, by the said					ie	day
	AFFIX NOTARY ST	AMP / SEAL ABOVE						
					Signatur	e of Candidate	or Officeholder	
						MarQuetta C	layton	
					irm, that a	any error or om	hission in the report a	
			X	report not lat	er than th	ne 14th busines	accurate or incomplet	I learned
			X				ed in the report. that I am filing this c	orrected
				was made in	good fai	th and without a	affirm that the origina an intent to mislead	
			Che	ck the box nex	kt to any a	and all applicat	ble statements:	
			and	correct.				
7	AFFIDAVIT			ear or affirm	under ne	nalty of periury	, that this corrected ı	report is true
		is inadvertently entered as a						
	in the 30-day report. updated beginning ba	A corrected report has bee alance of \$6,712.41 as deta	n submitted to explain iled in the corrected 30	the discrepand)-day report. V	cy in that Nhile upc	report. This re lating the corre	eport is being correct ct balance, I noticed	ed to reflect the the aggregate
6	EXPLANATION OF C	CORRECTION corrected to update the tota	l remaining amount fro	om \$3.087.87	to \$2.437	7.87. There is a	a \$650 discrenancy t	hat was identified
	COVERED	09/27/2024	THROUGH	10/26/	/2024			
5	ORIGINAL PERIOD	Month Day Yea		,	Day	Year	Date Imaged	
		30th day before election	15th day after camp appointment (officel Final Report (Attach	holder only)			Date Processed	1
	REPORT TYPE	July 15	Exceeded modified				Receipt #	Amount
4		January 15	Runoff		Other (sp	ecify)	Date Hand-delivered or D	Pate Postmarked
		NICKNAME MarQ	LAST Clayton			SUFFIX		
	OFFICEHOLDER NAME		MarQuetta				10/29/2024	
3	CANDIDATE /	MS / MRS / MR	FIRST			MI	ELECTRONICAL	LY FILED
-	00088003		2 Total pages med. 17				OFFICE US	
1	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:					

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to con	plete this form.	1 Filer ID (Ethics Commis 00088003		2 Total pages fil	ed: 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MarQuetta		MI	OFFICE U	JSE ONLY
NAME	NICKNAME	LAST		SUFFIX	Date Received ELECTRONICA 10/29/2024	ALLY FILED
	MarQ	Clayton		SUFFIX	10,20,2021	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; AP 5555 Bridge St. Suite 102	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Receipt #	r Date Postmarked Amount
Change of Address	Fort Worth, TX 76112				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST JacQuetta			MI	
	NICKNAME	LAST Clayton			SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO P 5555 Bridge St. Suite 102 Fort Worth, TX 76112	O BOX PLEASE);	APT	T / SUITE #; CITY;	STA	ATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHC (682) 240-2812	DNE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15 July 15	30th day before		Runoff Exceeded modified reporting limit	15th day after car appointment (offic Final Report (Atta	ceholder only)
9 PERIOD COVERED	Month Day Year 09/27/2024	Tł	IROUGH	Month Day 10/26/202	Year 24	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		Primary General	ELECTION TYPE	Other	
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT Criminal District	(if known) Court Judge, Tar	rant Co. Place 2
		GO 1	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	6	Versi	on V4.1.0.48da51f7

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 3 of 17

L

13 C / OH NAME	Clayton, MarQuetta		14 Filer ID 00088003	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 2,404.57
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	2)	\$ 9,100.93
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES	5)	\$ 283.78
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 24,130.47
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 2,437.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
			rQuetta Clayton	
		Signature of	Candidate or Officeho	bider
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f

EORM JC/OH ET PG 3 / of 17

FORM	•
COVER SHE	E

				4 01 17
18 FILER NAME Clayton, Ma		19 Filer ID 00088003	(Ethics Comr	mission Filers)
20 SCHEDULE NAME OF S			SUBTO	TAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	9,100.93
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	\$	13,375.47
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. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	10,755.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	
			-	

SUBTOTALS - JC/OH

The Instruction Guide explains how	1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 5/17		
2 FILER NAME Clayton, MarQuetta	3 Filer ID (Ethics Commission Filers) 00088003		
4 Date 5 Full name of contributor 10/01/2024 Bowie, Dantae			
6 Contributor address; City; Sta Spencer, OK 73084	ate, zip code		
8 Contributor's Principal Occupation	9 Contributor's Job Title		
Servicemember	Servicemember		
10 Contributor's employer/law firm DOD	11 Law firm of contributor's	spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if an	ny)		
Date Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024 Clayton, La Rissa		\$496.34	
Contributor address; City; Sta			
Accokeek, MD 20607-372			
Contributor's Principal Occupation	Contributor's Job Title		
Analyst	Analyst		
Contributor's employer/law firm FRDA	Law firm of contributor's	spouse (if any)	
If contributor is a child, law firm of parent(s) (if a	ny)		
Date Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024 Clayton, Mark		\$250.00	
Contributor address; City; Sta	ate; Zip Code		
Fort Worth, TX 76118			
Contributor's Principal Occupation	Contributor's Job Title		
retired	retired		
Contributor's employer/law firm	Law firm of contributor's	spouse (if any)	
self			
If contributor is a child, law firm of parent(s) (if a	ny)		
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us	Version V4.1.0.48da51f7	

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 6/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Clayton, MarQuetta			00088003
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/16/2024	Colston, Sean		\$248.17
	6 Contributor address; City; State; Zip Code		
	FORT WORTH, TX 76117		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	•
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Colston Law	PLLC		
12 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 (\$)
09/29/2024	Coward, Nicholas		\$297.81
	Contributor address; City; State; Zip Code		
	Grand Prairie, TX 75052		
Contributor's I	Principal Occupation	Contributor's Job Title	
Lawyer		Lawyer	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Shamieh Lav			
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 (\$)
09/29/2024	Edmonds, Bobbie		\$160.00
	Contributor address; City; State; Zip Code		
	5. (W/ H, T) 70100		
	Fort Worth, TX 76102		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firm Bobbie Edmonds Law Offices		Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 7/17	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Clayton, MarQuetta			00088003
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/01/2024	Evans Sr., Michael		\$248.17
	6 Contributor address; City; State; Zip Code		
0 Operatorila esta esta esta esta esta esta esta est	Mansfield, TX 76063	• Occurritoritoritor lasta Titla	
	Principal Occupation	9 Contributor's Job Title Clergy	
Clergy 10 Contributor's e	pmplovor/low firm	11 Law firm of contributor's sp	
Bethlehem E			
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/29/2024	Fuller, Stephanie	/	\$1,500.00
	Contributor address; City; State; Zip Code		
	New York, NY 10538		
Contributor's F	Principal Occupation	Contributor's Job Title	
Nurse Practi	oner	Nurse Practioner	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
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 (\$)
10/01/2024	Garcia, Rudy		\$148.90
	Contributor address; City; State; Zip Code		
	Euless, TX 76039		
Contributor's F	Principal Occupation	Contributor's Job Title	
Technology		Technology	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Would rather not say			
If contributor is	s a child, law firm of parent(s) (if any)		
Forme provided	hy Texas Ethics Commission www.ethic	rs state ty us	Version VA 1 0 48da51f7

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 8/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Clayton, Mar	Quetta		00088003
4 Date 10/16/2024	5 Full name of contributor Dout-of-state PAC (ID# Heiskell, Michael	:)	7 Amount of Contribution (\$) \$496.34
	6 Contributor address; City; State; Zip Code		
	Fort Worth, TX 76112		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e Self	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12 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 (\$)
09/30/2024	House, Tess	/	\$250.00
	Contributor address; City; State; Zip Code		-
	San Antonio, TX 78216	•	
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Tess House	employer/law firm	Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
10/01/2024	Joseph, Wade		\$476.45
	Contributor address; City; State; Zip Code		
	Kenner, LA 70065		
Contributor's	Principal Occupation	Contributor's Job Title	
Contractor		Contractor	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
Jei solutions			
If contributor is	s a child, law firm of parent(s) (if any)		
-orms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.48da511

The Instru	ction Guide explains how to complete this t	1 Total pages Schedule A(J)1: Sch: 5/6 Rpt: 9/17				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Clayton, Ma	rQuetta	00088003				
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)			
10/01/2024	Peaco, Bridget		\$496.34			
	6 Contributor address; City; State; Zip Code					
	Fort Worth, TX 76131					
	Principal Occupation	9 Contributor's Job Title				
NA		NA				
	employer/law firm	11 Law firm of contributor's sp	bouse (if any)			
NA						
12 If contributor i	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
09/30/2024	Sanders, Kenneth		\$347.45			
	Contributor address; City; State; Zip Code					
	Arlington, TX 76002					
	Principal Occupation	Contributor's Job Title				
Judge		Judge				
	employer/law firm	Law firm of contributor's sp	bouse (if any)			
Tarrant Cou	-					
If contributor i	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)			
10/02/2024	Simmons, Alisa		\$248.17			
	Contributor address; City; State; Zip Code					
	Adjuster TV 70010					
O a staile standa	Arlington, TX 76016	Operate/basterile_lash_Title				
Elected Offic	Principal Occupation	Contributor's Job Title Elected Official				
		-	20USO (if am)			
Contributor's employer/law firm Tarrant County		Law firm of contributor's sp	Jouse (ii any)			
	s a child, law firm of parent(s) (if any)					
	s a child, law little of parent(s) (if any)					
l Farma nravidad	by Taxas Ethics Commission www.ethic	e etato ty us	Version V/A 1 0 A8da51f7			

The Instru	ction Guide explains how to comple	1 Total pages Schedule A(J)1: Sch: 6/6 Rpt: 10/17				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Clayton, Ma	rQuetta	00088003				
4 Date	5 Full name of contributor out-of-state	9 PAC (ID#:)	7 Amount of Contribution (\$)			
09/30/2024	Smith, Jason		\$238.07			
	6 Contributor address; City; State; Zip Code					
	Fort Worth, TX 76104					
8 Contributor's	Principal Occupation	9 Contributor's Job Title				
Attorney		Attorney				
10 Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)			
Law Offices	of Jason Smith					
12 If contributor i	is a child, law firm of parent(s) (if any)	·				
Date	Full name of contributor out-of-state	9 PAC (ID#:)	Amount of Contribution (\$)			
10/16/2024	Wine, James		\$297.81			
	Contributor address; City; State; Zip Code					
	Arlington, TX 76005					
Contributor's	Principal Occupation	Contributor's Job Title				
Operations I		Operations Leader	Operations Leader			
	employer/law firm		Law firm of contributor's spouse (if any)			
Lockheed M						
If contributor i	is a child, law firm of parent(s) (if any)					

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Event E: Accounting/Banking Fees Consulting Expense Food/Be Contributions/ Donations Made By - Gift/Awe Candidate/Officeholder/Political Committee Legal Se Credit Card Payment Expense	xpense Loan Offici verage Expense Pollir rds/Memorials Expense Printi	Repayment/Reinbursement Overhead/Rental Expense g Expense ig Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F1: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 1/5 Rpt: 11/17 Clayton, MarQuet	ta		00088003		
4 Date 5 Payee name					
10/16/2024 Aume Motion Arts	i				
6 Amount (\$) 7 Payee address;	City; State; Zip	Code			
\$200.00 816 W. Colony Di					
Arlington, TX 760	01				
8 PURPOSE (a) Category (See Category	pries listed at the top of this schedule)	(b) Description			
OF Advertising Exper		Check if travel	outside of Texas. Complete Schedule T.		
EXPENDITORE			n, TX, officeholder living expense		
		Campaign vie	deo		
9 Complete <u>ONLY</u> if direct Candidate/Officehold expenditure to benefit C/OH	er name Office	sought	Office held		
Date Payee name					
10/16/2024 Aume Motion Arts					
Amount (\$) Payee address;	City; State; Zip	Code			
\$200.00 816 W. Colony Dr					
	•				
Arlington, TX 760	01				
PURPOSE (a) Category (See Categ	pries listed at the top of this schedule)	(b) Description			
OF Advertising Exper	ise		outside of Texas. Complete Schedule T.		
			n, TX, officeholder living expense		
		Campaign vie	deo		
	0.17				
Complete <u>ONLY</u> if direct Candidate/Officehold expenditure to benefit C/OH	er name Office	sought	Office held		
Date Payee name 10/04/2024 Bankem Printing					
Amount (\$) Payee address;	City; State; Zip	Code			
\$450.00 2357 S. Collins S	•				
Arlington, TX 760	14				
PURPOSE (a) Category (See Categ	pries listed at the top of this schedule)	(b) Description			
OF Printing Expense			outside of Texas. Complete Schedule T.		
			n, TX, officeholder living expense		
		Printing flyers	5		
Complete <u>ONLY</u> if direct Candidate/Officehold expenditure to benefit C/OH	er name Office	sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

			EXPENDITURE (CATEGORIES	FOR B	OX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			d/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:				•		3 Filer ID	(Ethics Commission Filers)	
1	Sch: 2/5 Rpt: 12/17		n, MarQuetta				00088003		
4	Date	5 Payee	name				•		
	10/16/2024		em Printing						
6	Amount (\$) \$350.00		address; City; S. Collins St. ton, TX 76014	State; Zi	o Code				
8	PURPOSE	(a) Catego	Ory (See Categories listed at the to	on of this schedule	(b)	Description			
	OF EXPENDITURE		ng Expense	ip of this schedule		Check if travel of	outside of Texas. Comp , TX, officeholder living 5		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		te/Officeholder name	Office	e sought		Office he	ld	
	Date	Payee	name						
	09/30/2024	FACE	воок						
	Amount (\$)	Pavee	address; City;	State; Zi	o Code				
	\$7.69	1 Hac	ker Way Park, CA 94025						
	DUDDOOF		-		<i>a</i> ->				
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at the to tising Expense	op of this schedule) (D)		outside of Texas. Comp , TX, officeholder living XPENSE		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		te/Officeholder name	Office	e sought		Office he	ld	
	Date	Payee	name						
	10/23/2024	-	BOOK						
	Amount (\$) \$213.00	-	address; City; ker Way	State; Zi	o Code				
		Menlo	Park, CA 94025						
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at the to tising Expense	op of this schedule) (b)		outside of Texas. Comp , TX, officeholder living X PENSE		
	Complete ONLY if direct expenditure to benefit C/OF		te/Officeholder name	Office	e sought		Office he	ld	

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C			Gift/Awar	erage Expense ds/Memorials Expense	Office Ove Polling Ex Printing E	erhead (pense (xpens			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 Ins	truction Guide explain	s how to co	omple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 3/5 Rpt: 13/17		Clayton, MarQuett	a					00088003		
4	Date	5	Payee name								
	10/15/2024		FACEBOOK								
6	Amount (\$)	7	Payee address;	City; Stat	e; Zip Co	ode					
	\$175.00		1 Hacker Way								
			Menlo Park, CA 94	025							
8	PURPOSE	(a)		ries listed at the top of this s		(b)	Description				
-	OF		Advertising Expen		chequie)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE						Check if Austin	, TX,	officeholder living	g expense	
							Advertising E	Expe	ense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholde	r name	Office sou	ight			Office h	eld	
	Date		Payee name								
	09/30/2024		FACEBOOK								
	Amount (\$)		Payee address;	City; Stat	e; Zip Co	ode					
	\$175.00		1 Hacker Way		-, 1						
	+=:0:00										
			Menlo Park, CA 94	025							
	PURPOSE OF	(a)	Category (See Catego	ries listed at the top of this so	chedule)	(b)	Description				
	EXPENDITURE		Advertising Expen	se					de of Texas. Com officeholder living	plete Schedule T.	
							Advertising E			gexpense	
							Advertising L	-vhc	51130		
	Complete ONI V if direct		andidata/Officabalda	* 2022	Office cou	abt			Office b		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholde	rname	Office sou	igni			Office h	eiu	
		-									
	Date		Payee name								
	10/07/2024		FACEBOOK								
	Amount (\$)		Payee address;	City; Stat	e; Zip Co	ode					
	\$175.00		1 Hacker Way								
			Menlo Park, CA 94	025							
	PURPOSE	(a)	Category (See Catego	ries listed at the top of this se	chedule)	(b)	Description				
	OF		Advertising Expen		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE								officeholder living	g expense	
							Advertising E	Expe	ense		
	Complete ONLY if direct		andidate/Officeholde	r name	Office sou	ight			Office h	eld	
L	expenditure to benefit C/OI	H									

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment								Equipment & Related Expense at istrict				
1	Total pages Schedule F1:	2	FILER NAM	=					3	Filer ID	(Ethics Commission Filers	5)
-	Sch: 4/5 Rpt: 14/17	[Clayton, M							00088003	(-,
4	Date	5	Payee name									
	10/10/2024		KKDA AM	FM RADIO								
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de					
	\$2,996.00		13155 Noe	I Road, Suite 90	00							
			Dallas, TX	75240								
8	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							nplete Schedule T.	
										, officeholder livin	ig expense	
								Advertising E	xpe	ense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder name	(Dffice sou	ght			Office h	eld	
	Date		Payee name	1								
	10/11/2024			M REACH INT	ERNETAD							
	Amount (\$)		Payee addre	ess; City;	State	Zip Co	db					
	\$4,250.00					, zip co	uc					
	φ4,250.00		13/2/ NUE	I Road, Ste. 500	J							
			Dallas, TX	75240								
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Advertising	Expense							nplete Schedule T.	
								Advertising E		, officeholder livin	ig expense	
								Auventising E	xpe	EIISE		
	Operation ONITY is diverged									Office h	- 1-1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Off	iceholder name	Ĺ	Office sou	gnt			Office h	leid	
		_										
	Date		Payee name									
	10/03/2024		Sutton, Ma	rvin								
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de					
	\$500.00		1909 Syrac	cuse Ct.								
			Arlington, T	X 76002								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising					Check if travel	outsi	ide of Texas. Con	nplete Schedule T.	
	LAFENDITORE									, officeholder livin	g expense	
								Street Sign s	upp	olies		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght			Office h	eld	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Tatal as we contradule F1.					
1 Total pages Schedule F1: Sch: 5/5 Rpt: 15/17	Clayton, MarQuetta		3 Filer ID (Ethics Commission Filers) 00088003		
4 Date 10/15/2024	5 Payee name URBAN ONE INC	·			
6 Amount (\$) \$2,500.00	 Payee address; City; State; Zip C 1010 Wayne Ave., 14th Floor Silver Springs, MD 20910 	Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense Pense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so H	bught	Office held		
Date 10/07/2024	Payee name William Leslie				
Amount (\$) \$900.00	Payee address; City; State; Zip C 9700 Apex St Fort Worth, TX 76108	Code			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense Iorth Tarrant		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so H	bught	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reinbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)					
1 Total pages Schedule G: Sch: 1/2 Rpt: 16/17	2 FILER NAME Clayton, MarQuetta	3 Filer ID (Ethics Commission Filers) 00088003					
4 Date 09/30/2024	5 Payee name Clear Channel						
6 Amount (\$) \$7,165.24 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3700 E. Randol Mill Rd. Arlington, TX 76011						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Sch Advertising Expense Billboards						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date	Payee name						
10/18/2024	Edwards and Patterson						
Amount (\$) \$750.17 Reimbursement from political contributions	Payee address; City; State; Zip C 203 S. Beltline Rd.	code					
intended	Irving, TX 75060						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Description Check if Austin, TX, officeholder living expense Advertising Expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held					
Date	Payee name						
10/21/2024	Maya Makes It						
Amount (\$) \$250.00	Payee address; City; State; Zip C 8109 Wesson Rd.	ode					
X Reimbursement from political contributions intended	Arlington, TX 76002						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought Office held					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office OV Food/Beverage Expense Polling E y - Git/Awards/Memorials Expense Printing F	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule G: Sch: 2/2 Rpt: 17/17	2 FILER NAME Clayton, MarQuetta	3 Filer ID (Ethics Commission Filers) 00088003						
4 Date 10/05/2024	5 Payee name STORMIE MONDAY CAFE	· · · ·						
6 Amount (\$) \$89.61	7 Payee address; City; State; Zip Code							
Reimbursement from political contributions intended	Fort Worth, TX 76105							
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.						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held						
Date 10/15/2024	Payee name iHeart Media Inc							
Amount (\$) \$2,499.98	Payee address; City; State; Zip Co	ode						
X political contributions intended	St. Petersburg, FL 33702							
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held						