

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) 00069695	2 Total pages filed: <div style="text-align: center; font-size: 1.2em;">6</div>
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> MS / MRS / MR FIRST MI </div> <div style="display: flex; justify-content: space-between;"> The Honorable Leanne </div>		<div style="text-align: center; font-weight: bold;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 2px;"> Date Received ELECTRONICALLY FILED 07/08/2025 </div>
	<div style="display: flex; justify-content: space-between;"> NICKNAME LAST SUFFIX </div> <div style="display: flex; justify-content: space-between;"> Johnson </div>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div>		Date Hand-delivered or Date Postmarked <div style="display: flex; border-bottom: 1px solid black;"> <div style="flex: 1;">Receipt #</div> <div style="flex: 1;">Amount</div> </div> <div style="border-bottom: 1px solid black; padding-top: 5px;">Date Processed</div> <div style="border-bottom: 1px solid black; padding-top: 5px;">Date Imaged</div>
	<div style="display: flex; justify-content: space-between;"> MS / MRS / MR FIRST MI </div> <div style="display: flex; justify-content: space-between;"> Mr. Walter </div>		
	<div style="display: flex; justify-content: space-between;"> NICKNAME LAST SUFFIX </div> <div style="display: flex; justify-content: space-between;"> Cooke </div>		
	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div>		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div>		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 296-8877		
8 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded modified reporting limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH-FR)</div> </div>		
9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2025 THROUGH 06/30/2025		
10 ELECTION	<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> ELECTION DATE Month Day Year 11/05/2024 </div> <div style="width: 60%;"> ELECTION TYPE <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other </div> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div> </div>		
11 OFFICE	OFFICE HELD (if any) Court Of Appeals, Justice Place 3 District 9		12 OFFICE SOUGHT (if known) Court Of Appeals, Justice Place 3 District 9

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
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13 C / OH NAME Johnson, Leanne (The Honorable)	14 Filer ID (Ethics Commission Filers) 00069695
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,965.24
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

17 AFFIDAVIT

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.

The Honorable Leanne Johnson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH**FORM JC/OH
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18 FILER NAME Johnson, Leanne (The Honorable)		19 Filer ID (Ethics Commission Filers) 00069695	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	18.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 4/6	2 FILER NAME Johnson, Leanne (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069695
4 Date 06/30/2025	5 Payee name PNC Bank	
6 Amount (\$) 18.00	7 Payee Address; City; State; Zip PNC Bank Dowlen Road Beaumont , TX 77706	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) There is a fee for statements and this is the total fees charged for the entire period in question.

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 5/6

2 FILER NAME

Johnson, Leanne (The Honorable)

3 Filer ID (Ethics Commission Filers)
00069695

LENDER
INFORMATION

4 Name of lender
Johnson , Leanne

5 Lender address; City; State; Zip Code

REDACTED PER 254.0313, GOV'T CODE

GUARANTOR
INFORMATION

6 Name of guarantor

☒ not applicable

7 Guarantor address; City; State; Zip Code

TEXT ANNOTATION

Sch: 1/1 Rpt: 6/6

FILER NAME

Johnson, Leanne (The Honorable)

Filer ID (Ethics Commission Filers)

00069695

Schedule

L

Information entered by filer as a memo:

This is the same \$10,000 loan I made to myself when I first ran for office.