

# 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 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <b>7</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Ms. Jacqueline</b>	FIRST <b>Jackie</b>	MI <b>A.</b>
	NICKNAME <b>Jackie</b>	LAST <b>Chapa</b>	SUFFIX <b>Del Llano</b>
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; <b>P.O. Box 5147</b>	APT / SUITE #;	CITY; STATE; ZIP CODE <b>Corpus Christi, TX 78465</b>
	5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>(361)</b>	PHONE NUMBER EXTENSION <b>653 - 2269</b>
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mrs. Sandra</b>	FIRST <b>Sandra</b>	MI
	NICKNAME <b>Leeton</b>	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE <b>2727 Morgan Ave., 2nd Fl. Corpus Christi, TX 78405</b>
	8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(361)</b>	PHONE NUMBER EXTENSION <b>834 - 1170</b>
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year <b>10 / 11 / 2013</b>	THROUGH	Month Day Year <b>12 / 31 / 2013</b>
11 ELECTION	Month Day Year <b>03 / 04 / 2014</b>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <b>Nueces County Court at Law No. 5 / Judge</b>	

## OFFICE USE ONLY

Date Received

**FILED FOR RECORD  
AT 4:45 P M**
**JAN 14 2014**

Date Hand-delivered or Postmarked

**DIANA T. BARRERA**

 Received County Court, \_\_\_\_\_ County, Texas  
 By **Heidi** \_\_\_\_\_

Date Processed

**Shamken**

Date Imaged

**17 DAS.**

# 2014-012

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM JC/OH  
COVER SHEET PG 2**

14 C/OH NAME Jackie Chapa 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

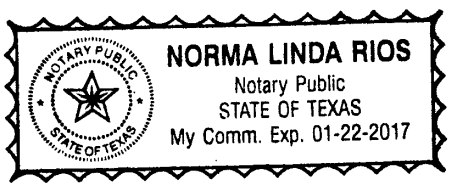
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> additional pages	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
			COMMITTEE ADDRESS
			COMMITTEE CAMPAIGN TREASURER NAME
			COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,925. <sup>00</sup>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,987. <sup>13</sup>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,700. <sup>00</sup>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 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.



[Signature]  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jackie Chapa, this the 14<sup>th</sup> day of January, 20 14, to certify which, witness my hand and seal of office.

Norma Linda Rios      Norma Linda Rios      Notary Public  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

**SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): <b>3</b>	
2 FILER NAME <b>Jackie Chapa</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10/28/13</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ruben Bonilla</b>	7 Amount of contribution (\$) <b>\$ 1,000.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>P.O. Box 5080, Corpus Christi, TX 78465</b>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <b>Attorney</b>		10 Contributor's job title <b>Attorney</b>	
11 Contributor's employer/law firm <b>Bonilla &amp; Chapa, P.C.</b>		12 Law firm of contributor's spouse (if any) <b>N/A</b>	
13 If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			

Date <b>10/30/13</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gertie Conner</b>	Amount of contribution (\$) <b>\$ 1,000.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7602 Bayonne, Corpus Christi, TX 78414</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Retired</b>		Contributor's job title <b>N/A</b>	
Contributor's employer/law firm <b>N/A</b>		Law firm of contributor's spouse (if any) <b>N/A</b>	
If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			

Date <b>10/31/13</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lindsay Browne</b>	Amount of contribution (\$) <b>\$ 200.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>802 N. Carancahua, Suite 2100 Corpus Christi, TX 78401</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Attorney</b>		Contributor's job title <b>Attorney</b>	
Contributor's employer/law firm <b>Law Office of Lindsay Browne</b>		Law firm of contributor's spouse (if any) <b>N/A</b>	
If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <b>Jackie Chapa</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>11/1/13</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lanette Smith Joubert</b>	7 Amount of contribution (\$) <b>\$ 100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>P.O. Box 23, Corpus Christi, TX 78403</b>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <b>Attorney</b>		10 Contributor's job title <b>Attorney</b>	
11 Contributor's employer/law firm <b>Law Office of Lanette Smith Joubert</b>		12 Law firm of contributor's spouse (if any) <b>N/A</b>	
13 If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			
Date <b>11/11/13</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Dunn</b>	Amount of contribution (\$) <b>\$ 150.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>611 S. Upper Broadway Corpus Christi, TX 78401</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Attorney</b>		Contributor's job title <b>Attorney</b>	
Contributor's employer/law firm <b>Dunn, Weathered, Coffey, Rivera &amp; Kasperiti</b>		Law firm of contributor's spouse (if any) <b>Same</b>	
If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			
Date <b>11/20/13</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Randy Garza</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>423 Waco Street Corpus Christi, TX 78401</b>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <b>Bonding Company</b>		Contributor's job title <b>Owner</b>	
Contributor's employer/law firm <b>Self-employed</b>		Law firm of contributor's spouse (if any) <b>N/A</b>	
If contributor is a child, law firm of parent(s) (if any) <b>N/A</b>			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J):	
2 FILER NAME <i>Jackie Chapa</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/31/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>James Upton</i>	7 Amount of contribution (\$) <i>\$ 750.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>802 N. Carancahua, Suite 450 Corpus Christi, TX 78470</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Attorney</i>		10 Contributor's job title <i>Attorney</i>	
11 Contributor's employer/law firm <i>Upton, Mickits &amp; Heyman</i>		12 Law firm of contributor's spouse (if any) <i>N/A</i>	
13 If contributor is a child, law firm of parent(s) (if any) <i>N/A</i>			
Date <i>10/18/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Lonnie Garcia</i>	Amount of contribution (\$) <i>\$ 175.00</i>	In-kind contribution description (if applicable) <i>campaign letters, envelopes and contribution cards</i>
Contributor address; City; State; Zip Code <i>1123 Agnes Street Corpus Christi, TX 78401</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Printing Business</i>		Contributor's job title <i>Manager</i>	
Contributor's employer/law firm <i>Renfrow &amp; Company</i>		Law firm of contributor's spouse (if any) <i>N/A</i>	
If contributor is a child, law firm of parent(s) (if any) <i>N/A</i>			
Date <i>12/27/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Armando Reyna</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>809 S. Port Avenue Corpus Christi, TX 78405</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>	
Contributor's employer/law firm <i>Law Office of Armando L. Reyna</i>		Law firm of contributor's spouse (if any) <i>N/A</i>	
If contributor is a child, law firm of parent(s) (if any) <i>N/A</i>			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**PLEGGED CONTRIBUTIONS (JUDICIAL)**

**SCHEDULE B (J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J): <u>1</u>	
2 FILER NAME <u>Jackie Chapa</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇒      ⇒      ⇒      ⇒      ⇒      ⇒      \$			
5 Date <u>11/12/13</u>	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>William A. Dudley</u>	8 Amount of pledge (\$) <u>\$ 500.00</u>	9 In-kind description (if applicable)
7 Pledgor address; City; State; Zip Code <u>1126 Third Street Corpus Christi, TX 78404</u>		(If travel outside of Texas, complete Schedule T)	
10 Pledgor's principal occupation <u>Attorney</u>		11 Pledgor's job title <u>Attorney</u>	
12 Pledgor's employer/law firm <u>Law Office of William A. Dudley</u>		13 Law firm of pledgor's spouse (if any) <u>N/A</u>	
14 If pledgor is a child, law firm of parent(s) (if any) <u>N/A</u>			

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Pledgor's principal occupation	Pledgor's job title
Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
If pledgor is a child, law firm of parent(s) (if any)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Pledgor's principal occupation	Pledgor's job title
Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
If pledgor is a child, law firm of parent(s) (if any)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <b>1</b>	2 FILER NAME <b>Jackie Chapa</b>	3 ACCOUNT # (Ethics Commission Filers)
---------------------------------------	-------------------------------------	--

4 Date <b>10/18/13</b>	5 Payee name <b>Light house Graphics</b>
---------------------------	---

6 Amount (\$) <b>\$487.13</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <b>5722 Escandido, Corpus Christi, TX 78417</b>
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Printing/Advertising</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>T-Shirts with candidate name + dc. sought</b>
--------------------------	---	---

Date <b>12/3/13</b>	Payee name <b>Nueces County Democratic Party</b>
------------------------	---

Amount (\$) <b>\$1,500.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>823 N. Tancahua Street Corpus Christi, TX 78401</b>
---	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description (If travel outside of Texas, complete Schedule T) <b>Candidate Filing Fee</b>
------------------------	---	--

Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED