

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) 00061742	2 PAGE # 1 of 11	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST David	MI MI	OFFICE USE ONLY
	NICKNAME Dave	LAST Turner	SUFFIX Jr.	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 737 Lamar Avenue Paris, TX 75460			Date Received
				Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Jana	MI MI	Receipt #
	NICKNAME	LAST McGowan	SUFFIX	Amount
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 737 Lamar Avenue Paris, TX 75460			Date Processed
				Date Imaged
7 CAMPAIGN TREASURER PHONE	AREA CODE (903)	PHONE NUMBER 785-8511	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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)			
9 PERIOD COVERED	Month Day Year 01/01/2008			THROUGH
		Month Day Year 01/24/2008		
10 ELECTION	ELECTION DATE Month Day Year 03/04/2008		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) District Judge District 6	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	. . . Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. . .			
	Name			
	Address/PO Box; Apt. / Suite #; City; State; Zip Code			

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Turner, David Jr. (Mr.)	15 ACCOUNT # (Ethics Commission filers) 00061742
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures 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. ..	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	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	\$	50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,325.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	25.00
	4. TOTAL POLITICAL EXPENDITURES	\$	4,401.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	23,733.05
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	30,000.00

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.

David Turner

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 Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 1/4 Report: 3/11	
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742	
4 Date 01/16/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buchanan & Burke L.L.P. 6 Contributor address; City; State; Zip Code Dallas, TX 75206	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation Law Firm		10 Contributor's job title Law Firm	
11 Contributor's employer / law firm Buchanan & Burke L.L.P.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/16/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlock, David (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation Attorney		Contributor's job title Attorney/Partner	
Contributor's employer / law firm Carlock & Gormley L.L.P.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clark, Collen (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm The Clark Firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/11	
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742	
4 Date 01/17/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferrer, Jesse (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation Attorney		10 Contributor's job title Partner/ Attorney	
11 Contributor's employer / law firm Ferrer Poirot & Wansborough P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kastl, Kristina (Ms.) Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm Kastl Law PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montes, Pat (Mr.) Contributor address; City; State; Zip Code Arlington, TX 76011	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm The Montes Law Firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 3/4 Report: 5/11	
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742	
4 Date 01/17/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montes Heral Law Group L.L.P. 6 Contributor address; City; State; Zip Code Irving, TX 75063	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Law Firm		10 Contributor's job title Law Firm	
11 Contributor's employer / law firm Montes Heral Law Group L.L.P.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Price, Gregg (Mr.) Contributor address; City; State; Zip Code Sulpher Springs, TX 75483	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm Gregg Price Attorney at Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rasansky, Jeffrey (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm Jeffrey Rasansky PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 4/4 Report: 6/11	
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742	
4 Date 01/17/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) The Cockran Firm-Dallas L.L.P. 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Law Firm		10 Contributor's job title Law Firm	
11 Contributor's employer / law firm The Cockran Firm - Dallas L.L.P.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/17/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weitzel, Dennis (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title Attorney	
Contributor's employer / law firm Brent Coon & Associate		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/5 Report: 7/11
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742
4 Date 01/05/2008	5 Payee name Belew's Hallmark Shop <hr/> 6 Payee address; City; State; Zip Code 3542 Lamar Avenue Paris, TX 75460	7 Amount (\$) \$207.03
8 Purpose of payment (See instructions regarding type of information required.) Invitations (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/16/2008	Payee name Lamar County Human Resources Council <hr/> Payee address; City; State; Zip Code 625 West Washington Paris, TX 75460	Amount (\$) \$300.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/18/2008	Payee name Malone, Lawrence (Mr.) <hr/> Payee address; City; State; Zip Code 119 N. Main Street Paris, TX 75460	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/15/2008	Payee name Office Equipment Center <hr/> Payee address; City; State; Zip Code 1010 Lamar Avenue Paris, TX 75460	Amount (\$) \$311.41
Purpose of payment (See instructions regarding type of information required.) Copies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 8/11
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742
4 Date 01/20/2008	5 Payee name Office Max 6 Payee address; City; State; Zip Code 3530 Lamar Avenue Paris, TX 75460	7 Amount (\$) \$263.56
8 Purpose of payment (See instructions regarding type of information required.) Labels and Invitations (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/21/2008	Payee name Office Max Payee address; City; State; Zip Code 3530 Lamar Avenue Paris, TX 75460	Amount (\$) \$101.07
Purpose of payment (See instructions regarding type of information required.) Invitations (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/21/2008	Payee name Office Max Payee address; City; State; Zip Code 3530 Lamar Avenue Paris, TX 75460	Amount (\$) \$64.91
Purpose of payment (See instructions regarding type of information required.) Invitations (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/17/2008	Payee name Paperie & Co. Payee address; City; State; Zip Code 5331 E. Mockingbird Lane Dallas, TX 75206	Amount (\$) \$256.55
Purpose of payment (See instructions regarding type of information required.) Invitations (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 9/11
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742
4 Date 01/15/2008	5 Payee name Paris Kiwanis Club 6 Payee address; City; State; Zip Code 425 NE 31st Street Paris, TX 75460	7 Amount (\$) \$200.00
8 Purpose of payment (See instructions regarding type of information required.) Advertisement (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/04/2008	Payee name Red River County Democratic Party Payee address; City; State; Zip Code 1504 West Main Street Clarksville, TX 75426	Amount (\$) \$525.00
Purpose of payment (See instructions regarding type of information required.) Forum Contribution (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/02/2008	Payee name Rowe, Geraldine (Mrs.) Payee address; City; State; Zip Code 7042 Heather Lane Paris, TX 75462	Amount (\$) \$160.00
Purpose of payment (See instructions regarding type of information required.) Campaign Labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/04/2008	Payee name Rowe, Geraldine (Mrs.) Payee address; City; State; Zip Code 7042 Heather Lane Paris, TX 75462	Amount (\$) \$160.00
Purpose of payment (See instructions regarding type of information required.) Campaign Labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 10/11
2 FILER NAME Turner, David Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00061742
4 Date 01/11/2008	5 Payee name Rowe, Geraldine (Mrs.)	7 Amount (\$) \$160.00
6 Payee address; City; State; Zip Code 7042 Heather Lane Paris, TX 75462		
8 Purpose of payment (See instructions regarding type of information required.) Campaign Labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/18/2008	Payee name Rowe, Geraldine (Mrs.)	Amount (\$) \$160.00
Payee address; City; State; Zip Code 7042 Heather Lane Paris, TX 75462		
Purpose of payment (See instructions regarding type of information required.) Campaign Labor (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/04/2008	Payee name Turner, Susan (Mrs.)	Amount (\$) \$260.00
Payee address; City; State; Zip Code 737 Lamar Avenue Paris, TX 75460		
Purpose of payment (See instructions regarding type of information required.) NAACP (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/02/2008	Payee name United States Post Office	Amount (\$) \$246.00
Payee address; City; State; Zip Code 3022 Clarksville Street Paris, TX 75460		
Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #
Schedule: 5/5 Report: 11/11

2 FILER NAME Turner, David Jr. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00061742

4 Date	5 Payee name United States Post Office	7 Amount (\$)
01/05/2008	6 Payee address; City; State; Zip Code 3022 Clarksville Street Paris, TX 75460	\$820.00

8 Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name United States Post Office	Amount (\$)
01/22/2008	Payee address; City; State; Zip Code 3022 Clarksville Street Paris, TX 75460	\$81.20

Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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