

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

7

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Joyce Foreman
 NICKNAME LAST SUFFIX

OFFICE USE ONLY

Date Received
 2014 MAY -2
 BOARD SERVICES
 DALLAS ISD
 RECEIVED
 Date Hand-delivered or Postmarked
 Receipt # Amount
 Date Processed
 Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
*P.O. Box 0001
 3701 Inness
 Dallas, Texas 75246*
 change of address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 372-1331

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Ester Davis
 NICKNAME LAST SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
*2204 Millermore
 Dallas, Texas 75216*

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(214) 376-9000

9 REPORT TYPE

- January 15
- 30th day before election
- Runoff
- 15th day after campaign treasurer appointment (officeholder only)
- July 15
- 8th day before election
- Exceeded \$500 limit
- Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
04/11/14 THROUGH 05/02/14

11 ELECTION

ELECTION DATE ELECTION TYPE
 Month Day Year
05/10/14
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

*Board member
 Dallas ISD Dist 6*

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Joyce Foreman

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.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 3390.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 2700.02

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 689.98

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

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.

Joyce Foreman
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Joyce Foreman, this the 2 day of May, 20 14, to certify which, witness my hand and seal of office.

Dianna Thompson
Signature of officer administering oath

Dianna Thompson
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Joyce Foreman

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/10/14

5 Full name of contributor out-of-state PAC (ID# _____)

Barbara Record

6 Contributor address; City; State; Zip Code

*910 Stillmeadow
Dallas, Texas 75232*

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Alma Langrum

Contributor address; City; State; Zip Code

*3611 Hopetown
Dallas, Texas 75229*

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Erle Nye

Contributor address; City; State; Zip Code

*1211 Creek Fork
Dallas, Texas 75230*

Amount of contribution (\$)

2000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Jacquelyn + Michael Osborn

Contributor address; City; State; Zip Code

*628 Spicewood
De Soto, Texas 75115*

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Thomas Jones

Contributor address; City; State; Zip Code

*1527 Bilco
Dallas, Texas 75232*

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

JOYCE FOREMAN

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/15/14

5 Full name of contributor out-of-state PAC (ID# _____)

Charmaine Miller - Spencer
+ Duane Spencer

6 Contributor address; City; State; Zip Code

405 North Balfour Drive
Cedar Hill, TX 75104

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Carole J. Mayo

Contributor address; City; State; Zip Code

5836 McShann Road
Dallas, Texas 75230

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Thomas Jones

Contributor address; City; State; Zip Code

1527 Bilco
Dallas, Texas 75232

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Nelvin Murphy

Contributor address; City; State; Zip Code

821 Elm Falls Place
Mesquite, Texas 75181

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/14

Full name of contributor out-of-state PAC (ID# _____)

Bob Marshall

Contributor address; City; State; Zip Code

Amount of contribution (\$)

575.00

In-kind contribution description (if applicable)

Listings Political

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

SCHEDULE F

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 F:		2 FILER NAME <i>Joyce Foreman</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/24/14</i>		5 Payee name <i>Fast Signs</i>			
6 Amount (\$) <i>341.40</i>		7 Payee address; City; State; Zip Code <i>3107 Camp Wisdom Dallas, Texas 75237</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>advertising expenses</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office held	
Date <i>4/7/14</i>		Payee name <i>USPS</i>			
Amount (\$) <i>300.00</i>		Payee address; City; State; Zip Code <i>401 DFW TPKE Dallas, Texas 75260</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>other mailing</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office held	
Date <i>4/9/14</i>		Payee name <i>USPS</i>			
Amount (\$) <i>389.67</i>		Payee address; City; State; Zip Code <i>401 DFW TPKE Dallas, Texas 75260</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>other mailing</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office held	
Date <i>4/15/14</i>		Payee name <i>USPS</i>			
Amount (\$) <i>100.00</i>		Payee address; City; State; Zip Code <i>401 DFW TPKE Dallas, Texas 75260</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>other mailing</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

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 F:		2 FILER NAME <i>Joyce Foreman</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/8/14</i>		5 Payee name <i>Walgreens</i>			
6 Amount (\$) <i>39.95</i>		7 Payee address; City; State; Zip Code <i>1080 W. Camp Wisdom Dallas, Texas 75232</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/17/14</i>		Payee name <i>Big Bang Media</i>			
Amount (\$) <i>900⁰⁰</i>		Payee address; City; State; Zip Code <i>1800 Jason Drive Denton, Texas 76205</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/17/14</i>		Payee name <i>Raceway</i>			
Amount (\$) <i>79.00</i>		Payee address; City; State; Zip Code <i>309 E. Ledbetter Dallas, Texas 75216</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Travel in District</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>5/1/14</i>		Payee name <i>Sloan Mitchell</i>			
Amount (\$) <i>200⁰⁰</i>		Payee address; City; State; Zip Code <i>Dallas, Texas 75146</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Political Expense</i>		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

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 F:	2 FILER NAME <i>Jaye Foreman</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>4/29/14</i>	5 Payee name <i>Big Bang Media</i>
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6 Amount (\$) <i>350.00</i>	7 Payee address: City, State, Zip Code <i>1800 Jason Drive Denton, Texas</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address: City, State, Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address: City, State, Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address: City, State, Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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