

# 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)

2 Total pages filed:

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

MR

CHRISTOPHER

P.

NICKNAME

LAST

SUFFIX

JOHNSON

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 1444

DRIPPING SPRINGS, TX 78620

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

673-0249

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

MR

RON

M

NICKNAME

LAST

SUFFIX

JOHNSON

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

240 MALLET COURT  
AUSTIN, TX 78737

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

632-4644

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 Modified  
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

1 / 1 / 22

THROUGH

6 / 30 / 22

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 8 / 22

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

COUNTY COURT AT LAW #2

13 OFFICE SOUGHT (if known)

14 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

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

15 JC/OH NAME <b>CHRISTOPHER P. JOHNSON</b>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 350.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 16.45
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,244.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 21,214.64
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

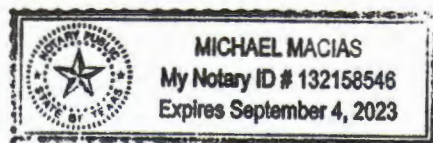
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Chris Johnson*

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Christopher Johnson this the 15<sup>th</sup> day of July.

20 22, to certify which, witness my hand and seal of office.

*Michael Macias*

Michael Macias

Texas Notary

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street)

(city)

(state)

(zip code)

(country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

19 FILER NAME

CHRISTOPHER P. JOHNSON

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,150.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,227.88
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <b>8</b>
2 FILER NAME <b>CHRISTOPHER P. JOHNSON</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>1/31/22</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Case Darwin</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>604 W. Hopkins San Marcos, TX 78666</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Case J. Darwin &amp; Associates Inc</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <b>2/1/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Colin Wise</b>	Amount of contribution (\$) <b>\$200.00</b>
Contributor address; City; State; Zip Code <b>121 Corporate Dr. St. 102 San Marcos, TX 78666</b>		
Contributor's principal occupation <b>Attorney</b>		Contributor's job title <b>Attorney</b>
Contributor's employer/law firm <b>Morris &amp; Wise</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <b>1/31/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>Robert Buford</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>904 W. Ave Skldo Austin, TX 78701</b>		
Contributor's principal occupation <b>Attorney</b>		Contributor's job title <b>Attorney</b>
Contributor's employer/law firm <b>Robert L. Buford, Atty at law</b>		Law firm of contributor's spouse (if any)
If contributor 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.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <div style="text-align: center; font-size: 1.5em;">8</div>
2 FILER NAME <div style="font-size: 1.2em;">CHRISTOPHER P. JOHNSON</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">1/31/22</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Brian Baker</div>	7 Amount of contribution (\$) <div style="font-size: 1.2em;">\$ 500.00</div>
6 Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">P.O. Box 2630 San Marcos, TX 78667</div>		
8 Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		9 Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
10 Contributor's employer/law firm <div style="font-size: 1.2em;">Self</div>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">2/1/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Richard Cofer II</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$500.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">602 W. 11th St. Austin, TX 78701</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
Contributor's employer/law firm <div style="font-size: 1.2em;">Self</div>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">2/1/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Rene Garner</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$100.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">101 Crestview Dr. Wimberley, TX 78676</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Retired</div>		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor 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.

**MONETARY POLITICAL CONTRIBUTIONS  
(JUDICIAL)****SCHEDULE A(J)1**

If the requested information is not applicable, DO NOT include this page in the report.

The instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <div style="text-align: center; font-size: 1.5em;">8</div>
2 FILER NAME <div style="font-size: 1.2em;">CHRISTOPHER P. JOHNSON</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">2/11/22</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Ray Green</div>	7 Amount of contribution (\$) <div style="font-size: 1.2em;">\$500.00</div>
6 Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">5261 Hillside Terrace, Bud, TX 78610</div>		
8 Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		9 Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
10 Contributor's employer/law firm <div style="font-size: 1.2em;">Self</div>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">1/27/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Marcos Hill</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$500.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">2116 Church St Galveston, TX 77550</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
Contributor's employer/law firm <div style="font-size: 1.2em;">Hill + Hill Attorneys at Law</div>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">2/11/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Mike Shulman</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$200.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">10108 Talleyran Dr. Austin, TX 78750</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
Contributor's employer/law firm <div style="font-size: 1.2em;">Self</div>		Law firm of contributor's spouse (if any)
If contributor 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.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <div style="text-align: center; font-size: 2em;">8</div>
2 FILER NAME <div style="font-size: 1.2em;">CHRISTOPHER P. JOHNSON</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">2/1/22</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">David Morris</div>	7 Amount of contribution (\$) <div style="font-size: 1.2em;">\$1,000.00</div>
6 Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">1921 Corporate Dr. San Marcos, Tx 78666</div>		
8 Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		9 Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
10 Contributor's employer/law firm <div style="font-size: 1.2em;">D.H. Morris Attorney at Law</div>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">2/1/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Nicole Cloutier</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$50.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">211 Caraway Kyle, Tx 78640</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Paralegal</div>		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date <div style="font-size: 1.2em;">2/1/22</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <div style="font-size: 1.2em;">Robert Elwood "Wood" Updegrave</div>	Amount of contribution (\$) <div style="font-size: 1.2em;">\$200.00</div>
Contributor address; City; State; Zip Code <div style="font-size: 1.2em;">108 E. San Antonio St. San Marcos, Tx 78666</div>		
Contributor's principal occupation <div style="font-size: 1.2em;">Attorney</div>		Contributor's job title <div style="font-size: 1.2em;">Attorney</div>
Contributor's employer/law firm <div style="font-size: 1.2em;">The Updegrave Law Firm</div>		Law firm of contributor's spouse (if any)
If contributor 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.

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME CHRISTOPHER P. JOHNSON		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Mark Cusack	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 430 Savage Ln. Wimberley, TX 78676		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/1/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Barron, Adler, Clough, & Oddo LLP	Amount of contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 808 Nueces St. Austin, TX 78701		
Contributor's principal occupation Law firm		Contributor's job title Attorneys
Contributor's employer/law firm Barron, Adler, Clough & Oddo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/1/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Charles Soechting	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3331 Ranch Road 12, suite 107A San Marcos, TX 78666		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm The Soechting Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor 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.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME CHRISTOPHER P. JOHNSON		3 Filer ID (Ethics Commission Filers)
4 Date 2/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Lynne B. Morris	7 Amount of contribution (\$) \$ 250.00
6 Contributor address; City; State; Zip Code P.O. Box 1343 Wimberley, TX 78676		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Lynne B. Morris, Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/14/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Rafael Leal	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 2619 Ranch Mirage San Antonio, TX 78259		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Rafael Leal		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jesus Manuel Navar	Amount of contribution (\$) \$ 300.00
Contributor address; City; State; Zip Code P.O. Box 28286 San Antonio, TX 78228		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Law Office of Jesus Manuel Navar		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any) PLLC		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8
2 FILER NAME CHRISTOPHER P. JOHNSON		3 Filer ID (Ethics Commission Filers)
4 Date 2/11/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Gerald Smith	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 10207B River Plantation Dr. Austin, TX 78747		
8 Contributor's principal occupation Retired		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 2/15/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Jason English	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5516 Montview St. Austin, TX 78756		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 2/22/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Mark Janssen	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 110 E. San Antonio St. San Marcos, TX 78666		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Mark Janssen Attorney at Law		Law firm of contributor's spouse (if any)
If contributor 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.



# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <b>8</b>
2 FILER NAME <b>CHRISTOPHER P. JOHNSON</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/4/22</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>BILLY McNabb</b>	7 Amount of contribution (\$) <b>\$250.00</b>
6 Contributor address; City; State; Zip Code <b>144 E. SAN ANTONIO, ST. San Marcos, TX 78666</b>		
8 Contributor's principal occupation <b>Attorney</b>		9 Contributor's job title <b>Attorney</b>
10 Contributor's employer/law firm <b>Self</b>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <b>3/25/22</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <b>KENT WYMORE</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>390 ISLAND OAKS LN. DRIFTWOOD, TX 78619</b>		
Contributor's principal occupation <b>ATTORNEY</b>		Contributor's job title <b>ATTORNEY</b>
Contributor's employer/law firm <b>THE WYMORE FIRM, PLLC</b>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#:	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor 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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>CHRISTOPHER P. JOHNSON</u>				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)		8 Amount of Contribution \$		9 In-kind contribution description
		7 Contributor address; City; State; Zip Code			
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)			11 Employer (FOR NON-JUDICIAL)(See Instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL)(See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)		Amount of Contribution \$		In-kind contribution description
		Contributor address; City; State; Zip Code			
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)			Employer (FOR NON-JUDICIAL)(See Instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NA

**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 POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

If the requested information is not applicable, **DO NOT** include this page in the report.

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>2</b>		2 FILER NAME <b>CHRISTOPHER P. JOHNSON</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>2/11/22</b>		5 Payee name <b>COLOR MIX</b>			
6 Amount (\$) <b>\$1677.88</b>		7 Payee address; <b>808 EL CAMINO WAY DR STE B</b>		City; <b>SAN MARCUS</b>	State; Zip Code <b>TX 78666</b>
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		(b) Description <b>POLITICAL SIGNS</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					
Date <b>3/31/22</b>		Payee name <b>HAYS COUNTY REPUBLICAN WOMEN</b>			
Amount (\$) <b>\$100.00</b>		Payee address; <b>1450 West US 290 #1697 DRIPPING SPRINGS, 78620</b>		City; <b>DRIPPING SPRINGS</b>	State; Zip Code <b>TX 78620</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>		Description <b>TABLE SPONSORSHIP</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					
Date <b>4/28/22</b>		Payee name <b>HAYS County Livestock Show</b>			
Amount (\$) <b>\$300.00</b>		Payee address; <b>P.O. Box 1778 KYLE, TX</b>		City; <b>KYLE</b>	State; Zip Code <b>TX 78640</b>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Advertising</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name					
Office sought					
Office held					

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>2</b>	2 FILER NAME <b>CHRISTOPHER P. JOHNSON</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>6/22/22</b>	5 Payee name <b>JUNETEENTH FOUNDATION</b>	
6 Amount (\$) <b>\$150.00</b>	7 Payee address; City; State; Zip Code <b>P.O. BOX 447 SAN MARCOS, TX 78667</b>	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>CONTRIBUTION</b>	(b) Description <b>CONTRIBUTION</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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