

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:								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>(M)</u> FIRST MI <div style="text-align: center; font-size: 1.2em;">Mark H</div> <hr style="border-top: 1px dashed black;"/> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Woerner</div>	OFFICE USE ONLY FILED FOR RECORD Date Received AT <u>B:02M</u> <div style="font-size: 1.5em; color: red; font-weight: bold;">JAN 15 2015</div> KARA SANDS CLERK, COUNTY COURT, NUECES COUNTY, TEXAS BY <u>[Signature]</u> DEPUTY Date Hand-delivered or Postmarked <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount	Date Processed		Date Imaged			
Receipt #	Amount										
Date Processed											
Date Imaged											
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> change of address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE <div style="font-size: 1.2em;">6741 Deerwood Dr Corpus Christi TX 78401</div>										
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(361) 813-3902</div>										
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <u>(MR)</u> FIRST MI <div style="text-align: center; font-size: 1.2em;">Allen</div> <hr style="border-top: 1px dashed black;"/> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Torres</div>										
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE <div style="font-size: 1.2em;">4541 Everhart Rd #3 Corpus Christi TX 78411</div>										
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em;">(361) 816-9125</div>										
9 REPORT TYPE	<table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final report (Attach C/OH - FR)</td> </tr> </table>			<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)
<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 THROUGH Month Day Year <div style="font-size: 1.2em;">10 / 28 / 2014 THROUGH 01 / 15 / 2015</div>										
11 ELECTION	ELECTION DATE Month Day Year <div style="font-size: 1.2em;">11 / 4 / 2014</div>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special									
12 OFFICE	OFFICE HELD (if any) <div style="font-size: 1.2em;">Judge, County Court at Law #4 Nueces County, TX</div>										
13 OFFICE SOUGHT (if known)											

GO TO PAGE 2

2015-028

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME
Mark H Woerner

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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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

\$ —

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

\$ 35,450.00

EXPENDITURE TOTALS

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

\$ —

4. TOTAL POLITICAL EXPENDITURES

\$ 38,130.00

CONTRIBUTION BALANCE

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

\$

OUTSTANDING LOAN TOTALS

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

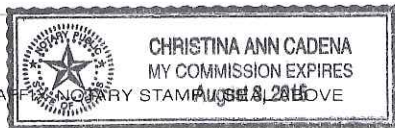
\$ 0

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.

Mark H Woerner

Signature of Candidate or Officeholder



Sworn to and subscribed before me, by the said mark H. woerner, this the 15th day of Jan., 20 15, to certify which, witness my hand and seal of office.

Christina Ann Cadena
Signature of officer administering oath

Christina Ann Cadena
Print name of officer administering oath

notary public
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):	
2 FILER NAME Mark H Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/12/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruben Bonilla, Jr	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 5080 Corpus Christi TX 78465		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer/law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

4 Date 11/12/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart Rice	7 Amount of contribution (\$) 200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 617 Driftwood Corpus Christi TX 78411		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Wood Boykin + Walter PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

4 Date 11/12/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz Garcia	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1117 Vance Dr Corpus Christi TX 78412		(If travel outside of Texas, complete Schedule T)	
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.

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 **Mark H Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 11/21/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph Abram	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1701 Airline Rd Corpus Christi TX 78412		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation 10 Contributor's job title

11 Contributor's employer/law firm 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 11/21/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hastings Law Firm	Amount of contribution (\$) \$1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 101 N. Shoreline Suite 216 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorneys** Contributor's job title

Contributor's employer/law firm **Hastings Law Firm** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 11/21/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burkett Law Firm	Amount of contribution (\$) \$1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 538 S Tancagua Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

Contributor's employer/law firm **Burkett 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
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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 Mark H Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/21/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chapman Law Firm	7 Amount of contribution (\$) \$1000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorneys		10 Contributor's job title	
11 Contributor's employer/law firm Chapman Law Firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 11/21/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Susan Barclay	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 921 Ayers Corpus Christi TX 78404		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Barclay Law Firm PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 11/21/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steven Feldman	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14012 Eastwood Dr SE. Huntsville AL 35803		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm United States Army		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.

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 **Mark H Werner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 11/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wingston Runley, Dunn + Blair LLP	7 Amount of contribution (\$) \$ 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 123 N. Carrizo St Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Attorneys** 10 Contributor's job title

11 Contributor's employer/law firm **Wingston, Runley, Dunn + Blair LLP** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown Law Firm	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 555 N. Carancahua Ste 1200 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

Contributor's employer/law firm **Brown Law Firm** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nathan Burkett	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 538 S. Tancoking Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

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)

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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 Mark H Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards Law Firm	7 Amount of contribution (\$) \$3000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code P.O. Box 480 Corpus Christi TX 78403		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorneys		10 Contributor's job title	
11 Contributor's employer/law firm Edwards Law Firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rick Rogers	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 N Shoreline Ste 800S Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Porter Rogers DeHaven + Gordon PC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jorge Rangel	Amount of contribution (\$) \$1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 2683 Corpus Christi TX 78403		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm The Rangel Law Firm P.C.		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.

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 **Mark H Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 11/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunter Berkera Fancher LLP	7 Amount of contribution (\$) \$1500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 555 N. Carancahua Ste 1200 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Attorneys** 10 Contributor's job title

11 Contributor's employer/law firm **Hunter Berkera Fancher PC** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leslie D. Cassidy	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 941 Corpus Christi TX 78403		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

Contributor's employer/law firm **Les Cassidy PLLC** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott + Wada Stalke	Amount of contribution (\$) \$5000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4710 Grand Lake Corpus Christi TX 78403		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorneys** Contributor's job title

Contributor's employer/law firm **Herman + Herman 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

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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 Mark H Werner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ira Z Miller	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 545 Upper N. Broadway Ste 114 Corpus		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title	
11 Contributor's employer/law firm Self		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huseman + Stewart PLLC	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 615 N Upper Broadway Ste 2000 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorneys		Contributor's job title	
Contributor's employer/law firm Huseman + Stewart PLLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sico White Holscher, Harris + Brough LLP	Amount of contribution (\$) \$3000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 802 N. Corenocha Ste 900 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorneys		Contributor's job title	
Contributor's employer/law firm Sico White, Holscher Harris + Brough LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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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>Mark H Woerner</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/26/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Webb, Cason + Couch P.C.</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>710 Mesquite St Corpus Christi TX 78401</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Attorneys</i>		10 Contributor's job title	
11 Contributor's employer/law firm <i>Webb Cason + Couch, P.C.</i>		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date <i>11/26/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Paul Dodson</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>218 Leming Corpus Christi TX 78404</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title	
Contributor's employer/law firm <i>Self</i>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date <i>11/26/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>R. Blake Brunkenhoefer</i>	Amount of contribution (\$) <i>\$1000.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>500 N Shoreline Corpus Christi</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title	
Contributor's employer/law firm <i>Brunkenhof/Turman PLLC</i>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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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 **Mark H Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 11/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brin + Brin	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6223 IH 10 San Antonio TX 78201		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Attorneys** 10 Contributor's job title

11 Contributor's employer/law firm **Brin + Brin** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 11/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Walker	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 400 Mann St Ste 900 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

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 11/26/14 12/31/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gowen Elizondo L.L.P.	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 555 N. Carancahua Ste 140 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorneys** Contributor's job title

Contributor's employer/law firm **Gowen Elizondo LLP** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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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 *Mark H Woerner* 3 ACCOUNT # (Ethics Commission Filers)

4 Date <i>12/3/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Herrman + Herrman PLLC</i>	7 Amount of contribution (\$) <i>500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1201 Third St Corpus Christi TX 78404</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation *Attorneys* 10 Contributor's job title

11 Contributor's employer/law firm *Herrman + Herrman LLP* 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date <i>12/3/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Michael Henry</i>	Amount of contribution (\$) <i>2500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>14002 Cabana North Corpus Christi TX 78418</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation *Attorney* Contributor's job title

Contributor's employer/law firm *Law Offices of Thomas V Henry* Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date <i>12/3/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Russell Endsley</i>	Amount of contribution (\$) <i>2500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>8049 Ocean Dr Corpus Christi TX 78412</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation *Attorney* Contributor's job title

Contributor's employer/law firm *Law Offices of Thomas V. Henry* 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.

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):
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2 FILER NAME <i>Mark H Werner</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>12/03/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Robert Hilliard</i>	7 Amount of contribution (\$) <i>\$2500.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>719 N. Shoreline Ste 500 Corpus Christi TX 78401</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <i>Attorney</i>	10 Contributor's job title
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11 Contributor's employer/law firm <i>Hilliard Munoz Gonzales LLP</i>	12 Law firm of contributor's spouse (if any)
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13 If contributor is a child, law firm of parent(s) (if any)

Date <i>12/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Robert C Walter</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>615 N. Upper Broadway Ste 1160 Corpus Christi TX 78401</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <i>Attorney</i>	Contributor's job title
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Contributor's employer/law firm <i>Wood Boykin + Walter</i>	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

Date <i>12/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Frederick J. McCutcheon</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>615 N Upper Broadway Corpus Christi TX 78401</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <i>Attorney</i>	Contributor's job title
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Contributor's employer/law firm <i>Wood Boykin + Walter</i>	Law firm of contributor's spouse (if any)
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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.

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 Mark H Woerner		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/12/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Thomas V. Henry	7 Amount of contribution (\$) 2500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 521 Starr St Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title	
11 Contributor's employer/law firm Law Office of Thomas V. Henry		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 12/12/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Welder Leskin LLP	Amount of contribution (\$) 2000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 N Shoreline Ste 300 N Corpus Christi		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorneys		Contributor's job title	
Contributor's employer/law firm Welder Leskin LLP		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

Date 12/12/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartline Dacus Berger Dreyer LLP	Amount of contribution (\$) 2500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 800 N. Shoreline Ste 200 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer/law firm Hartline Dacus Berger Dreyer LLP		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.

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):
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2 FILER NAME <i>Mark H Werner</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>12/12/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Wingston Runkley Dunn + Blair LLP</i>	7 Amount of contribution (\$) <i>1000.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>123 N. Carrizo</i>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation <i>Attorneys</i>	10 Contributor's job title
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11 Contributor's employer/law firm <i>Wingston Runkley Dunn + Blair LLP</i>	12 Law firm of contributor's spouse (if any)
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13 If contributor is a child, law firm of parent(s) (if any)

Date <i>12/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Snopka Law Firm</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>606 N. Caraculwa Ste 1511 Corpus Christi TX 784</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <i>Attorney</i>	Contributor's job title
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Contributor's employer/law firm <i>Snopka Law Firm</i>	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

Date <i>12/12/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Douglas Allison</i>	Amount of contribution (\$) <i>500.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>403 N. Taraculwa Corpus Christi TX 78401</i>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation <i>Attorney Law office of Douglas Allison</i>	Contributor's job title
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Contributor's employer/law firm <i>Law office of Douglas Allison</i>	Law firm of contributor's spouse (if any)
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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.

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 **Mark H Woerner** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 12/17/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nicholas Morris + Gilbreath LLP	7 Amount of contribution (\$) 750.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5306 Holy Rd Suite B Corpus Christi TX 78411		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Attorneys** 10 Contributor's job title

11 Contributor's employer/law firm **Nicholas Morris + Gilbreath LLP** 12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 12/18/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roger Turk	Amount of contribution (\$) \$2500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 521 Starr St Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorney** Contributor's job title

Contributor's employer/law firm **Law Office of Thomas J. Henry** Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date 1/21/15	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Liles Harris PLLC	Amount of contribution (\$) \$1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 N. Water Ste 800 Corpus Christi TX 78401		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Attorneys** Contributor's job title

Contributor's employer/law firm **Liles Harris 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.

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 Candidate/Officeholder/Political Committee |
| Event Expense | Polling Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | Printing Expense | Office Overhead/Rental Expense | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Mark H Woelner	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10/28/14	5 Payee name Jeff Butler
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6 Amount (\$) 2280.	7 Payee address; City, State; Zip Code 1321 Peterson Corpus Christi TX 78413
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/11/14	Payee name Jeff Butler
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Amount (\$) 3500.00	Payee address; City, State; Zip Code 1321 Peterson Corpus Christi TX 78413
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 11/30/14	Payee name Jeff Butler
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Amount (\$) 1350.00	Payee address; City, State; Zip Code 1321 Peterson Corpus Christi TX 78413
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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 Candidate/Officeholder/Political Committee |
| Event Expense | Polling Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | Printing Expense | Office Overhead/Rental Expense | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME Mark H Woerner	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/3/14	5 Payee name Edwards Law Firm	
6 Amount (\$) \$ 500.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Refund Excess Contribution	(b) Description (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 12/3/14	Payee name Sico White Hoelscher Harris & Braugh	
Amount (\$) 500.00	Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Refund excess contribution	Description (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 12/5/14	Payee name Mark H Woerner	
Amount (\$) \$20,000.00	Payee address; City; State; Zip Code 6741 Deerwood Corpus Christi TX 78413	
8 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Reimbursement	Description (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 12/19/14	Payee name Mark H. Woerner	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 6741 Deerwood Corpus Christi TX 78413	
8 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Reimbursement	Description (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: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED