

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		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)	\$ 4770.87
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4770.87
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 3653.71
	4. TOTAL POLITICAL EXPENDITURES	\$ 3653.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1117.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

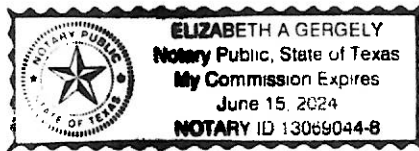
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Sandi Walker

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Sandi Walker this the 29th day of April,

2022, to certify which, witness my hand and seal of office.

Elizabeth A. Gergely
Signature of officer administering oath

Elizabeth A. Gergely
Printed name of officer administering oath

Notary
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 - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4770.87
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE E: LOANS		\$ 0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 3653.71
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0.00

[Reset Form](#)

[Reset Page](#)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME Todd Walker		3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2022	5 Full name of contributor out-of-state PAC (ID# _____) Carey Page 6 Contributor address; City; State; Zip Code 1467 Highland Court, Keller Texas 76262	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) M.D.F.A.C.S		9 Employer (See Instructions)
Date 4/14/2022	Full name of contributor out-of-state PAC (ID# _____) Brittany Platz Contributor address; City; State; Zip Code 8126 Rio Vista Ct, NRH, Texas 76182	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/15/2022	Full name of contributor out-of-state PAC (ID# _____) Joseph Coker Contributor address; City; State; Zip Code 1225 Melissa Dr, Keller, Texas 76262	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)
Date 4/19/2022	Full name of contributor out-of-state PAC (ID# _____) Andrea Pierce Contributor address; City; State; Zip Code 1804 Meadowlark Dr, Keller, Texas 76248	Amount of contribution (\$) 50.00
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.

Reset Form

Reset Page

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:

2 FILER NAME
Todd Walker 3 Filer ID (Ethics Commission Filers)

4 Date 4/21/2022	5 Full name of contributor out-of-state PAC (ID# _____) Dana McCaleb	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 605 Meandering Woods, Keller, Texas 76248		

8 Principal occupation / Job title (See Instructions)
homemaker 9 Employer (See Instructions)

Date 4/21/2022	Full name of contributor out-of-state PAC (ID# _____) Angela Matthews	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code Keller, Texas 76248		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID# _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID# _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		

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.

Reset Form

Reset Page

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:

2 FILER NAME 3 Filer ID (Ethics Commission Filers)

4 Date 3/6/2022	5 Full name of contributor Peter Ure <small>out-of-state PAC (ID# _____)</small>	7 Amount of contribution (\$) 51.99
6 Contributor address; City; State; Zip Code 9305 Shields Street, Fort Worth, TX 76244		

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)
Business

Date 3/6/2022	Full name of contributor Erica Unger <small>out-of-state PAC (ID# _____)</small>	Amount of contribution (\$) 103.48
Contributor address; City; State; Zip Code 9005 McFarland Way, Fort Worth, TX 76244		

Principal occupation / Job title (See Instructions) Employer (See Instructions)
self employed

Date 3/2/2022	Full name of contributor Erica Unger <small>out-of-state PAC (ID# _____)</small>	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 9005 McFarland Way, Fort Worth, TX 76244		

Principal occupation / Job title (See Instructions) Employer (See Instructions)
self employed

Date 2/28/2022	Full name of contributor Todd Walker <small>out-of-state PAC (ID# _____)</small>	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4904 Giordano Way, Fort Worth, TX 76244		

Principal occupation / Job title (See Instructions) Employer (See Instructions)
Engineer

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

SCHEDULE A1

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 A1:

2 FILER NAME
Todd Walker 3 Filer ID (Ethics Commission Filers)

4 Date 3/6/2022	5 Full name of contributor Barbara Luzeiro	out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 206.46
6 Contributor address; City; State; Zip Code 801 s Main Street, Keller, TX 76248			

8 Principal occupation / Job title (See Instructions)
self employed 9 Employer (See Instructions)

Date 3/6/2022	Full name of contributor Mary McWherter Payne	out-of-state PAC (ID# _____)	Amount of contribution (\$) 21.10
Contributor address; City; State; Zip Code 5409 High Desert Pl NE, Albuquerque, NM 87111			

Principal occupation / Job title (See Instructions)
Retired Employer (See Instructions)

Date 3/6/2022	Full name of contributor Gail Kent	out-of-state PAC (ID# _____)	Amount of contribution (\$) 21.10
Contributor address; City; State; Zip Code 130 County Road, Mineola, TX 73773			

Principal occupation / Job title (See Instructions)
Retired Employer (See Instructions)

Date 3/6/2022	Full name of contributor Lilia Grelard	out-of-state PAC (ID# _____)	Amount of contribution (\$) 51.99
Contributor address; City; State; Zip Code 10608 Crawford Farms, Keller, TX 76244			

Principal occupation / Job title (See Instructions)
Dental hygentist 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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME Todd Walker		3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2022	5 Full name of contributor out-of-state PAC (ID# _____) Larry L Chapman, P.A. 6 Contributor address; City; State; Zip Code 7206 Covewood Drive, Garland, TX 75044	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) <i>retired</i>		9 Employer (See Instructions)
Date 3/6/2022	Full name of contributor out-of-state PAC (ID# _____) Tia Wasik Contributor address; City; State; Zip Code 421 Beverly Dr, Keller, TX 76248	Amount of contribution (\$) 31.40
Principal occupation / Job title (See Instructions) <i>self employed</i>		Employer (See Instructions)
Date 3/6/2022	Full name of contributor out-of-state PAC (ID# _____) Timothy Kempka Contributor address; City; State; Zip Code 907 Santa Cruz Drive, Keller, TX 76248	Amount of contribution (\$) 103.48
Principal occupation / Job title (See Instructions) <i>Business</i>		Employer (See Instructions)
Date 3/6/2022	Full name of contributor out-of-state PAC (ID# _____) Rick Ernzen Contributor address; City; State; Zip Code 2037 Coventry Ct, Keller, TX 76262	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) <i>Business</i>		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.

Reset Form

Reset Page

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:

2 FILER NAME
Todd Walker

3 Filer ID (Ethics Commission Filers)

4 Date
3/9/2022

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

7 Amount of contribution (\$)
21.10

6 Contributor address; City; State; Zip Code
998 Post Oak Rd, Keller, TX 76248

8 Principal occupation / Job title (See Instructions)
none

9 Employer (See Instructions)

Date
3/9/2022

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

Amount of contribution (\$)
103.48

Contributor address; City; State; Zip Code
4309 Round Valley Lane, Roanoke, TX 76262

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)

Date
3/8/2022

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

Amount of contribution (\$)
360.92

Contributor address; City; State; Zip Code
P.O.Box 2084, Basalt, TX 81621

Principal occupation / Job title (See Instructions)
Self Employed

Employer (See Instructions)

Date
3/8/2022

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

Amount of contribution (\$)
26.25

Contributor address; City; State; Zip Code
1212 Cross Timber, Southlake, TX 76092

Principal occupation / Job title (See Instructions)
Self employed

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME Todd Walker		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2022	5 Full name of contributor out-of-state PAC (ID# _____) Donna Cobb 6 Contributor address; City; State; Zip Code 707 W LD Lockett Rd, Colleyville, TX 76034	7 Amount of contribution (\$) 2000.00
8 Principal occupation / Job title (See Instructions) <i>retired</i>		9 Employer (See Instructions)
Date 3/31/2022	Full name of contributor out-of-state PAC (ID# _____) Clayton Chapman Contributor address; City; State; Zip Code 6508 Eagle Nest Drive, Garland, TX 75044	Amount of contribution (\$) 21.10
Principal occupation / Job title (See Instructions) <i>Convenience Store Manager</i>		Employer (See Instructions)
Date 3/21/2022	Full name of contributor out-of-state PAC (ID# _____) Andrew Donlon Contributor address; City; State; Zip Code 904 Venice Avenue, Southlake, TX 76092	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2022	Full name of contributor out-of-state PAC (ID# _____) Jill Hand Contributor address; City; State; Zip Code 8316 Southridge Ct, North Richland Hills	Amount of contribution (\$) 103.48
Principal occupation / Job title (See Instructions) <i>homemaker</i>		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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME Todd Walker		3 Filer ID (Ethics Commission Filers)
4 Date 4/5/2022	5 Full name of contributor out-of-state PAC (ID# _____) Holly Coker	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1323 Briar Ridge Dr, Keller, TX 76244		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/5/2022	Full name of contributor out-of-state PAC (ID# _____) Micah Young	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1521 Spanish Bay Dr., Keller, TX 76244		
Principal occupation / Job title (See Instructions) <i>self employed</i>		Employer (See Instructions)
Date 4/4/2022	Full name of contributor out-of-state PAC (ID# _____) Jennifer Banning	Amount of contribution (\$) 10.80
Contributor address; City; State; Zip Code 11501 Maddie Ave, Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/30/2022	Full name of contributor out-of-state PAC (ID# _____) Doug Taylor	Amount of contribution (\$) 77.74
Contributor address; City; State; Zip Code 4024 Vernon Way, Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) <i>Retired</i>		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 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Todd Walker	3 Filer ID (Ethics Commission Filers)
-----------------------------------	------------------------------------	--

4 Date 4/4/2022	5 Payee name Edgerton Strategies, LLC
---------------------------	---

6 Amount (\$) 3417.18	7 Payee address; 1540 Keller Parkway #108-402, Keller, TX 76248	City;	State;	Zip Code
---------------------------------	---	-------	--------	----------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing expense	(b) Description signs, push cards
	(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 4/22/2022	Payee name Edgerton Strategies, LLC
-------------------	--

Amount (\$) 236.53	Payee address; 1540 Keller Parkway #108-402, Keller, TX 76248	City;	State;	Zip Code
-----------------------	--	-------	--------	----------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense	Description signs
	<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
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Reset Form

Reset Page