

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 9										
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Carol NICKNAME LAST SUFFIX Carol Dingman	<div style="text-align: center; border: 1px solid black; padding: 5px;"> OFFICE USE ONLY RECEIVED APR 10 2014 </div> <div style="text-align: center; border: 1px solid black; padding: 5px; margin-top: 5px;"> CITY MANAGER'S OFFICE </div> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td colspan="2" style="padding: 2px;">Date Received</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Hand-delivered or Date Postmarked</td> </tr> <tr> <td style="padding: 2px;">Receipt #</td> <td style="padding: 2px;">Amount</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Processed</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Date Imaged</td> </tr> </table>		Date Received		Date Hand-delivered or Date Postmarked		Receipt #	Amount	Date Processed		Date Imaged	
Date Received													
Date Hand-delivered or Date Postmarked													
Receipt #	Amount												
Date Processed													
Date Imaged													
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 13223 Glad Acres Drive Farmers Branch, TX 75234 <input type="checkbox"/> Change of Address												
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Joseph NICKNAME LAST SUFFIX Joe Dingman												
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 13223 Glad Acres Drive Farmers Branch, TX 75234												
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 616-1202												
8 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" 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 type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final report (Attach C/OH - FR)				
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9 PERIOD COVERED	Month Day Year Month Day Year 01/01/2014 THROUGH 04/02/2014												
10 ELECTION	<table style="width:100%; border: none;"> <tr> <td style="width:40%;"> ELECTION DATE Month Day Year 05/10/2014 </td> <td> ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> </table>	ELECTION DATE Month Day Year 05/10/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special										
ELECTION DATE Month Day Year 05/10/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special												
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Mayor, City of Farmers Branch											

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Dingman, Carol (Ms.)

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 23,620.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 18,889.91

CONTRIBUTION BALANCE

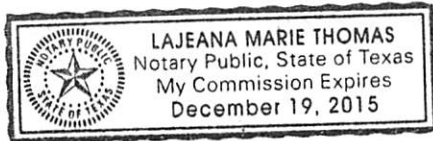
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 30,736.63

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 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.



Carol Dingman
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Carol Dingman, this the 10 day of April, 2014, to certify which, witness my hand and seal of office.

Lajeana M. Thomas Lajeana M. Thomas Notary
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/4 Report: 3/9	
2 FILER NAME Dingman, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 01/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Apartment Association of Greater Dallas PAC 6 Contributor address; City; State; Zip Code 4230 LBJ, # 140 Dallas, TX 75244	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 03/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barentine, Diane H Contributor address; City; State; Zip Code 3606 Ridgeoak Dallas, TX 75234	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 03/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Billingsley, Lucy C Contributor address; City; State; Zip Code 1722 Routh St # 1313 Dallas, TX 75201	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brewer, William & Skye Contributor address; City; State; Zip Code 1717 Mail # 4800 Dallas, TX 75201	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carter, Travis & Amber Contributor address; City; State; Zip Code 6122 Aberdeen Dallas, TX 75230	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/9	
2 FILER NAME Dingman, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 04/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carter, Travis & Amber 6 Contributor address; City; State; Zip Code 6122 Aberdeen Dallas, TX 75230	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 02/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Connelly, Serena & Tom Contributor address; City; State; Zip Code 3156 Brookhollow Farmers Branch, TX 75234	Amount of contribution (\$) \$5,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dillon, Susan Contributor address; City; State; Zip Code 1717 Main # 4800 Dallas, TX 75201	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 03/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Drevicky, Brenda Contributor address; City; State; Zip Code 14130 Southern Pines Farmers Branch, TX 75234	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 02/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Iskander, Jack Contributor address; City; State; Zip Code 3520 Travis Dallas, TX 75204	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/4 Report: 5/9	
2 FILER NAME Dingman, Carol (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 02/28/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jordan, Barry 6 Contributor address; City; State; Zip Code 1819 Addington Carrollton, TX 75007	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LaMantia, Jr., Greg Contributor address; City; State; Zip Code 5613 Les Parre Corpus Christi, TX 78414	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LaMantia, Jr., Samantha Contributor address; City; State; Zip Code 3711 Holland # 304 Dallas, TX 75219	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Long, John Contributor address; City; State; Zip Code 7057 Joyce Way Dallas, TX 75225	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCormack, Michael Contributor address; City; State; Zip Code 1717 Main # 4800 Dallas, TX 75201	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 4/4 Report: 6/9	
2 FILER NAME Dingman, Carol (Ms.)			3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 03/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Presser, Joel A 6 Contributor address; City; State; Zip Code 3407 Courtyard Cir Dallas, TX 75234	7 Amount of contribution (\$) \$50.00 	8 In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 01/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rendon, Ruben (Mr.) Contributor address; City; State; Zip Code 13240 Veronica Rd Farmers Branch, TX 75234	Amount of contribution (\$) \$100.00 	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 03/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Springer, Gary Contributor address; City; State; Zip Code 13834 New Bark Dallas, TX 75244	Amount of contribution (\$) \$200.00 	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 01/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ternan, Jack Contributor address; City; State; Zip Code 1708 Carmel Drive Plano, TX 75075	Amount of contribution (\$) \$500.00 	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 03/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tillotson, Jeffrey M Contributor address; City; State; Zip Code 2100 Ross # 2700 Dallas, TX 75234	Amount of contribution (\$) \$5,000.00 	In-kind contribution description (if applicable)	
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/2 Report: 7/9		2 FILER NAME Dingman, Carol (Ms.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 02/15/2014	5 Payee name Democracy Toolbox				
6 Amount (\$) \$2,500.00	7 Payee address City; State; Zip Code 405 Rice McKinney, TX 75069				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Strategy and Implementation		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/19/2014	Payee name Edwards & Patterson				
Amount (\$) \$1,420.95	Payee address City; State; Zip Code 4733 Don Dr Dallas, TX 75247				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> yard signs		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/16/2014	Payee name Smith, Andrew				
Amount (\$) \$3,300.00	Payee address City; State; Zip Code 3620 Waldorf Dr Dallas, TX 75229				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Persuasion support		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/02/2014	Payee name Stripe				
Amount (\$) \$205.95	Payee address City; State; Zip Code 3180 18th Street San Francisco, CA 94110				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Processing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 8/9	2 FILER NAME Dingman, Carol (Ms.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 01/09/2014	5 Payee name Technology Media Group
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6 Amount (\$) \$89.85	7 Payee address City; State; Zip Code 1262 Viceroy Drive Dallas, TX 75247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Calling Cards
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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 03/13/2014	Payee name Technology Media Group
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Amount (\$) \$1,373.16	Payee address City; State; Zip Code 1262 Viceroy Drive Dallas, TX 75247
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Push cards/door hangers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 9/9	2 FILER NAME Dingman, Carol (Ms.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 03/13/2014	5 Payee name Myers Research
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6 Amount (\$) \$10,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 1510 6th Street NW # 1 Washington, DC 20001
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Survey
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