CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

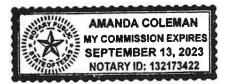
| The C/OH INSTRUCTION GUIDE explains how to complete this form. 1 ACCOUNT # (Ethics Commission filers) | 2 PAGE# | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| 00000001 | 1 of 15 | | | | | | | |
| 3 CANDIDATE / MS/MRS/MR FIRST MI | OFFICE USE ONLY | | | | | | | |
| OFFICEHOLDER Mr. Jacinto NAME | Date Received | | | | | | | |
| NICKNAME LAST SUFFIX | | | | | | | | |
| Cinto Ramos Jr. | | | | | | | | |
| | 7/19/2021 | | | | | | | |
| 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | 1/1 // = = = < | | | | | | | |
| OFFICEHOLDER MAILING 1917 Harrington Avenue | | | | | | | | |
| MAILING 1817 Harrington Avenue ADDRESS Fort Worth, TX 76164 | Date Hand-delivered or Date Postmarked | | | | | | | |
| | 7 (10 /2 02) | | | | | | | |
| Change of Address | 7/19/2021 | | | | | | | |
| | Receipt # Amount | | | | | | | |
| 5 CAMPAIGN MS/MRS/MR FIRST MI | Date Processed | | | | | | | |
| TREASURER Mrs. Anita | Date Imaged | | | | | | | |
| NICKNAME LAST SUFFIX | beautiful and the second | | | | | | | |
| Ramos | | | | | | | | |
| | / | | | | | | | |
| 6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; TREASURER | ZIP CODE | | | | | | | |
| ADDRESS 1817 Harrington Avenue | | | | | | | | |
| (Residence or business) Fort Worth, TX 76164 | | | | | | | | |
| | | | | | | | | |
| 7 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION | | | | | | | | |
| TREASURER | | | | | | | | |
| PHONE | | | | | | | | |
| a DEDORT TYPE | | | | | | | | |
| 8 REPORT TYPE January 15 30th day before election Runoff | 15th day after campaign treasurer appointment (officeholder only) | | | | | | | |
| | арропанова (отосность от у | | | | | | | |
| X July 15 8th day before election Exceeded \$500 limit | Final report (Attach C/OH - FR) | | | | | | | |
| | | | | | | | | |
| 9 PERIOD Month Day Year Month Day | Year | | | | | | | |
| COVERED | | | | | | | | |
| 01/01/2021 06/30/20 | 21 | | | | | | | |
| | | | | | | | | |
| 10 ELECTION ELECTION DATE ELECTION TYPE | | | | | | | | |
| Month Day Year Primary X Runoff | General Special | | | | | | | |
| 06/13/2013 | | | | | | | | |
| | | | | | | | | |
| 11 OFFICE OFFICE HELD (if any) | | | | | | | | |
| Fort Worth ISD School Board Fort Worth ISD Sch District 01 | ool Board | | | | | | | |
| District of | | | | | | | | |
| | | | | | | | | |
| GO TO PAGE 2 | | | | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

| 13 C/OH NAME Ramo | 14 ACCOUNT # 00000001 | (Ethics Commission filers) | | | | | |
|----------------------------|--|---|--|---|--|--|--|
| 15 NOTICE FROM | have been made with | tice of political expenditures by political committees to support the ca lout the candidate's or officeholder's knowledge or consent. Candidat by receive notice of such expenditures | endidate / officeholder les and officeholders a | . These expenditures may are required to report this | | | |
| POLITICAL COMMITTEE(S) | COMMITTEE TYPE | COMMITTEE NAME | | | | | |
| | GENERAL | COMMITTEE ADDRESS | | | | | |
| | SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | | | | |
| additional pages | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL I PLEDGE | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 0.00 | | | |
| | 2. TOTAL (OTHER | POLITICAL CONTRIBUTIONS I THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 | | | |
| EXPENDITURE TOTALS | | | | | | | |
| | 4. TOTAL | POLITICAL EXPENDITURES | \$ | 11,582.49 | | | |
| CONTRIBUTION BALANCE | | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD | \$ | 22,290.45 | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ | | | | | | |
| 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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jachto Romes

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

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

P.O.Box 12070

PLEDGED CONTRIBUTIONS SCHEDULE B PAGE# 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/8 Report: 3/15 (Ethics Commission filers) ACCOUNT # 2 FILER NAME Ramos, Jacinto Jr. (Mr.) 00000001 4 **TOTAL OF UNITEMIZED PLEDGES:** 4 0 In-kind description 8 Amount of ■ out-of-state PAC (ID#_ 5 Date 6 Full name of pledgor (if applicable) pledge (\$) Ali, Micah \$500.00 City; State; Zip Code 01/26/2021 7 Pledgor address; 5471 S Hillcrest Drive Los Angeles, CA 90043 (If travel outside of Texas, complete Schedule T) 11 Employer (See Instructions) 10 Principal occupation / Job title (See Instructions) Self Employed Consultant In-kind description ☐ out-of-state PAC (ID#_ Amount of Full name of pledgor Date (if applicable) pledge (\$) Angle, John \$1,000.00 Pledgor address; City; State; Zip Code 02/12/2021 2420 South Adams Street Fort Worth, TX 76110 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Angle Mastagni Mathews Political Strategies Partner/Owner In-kind description ut-of-state PAC (ID# Amount of Full name of pledgor Date (if applicable) pledge (\$) Avila, John and Jane Jr. City; State; Zip Code \$1,000.00 Pledgor address; 01/11/2021 2600 West 7th Street Unit 1833 Fort Worth, TX 76107 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed Self Employed In-kind description ☐ out-of-state PAC (ID#_ Amount of Date Full name of pledgor (if applicable) pledge (\$) Church, Richard and Ana \$250.00 02/02/2021 Pledgor address; City; State; Zip Code 4320 Westino Way Leander, TX 78641 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Insight Technology Sales In-kind description ut-of-state PAC (ID# Amount of Full name of pledgor Date (if applicable) pledge (\$) Clark, Barbara \$250.00 City; State; Zip Code Pledgor address; 01/14/2021 1501 Saxony Road Fort Worth, TX 76116 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed

| Te | xas Ethics Com | mission P.O.Box 12070 Austin, | Texas 78711-2070 | (512)463-5800 | TDD 1-800-735-2989 |
|----|-------------------------------------|--|--|--------------------------|--|
| | PLEDG | ED CONTRIBUTIONS | | | SCHEDULE B |
| | The Instructio | N GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 2/8 | Report: 4/15 |
| 2 | FILER NAME | Ramos, Jacinto Jr. (Mr.) | | 3 ACCOUNT # 00000001 | (Ethics Commission filers) |
| 4 | TOTAL C | DF UNITEMIZED PLEDGES: | + + + • | ⇒ ⇒ | \$ |
| 5 | Date | 6 Full name of pledgor ☐ out-of-state PAC (ID# Deleon Campaign Committee |) | 8 Amount of pledge (\$) | 9 In-kind description (if applicable) |
| | 02/02/2021 | 7 Pledgor address; City; State; Zip Code PO Box 470743 Fort Worth, TX 76147 | | \$300.00 | |
| | | | 44 Feedows (Cooling | | Texas, complete Schedule T) |
| 10 |) Principal occup Justice of the | ation / Job title (See Instructions) Peace | 11 Employer (See Ins Tarrant County | suucuons) | |
| | Date | Full name of pledgor Dulle, Caroline (Mrs.) | ·) | Amount of pledge (\$) | In-kind description (if applicable) |
| | 02/23/2021 | Pledgor address; City; State; Zip Code 1217 Clover Lane Fort Worth, TX 76107 | ರಾಜಕ ಕನನಡೆನು ಕನ್ನಡಿಸಿ | \$500.00 | |
| | | Port Worth, 12 70107 | | W. | · · · · · · · · · · · · · · · · · · · |
| | | | Employer (See Inc | | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins Retired | su ucuons) | |
| | Date | Full name of pledgor | ·) | Amount of pledge (\$) | In-kind description (if applicable) |
| | 02/02/2021 | Pledgor address; City; State; Zip Code 7405 Lohr Street Brownsville, TX 78621 | | \$250.00 | ! [|
| | | Lickney (777) | | (If travel outside of | Texas, complete Schedule T) |
| _ | Principal occup | ation / Job title (See Instructions) | Employer (See In | | |
| | | uage Pathologist | Self Employed | | |
| | , Date | Full name of pledgor | <u> </u> | Amount of pledge (\$) | In-kind description (if applicable) |
| | 01/24/2021 | Pledgor address; City; State; Zip Code | | \$63.00 | l I |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | | | | | |
| | Date | Full name of pledgor ut-of-state PAC (ID# Future Texas Campaign Fund | #) | Amount of pledge (\$) | In-kind description (if applicable) |
| | 02/23/2021 | Pledgor address; City; State; Zip Code 1317 Orange Blossom Drive Weslaco, TX 78596 | | \$10,000.00 | |
| | | . 8 | | (If travel outside of | Texas, complete Schedule T) |
| - | Principal occup | eation / Job title (See Instructions) | Employer (See In | | |

PLEDGED CONTRIBUTIONS SCHEDULE B PAGE# 1 The Instruction Guide explains how to complete this form. Schedule: 3/8 Report: 5/15 (Ethics Commission filers) 3 ACCOUNT# 2 FILER NAME Ramos, Jacinto Jr. (Mr.) 00000001 4 TOTAL OF UNITEMIZED PLEDGES: 0 0 Amount of In-kind description ☐ out-of-state PAC (ID#_ 5 6 Full name of pledgor Date (if applicable) pledge (\$) Future Texas Campaign Fund \$5,000.00 City; State; Zip Code 04/01/2021 7 Pledgor address; 1317 Orange Blossom Drive Weslaco, TX 78596 (If travel outside of Texas, complete Schedule T) 11 Employer (See Instructions) 10 Principal occupation / Job title (See Instructions) In-kind description Amount of out-of-state PAC (ID#_ Full name of pledgor Date (if applicable) pledge (\$) Garcia, Domingo \$1,000.00 City; State; Zip Code Pledgor address; 05/26/2021 1111 W Mockingbird Lane Dallas, TX 75208 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Domingo Garcia Law Office Attorney In-kind description out-of-state PAC (ID# Amount of Full name of pledgor Date pledge (\$) (if applicable) Garg, Vivek \$1,000.00 City; State; Zip Code 01/05/2021 Pledgor address; 275 Shoreline Drive Ste 200 Redwood City, CA 94065 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Zum Co-Founder In-kind description ■ out-of-state PAC (ID#_ Amount of Date Full name of pledgor (if applicable) pledge (\$) Gaston, Joe \$10.00 04/30/2021 Pledgor address; City; State; Zip Code 2219 New Mill Lane Arlington, TX 76012 (if travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired In-kind description Amount of ut-of-state PAC (ID# Full name of pledgor Date (if applicable) pledge (\$) Gomez, Xavier \$250.00 City; State; Zip Code 01/24/2021 Pledgor address; (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions)

TDD 1-800-735-2989 Austin, Texas 78711-2070 (512)463-5800 P.O.Box 12070 Texas Ethics Commission PLEDGED CONTRIBUTIONS SCHEDULE B PAGE# 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 5/8 Report: 7/15 (Ethics Commission filers) ACCOUNT # 2 FILER NAME Ramos, Jacinto Jr. (Mr.) 00000001 4 \$ TOTAL OF UNITEMIZED PLEDGES: ۵ 4 Amount of In-kind description out-of-state PAC (ID#_ 6 Full name of pledgor 5 Date pledge (\$) (if applicable) Juarez, Pedro \$192.00 City; State; Zip Code 7 Pledgor address; 02/16/2021 (If travel outside of Texas, complete Schedule T) 11 Employer (See Instructions) 10 Principal occupation / Job title (See Instructions) **RJ Williams and Company** Real Estate Agent In-kind description Amount of ■ out-of-state PAC (ID#_ Full name of pledgor Date (if applicable) pledge (\$) La Blanc, Jennifer City; State; Zip Code \$500.00 Pledgor address; 01/08/2021 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) In-kind description Amount of out-of-state PAC (ID#_ Full name of pledgor Date (if applicable) pledge (\$) Linebarger Goggan Blair and Sampson, LLP \$2,000.00 City; State; Zip Code Pledgor address; 02/02/2021 PO Box 17428 Austin, TX 78760 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Attorneys In-kind description Amount of out-of-state PAC (ID#____ Full name of pledgor Date pledge (\$) (if applicable) Linebarger Goggan Blair and Sampson, LLP \$2,000.00 City; State; Zip Code 04/09/2021 Pledgor address; PO Box 17428 Austin, TX 78760 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) **Attorneys** In-kind description Amount of out-of-state PAC (ID#_ Full name of pledgor Date (if applicable) pledge (\$) Martinez, Michael William City; State; Zip Code \$400.00 Pledgor address; 02/23/2021 Austin, TX (If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

Self Employed

Principal occupation / Job title (See Instructions)

Consultant

| 0 | (512)463-5800 | TDD 1-800-735-2989 |
|---|---------------|--------------------|
| | | SCHEDULE B |

| PLEDG | ED CONTRIBUTIONS | | | SCHEDULE B | |
|-------------------------------------|---|--|--------------------------------|--|--|
| The Instruction | อง Guide explains how to complete this form. | 1 PAGE# Schedule: 6/8 | | | |
| 2 FILER NAME | Ramos, Jacinto Jr. (Mr.) | 3 ACCOUNT# 00000001 | (Ethics Commission filers) | | |
| 4 TOTAL (| OF UNITEMIZED PLEDGES: | 4 4 4 | \$ | \$ | |
| 5 Date | 6 Full name of pledgor □ out-of-state PAC (ID# Mwisongo, Jollyn (Mrs.) | | 8 Amount of pledge (\$) | 9 In-kind description (if applicable) | |
| 03/24/2021 | 7 Pledgor address; City; State; Zip Code 2432 River Rock Circle Arlington, TX 76006 | | \$2,500.00 | | |
| | | | (If travel outside of | Texas, complete Schedule T) | |
| 10 Principal occup President and | oation / Job title (See Instructions) d CEO | 11 Employer (See In: Acari Managem | structions) ent Group, Inc. | | |
| Date | Full name of pledgor |) | Amount of pledge (\$) | In-kind description (if applicable) | |
| 01/07/2021 | Pledgor address; City; State; Zip Code 2701 Calder Court Fort Worth, TX 76107 | | \$1,000.00 | | |
| | | | Mary Company | Texas, complete Schedule T) | |
| Principal occup President | pation / Job title (See Instructions) | Employer (See In The Rios Group | | | |
| Date | Full name of pledgor | :) | Amount of pledge (\$) | In-kind description (if applicable) | |
| 03/14/2021 | Pledgor address; City; State; Zip Code 1820 Homan Avenue Fort Worth, TX 76164 | energy and a state of the state | \$100.00 | 1 | |
| | | | (If travel outside of | Texas, complete Schedule T) | |
| Principal occu Art Teacher | pation / Job title (See Instructions) | Employer (See In Fort Worth ISD | | | |
| Date | Full name of pledgor |) | Amount of pledge (\$) | In-kind description (if applicable) | |
| 02/23/2021 | Pledgor address; City; State; Zip Code 9108 Cliffside Drive Cedar Hill, TX 75104 | | \$500.00 | i I | |
| | | | (If travel outside of | Texas, complete Schedule T) | |
| Principal occu | pation / Job title (See Instructions) | Employer (See In Retired | structions) | | |
| Date | Full name of pledgor |) | Amount of pledge (\$) | In-kind description (if applicable) | |
| 04/05/2021 | Pledgor address; City; State; Zip Code 201 Main Street Suite 2500 | | \$500.00 | | |
| | Fort Worth, TX 76102 | | (If travel outside of | Texas, complete Schedule T) | |
| | pation / Job title (See Instructions) | Employer (See In | | | |
| PAC | | | | | |

| Tex | kas Ethics Com | mission | P.O.Box | 12070 | Austin, | Texas 7 | 8711-2070 | (51 | 12)463-5800 | TDD 1-800 | -735-2989 |
|-----|-------------------------------|---|---------------------------|------------------|----------|--------------|--|-----------|----------------------------|---------------------------------|-----------|
| | PLEDG | ED CO | NTRIBU | TIONS | | | | | | SCHEDUL | .E B |
| | The Instruction | n Guide explai | ns how to com | plete this form. | | | | | AGE # Schedule: 8/8 | Report: 10/15 | |
| 2 | FILER NAME | Ramos, Jac | einto Jr. (Mr.) | | | | | 3 A | CCOUNT # | (Ethics Commission | filers) |
| 4 | TOTAL C | OF UNITEN | NZED PLE | OGES: | 4 | ⇔ 4 | , \$ | \$ | Þ | \$ | |
| 5 | Date | 6 Full name Stone, Heid | | out-of-state | PAC (ID# | t |) | | Amount of pledge (\$) | 9 In-kind descr (if applicab | |
| | 01/10/2021 | 7 Pledgor a | ddress; | City; State; 2 | ip Code | | **** | | \$500.00 | | |
| 46 | Principal occup | otion / Joh title | (See Instruction | ne) | | 11 Empl | oyer (See In | | | Texas, complete Sche | dule T) |
| 10 | rincipal occup | audii / Job uue | (Oce manachor | 13) | | | ., | | | | |
| | Date | Full name Thomas, Da | of pledgor vid | out-of-state | PAC (ID# | # |) | | Amount of pledge (\$) | In-kind descr (if applicat | |
| | 01/13/2021 | Pledgor a 201 S Warrer Mobile, AL 3 | Street | City; State; 2 | Zip Code | | ******* | | \$200.00 | | |
| | | | | | | | | (If tra | avel outside of | Texas, complete Sche | dule T) |
| | Principal occup Consultant | eation / Job title | (See Instruction | ns) | | Empl Self | oyer (See In | structi | ons) | | |
| | Date | | of pledgor and Maryann | out-of-state | PAC (ID: | # |) | | Amount of pledge (\$) | In-kind desc (if applicat | |
| | 02/02/2021 | Pledgor a 2120 Milan M Leandere, Ti | leadows Drive | City; State; 2 | Zip Code | | 1555 THE THE STATE OF THE STATE | | \$250.00 | | |
| | | | | | | | | (lf tra | avel outside of | Texas, complete Sche | dule T) |
| | Principal occup Consultant | pation / Job title | (See Instructio | ns) | | | oyer (See In Employed | nstructi | ions) | | |
| | | | | | | | | | | | |

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

OTHER (enter a category not listed above) Fees Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) FILER NAME 1 PAGE# 2 Ramos, Jacinto Jr. (Mr.) 00000001 Schedule: 1/2 Report: 11/15 5 Payee name Date El Chingon Fort Worth 03/15/2021 Zip Code City; State; Amount (\$) Payee address 2800 Bledsoe St 100 \$800.00 Fort Worth, TX 76107 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Campaign Kick Off **PURPOSE** Event Expense OF **EXPENDITURE** Office sought: Office held: 9 Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Date 01/14/2021 Ma2UA, LLC Payee address City; State; Zip Code Amount (\$) 999 S Harwood Street \$4,500.00 Ste 530 Dallas, TX 75201 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Design of Campaign Logos and Videos Advertising Expense OF **EXPENDITURE** Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Pavee name Date Ma2UA, LLC 05/10/2021 State; Payee address City: Zip Code Amount (\$) 999 S Harwood Street \$4.500.00 Ste 530 Dallas, TX 75201 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Campaign Logos and Videos Advertising Expense **OF EXPENDITURE** Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Рауее пате Date Prezi.Co 03/16/2021 State; Zip Code Amount (\$) Payee address City; \$62.90 TX Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Presentations OTHER - Technology OF **EXPENDITURE** Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH

Austin, Texas 78711-2070

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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 | w to complete this form. | | | | |
|--|--|--|--------------------------------|----------------------------------|--|--|--|
| 1 PAGE# | | 2 FILER NAME | | 3 ACCOUNT # (TEC filers) | | | |
| Schedule: 2/2 Re | | Ramos, Jacinto Jr. (Mr.) | | 00000001 | | | |
| 4 Date | 5 Payee name | | | | | | |
| 04/09/2021 | Sam's Club | Other Otates Zin Code | | | | | |
| 6 Amount (\$) | 7 Payee address | | | | | | |
| \$682.09 | 9 6760 Westworth Blvd Westworth Village, TX 76114 | | | | | | |
| | | | | | | | |
| 8 | (a) Category (See | e Categories listed at the top of this schedule) | 137 | of Texas, complete Schedule T) | | | |
| PURPOSE | OTHER - Su | pplies | Campaign Supplies | | | | |
| EXPENDITURE | | | | | | | |
| Complete ONLY if | Candidate / O | fficeholder name | Office sought: | Office held: | | | |
| 9 Complete ONLY if direct expenditure | Carididate / C | ilicendidei fiame | omoo oodg.ii. | 5,,,,,,, | | | |
| to benefit C/OH | | | | | | | |
| Date | Payee name | nt Democratic Destric | | | | | |
| 03/03/2021 | | nty Democratic Party | | | | | |
| Amount (\$) | Payee addres | s City; State; Zip Code | | | | | |
| \$1,000.00 | TX | | | | | | |
| | | | | | | | |
| | Category (See | Categories listed at the top of this schedule) | | of Texas, complete Schedule T) | | | |
| PURPOSE OF | Contribution | s/Donations Made By | Voter Registration | | | | |
| EXPENDITURE | Candidate/O | fficeholder/Political Committee | | | | | |
| Olete ONLY # | Condidate / O | fficeholder name | Office sought: | Office held: | | | |
| Complete ONLY if direct expenditure | Carididate / O | nicendider flame | Office Sought. | Office field. | | | |
| to benefit C/OH | | and the state of t | | | | | |
| Date | Payee name | | | | | | |
| 04/09/2021 | US Post Offi | | | | | | |
| Amount (\$) | Payee addres 2120 Ellis Av | | | | | | |
| \$11.00 | Fort Worth, | | | | | | |
| | , | | | | | | |
| | Category (See | e Categories listed at the top of this schedule) | Description (If travel outside | e of Texas, complete Schedule T) | | | |
| PURPOSE OF | Advertising E | Expense | stamps | | | | |
| EXPENDITURE | | | | | | | |
| Occupieto ONII V # | Condidate / O | fficeholder name | Office sought: | Office held: | | | |
| Complete ONLY if direct expenditure | Candidate / U | meenduer name | Omoo sought. | 550 Holds | | | |
| to benefit C/OH | | | | | | | |
| Date | Payee name | | | | | | |
| 06/07/2021 | US Post Offi | | | · | | | |
| Amount (\$) | Payee addres | • | | | | | |
| \$26.50 | 2120 Ellis Av Fort Worth, | | | | | | |
| | , | | | | | | |
| | Category (See | Categories listed at the top of this schedule) | Description (If travel outside | e of Texas, complete Schedule T) | | | |
| PURPOSE OF | Advertising E | - | Stamps for Campaign ma | iil | | | |
| EXPENDITURE | | | | | | | |
| | | (Cashaldan and | Office cought: | Office held: | | | |
| Complete ONLY if direct expenditure | Candidate / O | fficeholder name | Office sought: | Office field. | | | |
| to benefit C/OH | | | | | | | |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) PAGE# Ramos, Jacinto Jr. (Mr.) 00000001 Schedule: 1/2 Report: 13/15 4 Date Payee name Chuyitos Texican Burgers and Cantina 04/12/2021 6 Amount (\$) Payee address City; State; Zip Code 1521 N Main Street \$164.00 Fort Worth, TX 76164 (b) Description (See instructions regarding type of information required.) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Dinner/Drinks with Community Members Food/Beverage Expense OF EXPENDITURE Date Payee name Chuvitos Texican Burgers and Cantina 06/07/2021 City; State; Zip Code Amount (\$) Pavee address 1521 N Main Street \$838.79 Fort Worth, TX 76164 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Expense Event for North Side Legacy Foundation OF **EXPENDITURE** Date Pavee name 06/28/2021 Esperanza's Payee address City; State; Zip Code Amount (\$) 2122 North Main Street \$51.59 Fort Worth, TX 76164 Category (See Categories listed at the top of this schedule) Description (See instructions regarding type of information required.) **PURPOSE** Brunch with North Side Legacy Foundation Members Food/Beverage Expense OF **EXPENDITURE** Date Payee name La Playa Maya Stockyard 05/27/2021 Amount (\$) Payee address City; State; Zip Code 1540 N Main Street \$229.21 Fort Worth, TX 76106 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Expense Dinner with Community Members OF **EXPENDITURE**

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense 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)

Printing Expense Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Ramos, Jacinto Jr. (Mr.) 0000001 Schedule: 2/2 Report: 14/15 5 Payee name 4 Date Mulhoiland Company 03/10/2021 6 Amount (\$) Payee address City; State; Zip Code 1332 N Main Street \$402.62 Fort Worth, TX 76164 (b) Description (See instructions regarding type of information required.) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Donation to NSHS Golf Club for golf shirts Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Payee name Date North Side High School 06/02/2021 Amount (\$) Pavee address City: State; Zip Code 2211 McKinley Avenue \$500.00 Fort Worth, TX 76164 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Donation to NSHS PTA Adopt a 2021 Senior Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Date Payee name North Side Legacy Foundation 05/24/2021 Payee address City; State; Zip Code Amount (\$) \$536.32 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Sponsor for NSLF Golf Tournament Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Payee name Date 06/07/2021 North Side Legacy Foundation Payee address City; State; Zip Code Amount (\$) \$470.00 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Contributions/Donations Made By NSLF Golf Tournament Donation OF Candidate/Officeholder/Political Committee **EXPENDITURE**

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Ramos, Jacinto Jr. (Mr.) 00000001 Schedule: 3/2 Report: 15/15 4 Date 5 Payee name Raga, Fernando (Mr.) 05/12/2021 6 Amount (\$) Payee address City; State; Zip Code 609 Kentucy Derby Lane \$1,050.00 Fort Worth, TX 76179 (a) Category (See Categories listed at the top of this schedule) (b) Description (See instructions regarding type of information required.) 8 **PURPOSE** Luncheon catered for all NSHS Teachers Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Payee name Date Raga, Fernando (Mr.) 06/09/2021 Zip Code Payee address City; State; Amount (\$) 609 Kentucy Derby Lane \$450.00 Fort Worth, TX 76179 Category (See Categories listed at the top of this schedule) Description (See instructions regarding type of information required.) **PURPOSE** Sponsored luncheon for NSHS Special Education Contributions/Donations Made By OF Candidate/Officeholder/Political Committee Department and Staff **EXPENDITURE** Date Payee name 04/09/2021 Railhead Smokehouse Payee address City; State; Zip Code Amount (\$) 2900 Montgomery Street \$90.00 Fort Worth, TX 76107 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Expense Dinner with Campaign Team **EXPENDITURE** Date Payee name Top Golf 03/09/2021 City; State; Zip Code Payee address Amount (\$) 2201 E 4th Street \$124.00 Fort Worth, TX 76102 Description (See instructions regarding type of information required.) Category (See Categories listed at the top of this schedule) **PURPOSE** Golf/Food/Drinks with community members OTHER - Entertainment **OF** EXPENDITURE