CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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Th	ne C/OH Instruction Guid	DE explains how to complete this form	l- (Eth	COUNT # lics Commission 1	lilers)	2 PAGE# 1 of 19	
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr. Jacinto NICKNAME LAST Cinto Ramos	್ಟರು ಕಾರಣ ಕ ಸಾ	raterates	MI SUFFIX Jr.	OFFICE U	EIVED
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 1817 Harrington Avenue Fort Worth, TX 76164	сіту;	STATE;	ZIP CODE		or Date Postmarked
5	CAMPAIGN	MS/MRS/MR FIRST			мі	Date Processed /_	. /7- /7
	TREASURER NAME	Mrs. Anita					
		NICKNAME LAST Ramos	NGA B 83 8 8	i i kina kana	SUFFIX	7-7	7-/7
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (NO PO BOX PLEASE); 1817 Harrington Avenue Fort Worth, TX 76164	APT / SUITE #;	сіту;	STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER		EXTENSION			
8	REPORT TYPE		efore election	Runoff Exceeded	\$500 limit	appointment (of	ampaign treasurer fficeholder only) ach C/OH - FR)
9	PERIOD	Month Day Year		Month	Day	Year	
	COVERED	07/01/2016	THROUGH		12/31/20 ⁻	16	
10) ELECTION	ELECTION DATE ELE Month Day Year 06/15/2013	ECTION TYPE Primary	X Runoff		General	Special
11	OFFICE	OFFICE HELD (if any) FWISD School Board District 01 District 01		12 OFFICE SO	UGHT (if known)		
	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	13 C/OH NAME Ramos, Jacinto Jr. (Mr.) 14 ACCOUNT # (Ethics Commission filers 00000001				
15 NOTICE FROM This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditure have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to repinformation only if they receive notice of such expenditures.					se expenditures may equired to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	16,145.81
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS		:D	\$	100.00	
	4. TOTAL I	POLITICAL EXPENDITURES		\$	311.62
CONTRIBUTION BALANCE		TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			8,484.56
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD		\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty is true and correct and includes	all informat		
MY MY	LAURA LITTON MY COMM/SSION EXPIRES JUNE 23, 2020 NOTARY ID: 124966812				
		Signature of C	Candidate or	r Officehold	er
	STAMP / SEAL ABO\				(= , 1
Sworn to and subscrit		he said <u>Tacinto Ramos</u> rtify which, witness my hand and seal of office.	, this	s the/	day
Faura Littow Signature of officer administering oath Aberra Littow Board Rest. Title of officer administering oath					

P.O.Box 12070

	The Instruction	GUIDE explains how to complete this form.		1 PAGE# Schedule: 1/8	Report: 3/19	
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ballou Revocable Trust, Frances Cary)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/17/2016	6 Contributor address; City; State; Zip Code 7167 E Rancho Vista Drive Unit 2007 Scottsdale, AZ 85251	**********	\$105.00 		
		Scottsuale, Az 65251		(If trave) outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In			
	Date	Full name of contributor uut-of-state PAC (ID# Brown, Patrick (Mr.)		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 4817 Cole Street Fort Worth, TX 76115		\$25.00		
				(If travel outside of	Texas, complete Schedule T)	
_	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete concaute 1/	
	T THIO PAR GOOG	(2.0.1.7 30.5 1.1.0 (3.50 1.1.0 1.2.1.0 1.2.)	Southside Yout			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 6211 Palo Pinto Avenue Dallas, TX 75214	*****	\$500.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Cardenas, Nelcy	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 916 Lomo Street Fort Worth, TX 76110	**********	\$100.00	! !	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Speech Ther	pation / Job title (See Instructions) apist	Employer (See In FWISD	structions)		
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 4600 Yellow Leaf Drive Fort Worth, TX 76133		\$200.00	 	
	Y			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	Leation / Job title (See Instructions)	Employer (See In Blue Zones Pro	structions)	, , , , , , , , , , , , , , , , , , , ,	
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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8	3 Report: 4/19		
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#) De la Garza, Monica)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/17/2016	6 Contributor address; City; State; Zip Code		\$40.00			
					Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Deleon Campaign Committee)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code PO Box 470743		\$100.00	1		
		Fort Worth, TX 76147		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Justice of the	ation / Job title (See Instructions) Peace	Employer (See In Tarrant County				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 1217 Clover Lane		\$200.00			
		Fort Worth, TX 76107		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Flores, Isabel and Carlos)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 1415 Circle Park Blvd Fort Worth, TX 76164		\$200.00	 		
l				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Engineer	pation / Job title (See Instructions)	Employer (See Ir	nstructions)			
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 1101 NW 18th Street Fort Worth, TX 76164		\$20.00] [
				(If traval autoids of	Texas, complete Schedule T)		
-	Principal occup DACA Specia	 pation / Job title (See Instructions) alist	Employer (See Ir Casa Del Inmig		Texas, complete scriedule 1/		
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P.O.Box 12070

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/8	3 Report: 5/19	
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)	,	3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Garcia, Ruben (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/17/2016	6 Contributor address; City; State; Zip Code		\$50.00	l I	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Constable	ation / Job title (See Instructions)	10 Employer (See In Tarrant County			
_	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 1200 Washington Terrace Fort Worth, TX 76107		\$250.00	Ĺ	
		FOR WORII, 1X 70107		(If travel outside of	Texas, complete Schedule T)	
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Sid Richardson			
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 1606 Homan Avenue Fort Worth, TX 76164		\$20.00	 	
			**		Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions) Mariachi Espuelas de Plata Parents Association Inc.			
	Date	Full name of contributor ut-of-state PAC (ID/ Gonzales, Paulette	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code		\$50.00] 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occur	pation / Job title (See Instructions)	Employer (See Ir	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 7524 Jack Newell Blvd. So. Fort Worth, TX 76118		\$1,000.00	 	
					Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	nstructions)		
-					Electropic Filing Version 3.4	

P.O.Box 12070

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/8	Report: 6/19	
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (II Guillen, Jessika)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/17/2016	6 Contributor address; City; State; Zip Code 7921 Bermejo Road Fort Worth, TX 76112		\$25.00 		
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Artist	ation / Job title (See Instructions)	10 Employer (See In self	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 1101 NW 18th Street Fort Worth, TX 76164		\$20.00		
				(If travel outside of 3	Texas, complete Schedule T)	
	Principal occup Vice Presider	pation / Job title (See Instructions) nt	Employer (See In Casa Del Inmig		, , , , , ,	
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code		\$150.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Owner	pation / Job title (See Instructions)	Employer (See In Fort Worth Vaq			
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code		\$50.00 		
			lgi.		Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 1509 S Lake Street Fort Worth, TX 76104		\$100.00		
_	Principal occur	eation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	Professor	sale ooo aa too muuduunaj	TCU	ou douvila)		

P.O.Box 12070

7	The Instruction	אס Guide explains how to complete this form.	11	1 PAGE # Schedule: 5/8	3 Report: 7/19
2 F	ILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Linebarger Goggan Blair and Sampson, LLP)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
1.	1/17/2016	6 Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760		\$2,500.00	
				<u> </u>	Texas, complete Schedule T)
	rincipal occup Attorneys	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	1/17/2016	Contributor address; City; State; Zip Code 3248 W 7th Street Aprt 433		\$50.00	
		Fort Worth, TX 76107			-
<u> </u>	Principal accum	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	Principal occup	ation / Job title (See instructions)	FWISD	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	1/17/2016	Contributor address; City; State; Zip Code 4900 Terrace Trace Fort Worth, TX 76114		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
F	rincipal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor □ out-of-state PAC (ID# Martinez, Michael (Mr.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	1/17/2016	Contributor address; City; State; Zip Code PO Box 101372 Fort Worth, TX 76185	. 6.0 o 1.11.0 o 2.56.0 b.10.1.	\$100.00	
<u> </u>	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	Tiricipal occup	nation 7 300 title (See matructions)	Limployer (dee in	istructions)	
	Date	Full name of contributor ut-of-state PAC (ID/ Meza, Marlene (Ms.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	1/17/2016	Contributor address; City; State; Zip Code 2912 McKinley Avenue Fort Worth, TX 76164	tandint but distribution in the first of	\$12.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
F	Principal occup Outreach Cod	Dation / Job title (See Instructions) ordinator	Employer (See In YAP - Youth Ac		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

SCHEDULE A

TDD 1-800-735-2989

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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8	3 Report: 8/19		
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Moses, Laura)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/17/2016	6 Contributor address; City; State; Zip Code		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code	(2020) 10 10 10 10 10 10 10 10 10 10 10 10 10	\$50.00	[]		
		Fort Worth, TX			Í		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable) Rental and Catering		
	11/17/2016	Contributor address; City; State; Zip Code 500 NE 23rd Street Fort Worth, TX 76164	(dentro el Pracecel de Alexandro)	\$8,578.81	charges for Fundraiser event on November 17, 2016		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Cowboy	ation / Job title (See Instructions)	Employer (See In Self	structions)			
	Date	Full name of contributor ut-of-state PAC (ID/Mwisongo, Jollyn (Mrs.)		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 2432 River Rock Circle Arlington, TX 76006		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup President and	ation / Job title (See Instructions)	Employer (See In Acari Managem				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 7909 Summit Cove Fort Worth, TX 76179		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In Self Employed	<u> </u>	, ,, <u>_</u>		

P.O.Box 12070

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	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 7/8	3 Report: 9/19	
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Outlaw Home)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/17/2016	6 Contributor address; City; State; Zip Code 204 W Central Avenue Fort Worth, TX 76164		\$200.00		
		Torritorial, 1270104		(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID# Perez, Juan and Nelda (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 9108 Cliffside Cedar Hill, TX 75104		\$50.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Education		Tarrant County			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 2744 5th Avenue	*************	\$100.00		
		Fort Worth, TX 76110		(If travel outside of	Texas, complete Schedule T)	
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>		
	Consultant		Self			
	Date	Full name of contributor ☐ out-of-state PAC (ID# Salinas, Sandra (Mrs.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code		\$50.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#	F 1	Amount of	In-kind contribution	
	-2017	Sims, Theophlous and Nancy (Mr.)		contribution (\$)	description (if applicable)	
	11/17/2016	Contributor address; City; State; Zip Code 4421 Kingsdale Drive		\$50.00		
		4421 Kingsdale Drive Fort Worth, TX 76119			ſ	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
			retired			

Texas Ethics Commission

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	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 8/8 Report: 10/19			
2	FILER NAME	Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# The Ocampo Law Firm)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/17/2016	6 Contributor address; City; State; Zip Code 307 W 7th Street Ste 1225 Fort Worth, TX 76102		\$100.00			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In		Texas, complete Schedule T)		
	Date	Full name of contributor ut-of-state PAC (ID# Trevino, Jennifer (Mrs.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 4917 Robinson Street Fort Worth, TX 76114		\$50.00	<u> </u> 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In UNT Health Sci				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 6113 Westover Drive Fort Worth, TX 76107		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2016	Contributor address; City; State; Zip Code 2300 Primrose Avenue Fort Worth, TX 76111		\$500.00	 		
H	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	, ,	, , , ,	, , ,	•			

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gilts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salarles/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

rees	Printing Expense Office Overhead/Rental Expense OTHEL The Instruction Guide explains how to complete this form.	R (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 1/1 Re	17 =	00000001
4 Date	5 Payee name	1 00000001
08/25/2016	Paz Campaign, Ashley (Mrs.)	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$100.00	1	
ψ.σσ.σσ		
8	(a) Category (See Categories listed at the top of this schedule) (b) Description (If travel	outside of Texas, complete Schedule T)
PURPOSE OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee	BB Campaign
EXPENDITURE	Candidate/Oniceriolder/Folitical Committee	
9 Complete ONLY if	Candidate / Officeholder name Office sought:	Office held:
direct expenditure	Candidate / Office folder frame Office sought.	Office field.
to benefit C/OH		
Date	Payee name	
09/29/2016	WiX.Com	
Amount (\$)	Payee address City; State; Zip Code	
\$111.62	TX	
	Category (See Categories listed at the top of this schedule) Description (If travel	outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense Annual Fee for Can	
OF EXPENDITURE	, minda i oo io oan	.pa.g., //osolic
EXI ENDITORE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:

SCHEDULE 1

EXPENDITURE CATEGORIES

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

Salarles/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)

1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)		
Schedule: 1/1 Report: 12/19 Ramos, Jacinto Jr. (Mr.)			00000001		
	5 Payee name				
07/13/2016	Amazon				
	7 Payee address City; State; Zip Code				
\$118.46	TX				
	174				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (See instructions reg	parding type of information required)		
PURPOSE	OTHER - Educational Reading Material	Equity and Board Governa			
OF EXPENDITURE	•				
Date	Payee name				
11/17/2016	Best Buy #1027				
Amount (\$)	Payee address City; State; Zip Code				
\$54.11	5944 Quebec Street				
	Fort Worth, TX 76135				
	Category (See Categories listed at the top of this schedule)	Description (See instructions re-	garding type of information required.)		
PURPOSE	OTHER - Card Square	Card reader for donations			
OF EXPENDITURE		November 17, 2016			
EXI ENDITORE		l .			
Date	Payee name				
12/07/2016	Booster Diamond Hill HIgh School				
Amount (\$)	Payee address City; State; Zip Code				
\$120.00	TV				
	TX				
	Category (See Categories listed at the top of this schedule)	Description (See instructions re	garding type of information required.)		
PURPOSE		Sponsorship for Golf Tour			
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	High School			
EXI ENDITORE					
		1			
Date	Payee name				
09/09/2016	Buffalo Bros				
Amount (\$)	Payee address City; State; Zip Code				
\$103.00	3015 University Fort Worth, TX 76109				
	FOIL WORLIN, TA 70109				
	Category (See Categories listed at the top of this schedule)	Description (See instructions re	garding type of information required.)		
PURPOSE	Food/Beverage Expense	My Brother's Keeper dinner			
OF EXPENDITURE		,			

SCHEDULE 1

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/Fundralsing 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)

1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)	
Schedule: 2/1 Report: 13/19 Ramos, Jacinto Jr. (Mr.)				00000001	
4 Date	5 Payee name				
07/22/2016	Chris Madrid	ds			
6 Amount (\$)	7 Payee addres	-			
\$68.28	1900 Blancho Road				
	San Antonio, TX 78212				
8	(a) Cotogory (So	o Cotogorios listad at the ten of this cahadule)	(b) Description (See instructions re	agarding type of information required)	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description (See instructions regarding type of information required.) Mariachi Dinner				
OF EXPENDITURE					
EXI ENDITORE					
Date	Payee name				
09/16/2016	Hispano Exito				
Amount (\$)	Payee address City; State; Zip Code				
\$250.00	2200 NE 28th Street				
}	Fort Worth,	1X /6106			
	Category (So	e Categories listed at the top of this schedule)	Description (See instructions re	egarding type of information required.)	
PURPOSE			donation	garding type of information required.)	
OF EXPENDITURE	Candidate/C	s/Donations Made By Officeholder/Political Committee			
EXI ENDITORE					
Date	Payee name		''		
09/07/2016	JB Junior's				
Amount (\$)	Payee addres	• • • • • • • • • • • • • • • • • • • •			
\$34.00	1426 NW 25 Fort Worth,				
	Tore worth,	17.70104			
	Category (Se	ee Categories listed at the top of this schedule)	Description (See instructions re	egarding type of information required.)	
PURPOSE		age Expense	Lunch with First Tee	, ,	
OF EXPENDITURE					
Date	Payee name	come magazaccia processora			
09/28/2016		aya Stockyard			
Amount (\$)	Payee addres				
\$28.00	1540 N Mai Fort Worth,	n Street TX 76106			
	Category (Se	ee Categories listed at the top of this schedule)		egarding type of information required.)	
PURPOSE	Food/Bever	age Expense	Lunch with Dr. Beatty Tar	retton	
EXPENDITURE					
1					

SCHEDULE I

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Gilis/Awaros/Memorial Ex 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/Polltical Committee OTHER (enter a category not listed above)

1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)		
Schedule: 3/1 Re				
4 Date	5 Payee name			
10/17/2016	North Side Legacy Foundation			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$370.00				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)		
PURPOSE	Contributions/Donations Made By Candidate/Officeholder/Political Committee			
OF EXPENDITURE	Candidate/Officeholder/Political Committee			
Date	Payee name			
11/15/2016	Norton			
Amount (\$)	Payee address City; State; Zip Code			
\$43.29	TV			
	TX			
	Cotomony (One Ontomorina Habard at the Arm of their archaelds)	Description (Control to the Control		
PURPOSE	Category (See Categories listed at the top of this schedule) OTHER - Computer Program	Description (See instructions regarding type of information required.) Anti Virus Program purchased for Campaign laptop		
OF EXPENDITURE	OTTIET Computer Flogram	And virus i rogicin parchased for equipaginaplop		
EXPENDITURE				
Date	Payee name			
12/23/2016	Panchos Mexican Buffett			
Amount (\$)	Payee address City; State; Zip Code			
\$44.00	2434 Jacksboro Hwy			
,	Fort Worth, TX 76164			
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)		
OF	Food/Beverage Expense	Lunch with TCU Spark		
EXPENDITURE				
Date 11/17/2016	Payee name			
11/17/2016	Rachel Delira			
11/17/2016 Amount (\$)	Rachel Delira Payee address City; State; Zip Code			
11/17/2016	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive			
11/17/2016 Amount (\$)	Rachel Delira Payee address City; State; Zip Code			
11/17/2016 Amount (\$) \$150.00	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive Hurst, TX 76053	Description (See instructions regarding type of information required.)		
11/17/2016 Amount (\$) \$150.00	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive	Description (See instructions regarding type of information required.) photographer at fundraising events		
11/17/2016 Amount (\$) \$150.00	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive Hurst, TX 76053 Category (See Categories listed at the top of this schedule)			
11/17/2016 Amount (\$) \$150.00 PURPOSE OF	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive Hurst, TX 76053 Category (See Categories listed at the top of this schedule)			
11/17/2016 Amount (\$) \$150.00 PURPOSE OF	Rachel Delira Payee address City; State; Zip Code 3208 Riverlakes Drive Hurst, TX 76053 Category (See Categories listed at the top of this schedule)			

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)

1 PAGE # Schedule: 4/1 Report: 15/19		2 FILER NAME Ramos, Jacinto Jr. (Mr.)		3 ACCOUNT # (TEC filers)	
4 Date	1000001				
07/18/2016	5 Payee name				
6 Amount (\$)	Raga, Fernando (Mr.)				
	7 Payee address City; State; Zip Code				
\$60.00	609 Kentucy Derby Lane Fort Worth, TX 76179				
8	(a) Category (See	e Categories listed at the top of this schedule)	(h) Description (See instructions	regarding type of information required.)	
PURPOSE		age Expense	Catering for JP Elder Mu		
OF EXPENDITURE	1 334 2370	.go _npones	and Students	ia moai io i i moo otali	
EXPENDITURE					
Deta	l Davis see				
Date	Payee name Rage Fernando (Mr.)				
07/18/2016	Raga, Fernando (Mr.)				
Amount (\$)	Payee address City; State; Zip Code				
\$75.00	609 Kentucy Derby Lane Fort Worth, TX 76179				
	Category (Se	e Categories listed at the top of this schedule)	Description (See instructions	regarding type of information required.)	
PURPOSE		age Expense	Church Youth Group CIA		
OF EXPENDITURE		•	donation		
EXI ENDITORE					
			l.		
			ľ		
Date	Payee name				
09/09/2016	Raga, Ferna	ındo (Mr.)			
Amount (\$)	Payee addres	s City; State; Zip Code			
\$400.00	609 Kentucy	Derby Lane TX 76179			
¥ 155.55	Fort Worth,	TX 76179			
DUDDOOF		e Categories listed at the top of this schedule)		regarding type of information required.)	
PURPOSE OF	Food/Bevera	age Expense	Payment for food/bevera	ge expense for National	
EXPENDITURE			Hispanic Institute Family	Dinner	
			1		
Date	Payee name				
11/04/2016	Raga, Ferna			n	
Amount (\$)	Payee addres			7	
\$100.00	609 Kentucy	Derby Lane TX 76179			
	Fort Worth,	TX /6179			
PURPOSE		e Categories listed at the top of this schedule)		regarding type of information required.)	
OF	Food/Bevera	age Expense	Catering for NS Football	team dinner	
I = 3.75 = 3.15 : 1 = 3					
EXPENDITURE					
EXPENDITURE					
EXPENDITURE					

SCHEDULE |

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)

·		2 FILER NAME		3 ACCOUNT # (TEC filers)	
Schedule: 5/1 Re				00000001	
4 Date 09/26/2016	5 Payee name Ronald McDonald House				
6 Amount (\$)	7 Payee address				
\$50.00	rayee address City, State, Zip Code				
ψ50.00	Fort Worth, TX				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description (See instructions regarding type of information required.)				
OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Donation to Ronald McDonald House				
EXPENDITURE	Sandidato/ Sincondatin Sintida Sommittee				
Date	Payes name				
09/02/2016	Payee name Sam's Club				
Amount (\$)	Payee address City; State; Zip Code				
\$110.61	6760 Westworth Blvd				
	Westworth Village, TX 76114				
	Catagory (Car	Ochocovica 1:-61	Description (O i t		
PURPOSE	Food/Bevera	Categories listed at the top of this schedule)		parding type of information required.)	
OF EXPENDITURE	. 000/2010/0	go 2/poi/00	Food/Snacks and paper so Side HS Football Team	ppiloo providos to rterti	
EXI ENDITORE					
Date	Payee name				
10/31/2016	Sam's Club				
Amount (\$)	Payee address City; State; Zip Code				
\$43.69	6760 Westworth Blvd Westworth Village, TX 76114				
		5 ,			
	Category (See	Categories listed at the top of this schedule)	Description (See instructions reg	garding type of information required.)	
PURPOSE OF	Food/Bevera	ge Expense	Candy purchase for North	Side Cheerleaders	
EXPENDITURE					
Date	Payes name				
10/25/2016	Payee name Sanchez, Da	niel			
Amount (\$)	Payee address				
\$138.25	2106 Cancur	n Drive			
,,,,,,,,	Mansfield, T	X 76063			
	051	0-1	Departation (D. 11.11		
PURPOSE		c Categories listed at the top of this schedule) undraising Expense	Description (See instructions reg	garding type of information required.)	
OF EXPENDITURE	Constation	and along Expense	- anaraison event and expe	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
CAF LINDITORE					

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 Sollcitation/Fundralsing 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 COIDE explains now to				
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)			
	hedule: 6/1 Report: 17/19 Ramos, Jacinto Jr. (Mr.) 00000001				
4 Date	5 Payee name				
12/05/2016	Sanchez, Daniel				
6 Amount (\$)	7 Payee address City; State; Zip Code				
\$100.00	2106 Cancun Drive				
	Mansfield, TX 76063				
		Y			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)			
OF	Solicitation/Fundraising Expense	Fundraiser event coordinator			
EXPENDITURE					
Date	Payee name				
11/21/2016	Staples				
Amount (\$)	Payee address City; State; Zip Code				
\$106.38	6313 Lake Worth Blvd Lake Worth, TX 76135				
	Lake Worth, 17/0100				
	Category (See Categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)			
PURPOSE	OTHER - supplies	paper supplies for campaign			
OF EXPENDITURE	OTTEL CORPINS	paper supplies for sumpargri			
EXPENDITURE					
Date	Payee name				
12/13/2016	Texas Association of School Boards TASB				
Amount (\$)	Payee address City; State; Zip Code				
\$50.00	ony, state, ap code				
\$50.00	TX				
	Category (See Categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)			
PURPOSE OF	OTHER - Online Training	Online Training for TASB			
EXPENDITURE					
Date	Payee name				
12/14/2016	Texas Association of School Boards TASB				
Amount (\$)	Payee address City; State; Zip Code				
\$25.00	TV				
	TX				
	Catagory (O. C.	I Providence (Declaration of the Control of the Con			
PURPOSE	Category (See Categories listed at the top of this schedule) OTHER - Online Training	Description (See Instructions regarding type of information required.) Online training for TASB			
OF	OTTER - Offille Halling	Chimie training for TAGE			
EXPENDITURE					

(512)463-5800 TDD 1-800-735-2989

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

P.O.Box 12070

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)

1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC				
Schedule: 7/1 Re	D	0000001		
4 Date	5 Payee name			
11/14/2016	US Post Office			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$160.00	2120 Ellis Ave			
	Fort Worth, TX 76164			
_	(2) Octobro (0) Octobro (1)	In Description (Control of the Control of the Contr		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) OTHER - Mail box for campaign	(b) Description (See instructions regarding type of Information required.) Yearly fee for PO Box used for Campaign		
OF EXPENDITURE	OTTLET Wall box for campaign	really lee for the Box asea for Gampaign		
EXPENDITORE				
Date	Payee name			
09/06/2016	Walmart			
Amount (\$)	Payee address City; State; Zip Code			
\$190.36	6770 Westworth Blvd			
	Westworth Village, TX 76114			
	Category (See Categories listed at the top of this schedule)	Description (O i t till		
PURPOSE	Food/Beverage Expense	Description (See instructions regarding type of information required.) food/snack and paper supplies for		
OF EXPENDITURE	1 000/2010/dg0 2/xp0//00	football/cheerleading teams		
LAFEINDITORE				
Date	Payee name			
09/12/2016	Walmart			
Amount (\$)	Payee address City; State; Zip Code			
\$145.57	6770 Westworth Blvd Westworth Village, TX 76114			
	Westworth Village, 17.70114			
	Category (See Categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)		
PURPOSE	Food/Beverage Expense	food/drinks for campaign team meeting with		
OF EXPENDITURE		volunteers		
Date	Payee name			
11/14/2016	Walmart Character 75 Onds			
Amount (\$)	Payee address City; State; Zip Code			
\$11.86	3851 Airport Frwy Fort Worth, TX 76111			
	Category (See Categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)		
PURPOSE OF	OTHER - Supplies	Supplies for fundraiser event on November 17, 2016		
EXPENDITURE				

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/Fundralsing 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)

1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)	
Schedule: 8/1 Report: 19/19 Ramos, Jacinto Jr. (Mr.)			00000001		
4 Date	5 Payee name				
11/15/2016	Walmart				
6 Amount (\$)	7 Payee address City; State; Zip Code				
\$27.00	3851 Airport	3851 Airport Frwy			
	Fort Worth,	Fort Worth, TX 76111			
	(-) 0-1 (0	0	(h) Description (Co. Industrian	lin - Augo of information required)	
8 PURPOSE	OTHER - sur	e Categories listed at the top of this schedule)	(b) Description (See instructions readapter purchased for fundamental contents.)		
OF	OTTLA - SU	opiles	2016	sidisor event ivev. 17,	
EXPENDITURE					
Date	Payee name				
11/08/2016	Wells Fargo Bank				
Amount (\$)	Payee address City; State; Zip Code				
\$7.00					
	Fort Worth,	TX 76164			
PURPOSE		e Categories listed at the top of this schedule)		garding type of information required.)	
OF	Fees		Monthly Service Fee		
EXPENDITURE					
Date	Daves name				
11/21/2016	Payee name White Elepha	ant Saloon			
Amount (\$)	Payee addres				
\$40.00		, ciaic,p cccc			
ψ+0.00					
PURPOSE		e Categories listed at the top of this schedule)		garding type of information required.)	
OF	Food/Bevera	ige Expense	Beverage expense with co	ommunity members	
EXPENDITURE					
II.					