

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

|   |   |   |                            |
|---|---|---|----------------------------|
| <b>The C/OH INSTRUCTION GUIDE explains how to complete this form.</b>                               |   | <b>1 ACCOUNT #</b><br>(Ethics Commission filers)<br>00000001  | <b>2 PAGE #</b><br>1 of 14 |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR<br>Mr.  | FIRST<br>Jacinto  | MI<br>MI                   |
|   | NICKNAME<br>Cinto   | LAST<br>Ramos   | SUFFIX<br>Jr.              |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1817 Harrington Avenue<br>Fort Worth, TX 76164  |   |                            |
|   | <div style="border: 1px solid black; padding: 5px;"> <b>OFFICE USE ONLY</b><br/>                 Date Received <b>RECEIVED</b><br/> <b>JUL 15, 2015</b><br/> <i>Board of Education</i><br/> <i>by J. Little</i><br/>                 Date <u>Hand-delivered</u> or Date Postmarked<br/> <b>7-15-15</b><br/>                 Receipt #                      Amount<br/>                 Date Processed <b>7-15-15</b><br/>                 Date Imaged <b>7-15-15</b> </div> |   |                            |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR<br>Mrs.   | FIRST<br>Anita  | MI<br>MI                   |
|   | NICKNAME  | LAST<br>Ramos   | SUFFIX                     |
| <b>6 CAMPAIGN TREASURER ADDRESS</b><br>(Residence or business)                                      | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>1817 Harrington Avenue<br>Fort Worth, TX 76164   |   |                            |
| <b>7 CAMPAIGN TREASURER PHONE</b>   | AREA CODE   | PHONE NUMBER  | EXTENSION                  |
| <b>8 REPORT TYPE</b>  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)<br><input checked="" 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)   |   |                            |
| <b>9 PERIOD COVERED</b>   | Month      Day      Year                                      Month      Day      Year<br>01/01/2015                                      THROUGH                                      06/30/2015   |   |                            |
| <b>10 ELECTION</b>  | ELECTION DATE<br>Month      Day      Year<br>06/15/2013   | ELECTION TYPE<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |                            |
| <b>11 OFFICE</b>  | OFFICE HELD (if any)<br>FWISD District 1  | <b>12 OFFICE SOUGHT (if known)</b>  |                            |
| <b>GO TO PAGE 2</b>   |   |   |                            |

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

13 C/OH NAME Ramos, Jacinto Jr. (Mr.)

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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

|   |    |        |
|---|----|--------|
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 974.00 |
|---|----|--------|

|  |    |          |
|--|----|----------|
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 8,149.00 |
|--|----|----------|

EXPENDITURE TOTALS

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

|                                 |    |          |
|---------------------------------|----|----------|
| 4. TOTAL POLITICAL EXPENDITURES | \$ | 1,200.88 |
|---------------------------------|----|----------|

CONTRIBUTION BALANCE

|  |    |          |
|--|----|----------|
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 1,458.72 |
|--|----|----------|

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.

Anita D. Ramos

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jacinto Ramos, Jr., this the 15th day of July, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Laura Litton

Print name of officer administering oath

Board Asst.

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 #<br>Schedule: 1/6 Report: 3/14               |  |
| 2 FILER NAME Ramos, Jacinto Jr. (Mr.)                                       |  | 3 ACCOUNT # (Ethics Commission filers)<br>00000001   |  |
| 4 Date<br><br>06/25/2015  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Cabello, Mario and Dianna (Mr.)<br><br>6 Contributor address; City; State; Zip Code<br>1025 Hardwick Trail<br>Keller, TX 76248 | 7 Amount of contribution (\$)<br><br>\$40.00         | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions)<br>Educator           |  | 10 Employer (See Instructions)<br>FWISD              |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Captured Moments Photography<br><br>Contributor address; City; State; Zip Code<br>PO Box 164146<br>Fort Worth, TX 76137          | Amount of contribution (\$)<br><br>\$100.00          | In-kind contribution description (if applicable)   |
| Principal occupation / Job title (See Instructions)<br>Owner                |  | Employer (See Instructions)                          |  |
| Date<br><br>06/22/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Deleon Campaign Committee<br><br>Contributor address; City; State; Zip Code<br>PO Box 470743<br>Fort Worth, TX 76147             | Amount of contribution (\$)<br><br>\$100.00          | In-kind contribution description (if applicable)   |
| Principal occupation / Job title (See Instructions)<br>Justice of the Peace |  | Employer (See Instructions)<br>Tarrant County        |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Fernandez, Robert (Mr.)<br><br>Contributor address; City; State; Zip Code<br>2305 Colonial Parkway<br>Fort Worth, TX 76109       | Amount of contribution (\$)<br><br>\$100.00          | In-kind contribution description (if applicable)   |
| Principal occupation / Job title (See Instructions)<br>CPA                  |  | Employer (See Instructions)<br>Fernandez and Company |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Garcia, Ruben (Mr.)<br><br>Contributor address; City; State; Zip Code<br>1000 Boxcar Boulevard<br>Fort Worth, TX 76106           | Amount of contribution (\$)<br><br>\$100.00          | In-kind contribution description (if applicable)   |
| Principal occupation / Job title (See Instructions)<br>Constable            |  | Employer (See Instructions)<br>Tarrant Conty         |  |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

|   |   |   |   |
|---|---|---|---|
| <b>The INSTRUCTION GUIDE explains how to complete this form.</b>                    |   | <b>1 PAGE #</b><br>Schedule: 2/6 Report: 4/14                   |   |
| <b>2 FILER NAME</b> Ramos, Jacinto Jr. (Mr.)  |   | <b>3 ACCOUNT #</b> (Ethics Commission filers)<br>00000001       |   |
| <b>4 Date</b><br><br>06/25/2015   | <b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Garcia, Sandra (Ms.)<br><hr/> <b>6 Contributor address; City; State; Zip Code</b><br>6200 Pershing Avenue<br>119<br>Fort Worth, TX 76116         | <b>7 Amount of contribution (\$)</b><br><br>\$25.00             | <b>8 In-kind contribution description (if applicable)</b><br><br><br><input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| <b>9 Principal occupation / Job title (See Instructions)</b><br>Manager             |   | <b>10 Employer (See Instructions)</b><br>City of Fort Worth     |   |
| <b>Date</b><br><br>06/25/2015   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Garcia-Lopez, Norma (Ms.)<br><hr/> <b>Contributor address; City; State; Zip Code</b><br>5350 Fossil Creek Blvd<br>Apt 215<br>Haltom City, TX 76137 | <b>Amount of contribution (\$)</b><br><br>\$25.00               | <b>In-kind contribution description (if applicable)</b><br><br><br><input type="checkbox"/> (If travel outside of Texas, complete Schedule T)   |
| <b>Principal occupation / Job title (See Instructions)</b>                          |   | <b>Employer (See Instructions)</b>                              |   |
| <b>Date</b><br><br>06/25/2015   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Geren, Pete and Beckie (Mr.)<br><hr/> <b>Contributor address; City; State; Zip Code</b><br>1200 Washington Terrace<br>Fort Worth, TX 76107         | <b>Amount of contribution (\$)</b><br><br>\$100.00              | <b>In-kind contribution description (if applicable)</b><br><br><br><input type="checkbox"/> (If travel outside of Texas, complete Schedule T)   |
| <b>Principal occupation / Job title (See Instructions)</b><br>President             |   | <b>Employer (See Instructions)</b><br>Sid Richardson Foundation |   |
| <b>Date</b><br><br>06/25/2015   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Gutierrez, Felipe (Mr.)<br><hr/> <b>Contributor address; City; State; Zip Code</b><br>429 College Avenue<br>419<br>Fort Worth, TX 76107            | <b>Amount of contribution (\$)</b><br><br>\$100.00              | <b>In-kind contribution description (if applicable)</b><br><br><br><input type="checkbox"/> (If travel outside of Texas, complete Schedule T)   |
| <b>Principal occupation / Job title (See Instructions)</b><br>Customer Service Tech |   | <b>Employer (See Instructions)</b><br>AT & T                    |   |
| <b>Date</b><br><br>05/26/2015   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Hirt, Cathy and Darrell (Mrs.)<br><hr/> <b>Contributor address; City; State; Zip Code</b><br>1201 Hillcrest<br>Fort Worth, TX 76107                | <b>Amount of contribution (\$)</b><br><br>\$100.00              | <b>In-kind contribution description (if applicable)</b><br><br><br><input type="checkbox"/> (If travel outside of Texas, complete Schedule T)   |
| <b>Principal occupation / Job title (See Instructions)</b>                          |   | <b>Employer (See Instructions)</b><br>Retired                   |   |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

|  |  |  |                                       |  |  |
|--|--|--|---------------------------------------|--|--|
| The INSTRUCTION GUIDE explains how to complete this form.          |  |  |                                       | 1 PAGE #<br>Schedule: 3/6 Report: 5/14   |  |
| 2 FILER NAME Ramos, Jacinto Jr. (Mr.)                              |  |  |                                       | 3 ACCOUNT # (Ethics Commission filers)<br>00000001   |  |
| 4 Date<br><br>06/25/2015   |  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Kimberling, Cheryl (Dr.)               |                                       | 7 Amount of contribution (\$)   8 In-kind contribution description (if applicable)<br><br>\$100.00 |  |
|  |  | 6 Contributor address; City; State; Zip Code<br>2881 Manorwood Trail<br>Fort Worth, TX 76109                               |                                       |  |  |
|  |  |  |                                       | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>                         |  |
| 9 Principal occupation / Job title (See Instructions)<br>President |  |  | 10 Employer (See Instructions)<br>MCA |  |  |
| Date<br><br>06/25/2015   |  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Linebarger Goggan Blair and Sampson, LLP |                                       | Amount of contribution (\$)   In-kind contribution description (if applicable)<br><br>\$2,500.00   |  |
|  |  | Contributor address; City; State; Zip Code<br>PO Box 17428<br>Austin, TX 78760   |                                       |  |  |
|  |  |  |                                       | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>                         |  |
| Principal occupation / Job title (See Instructions)<br>Attorneys   |  |  | Employer (See Instructions)           |  |  |
| Date<br><br>06/25/2015   |  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Montalvo, Alexander (Mr.)                |                                       | Amount of contribution (\$)   In-kind contribution description (if applicable)<br><br>\$20.00      |  |
|  |  | Contributor address; City; State; Zip Code<br>9105 Windrash Drive N<br>405<br>Fort Worth, TX 76116                         |                                       |  |  |
|  |  |  |                                       | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>                         |  |
| Principal occupation / Job title (See Instructions)<br>Consultant  |  |  | Employer (See Instructions)<br>CGI    |  |  |
| Date<br><br>06/19/2015   |  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Murrin, Steve Jr. (Mr.)                  |                                       | Amount of contribution (\$)   In-kind contribution description (if applicable)<br><br>\$2,500.00   |  |
|  |  | Contributor address; City; State; Zip Code<br>500 NE 23rd Street<br>Fort Worth, TX 76164                                   |                                       |  |  |
|  |  |  |                                       | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>                         |  |
| Principal occupation / Job title (See Instructions)<br>Cowboy      |  |  | Employer (See Instructions)<br>Self   |  |  |
| Date<br><br>06/25/2015   |  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Navarro, Ernesto and Ludivina (Mr.)      |                                       | Amount of contribution (\$)   In-kind contribution description (if applicable)<br><br>\$30.00      |  |
|  |  | Contributor address; City; State; Zip Code<br>1144 Crest Meadow<br>Fort Worth, TX 76052                                    |                                       |  |  |
|  |  |  |                                       | (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 #<br>Schedule: 4/6 Report: 6/14                |  |
| 2 FILER NAME Ramos, Jacinto Jr. (Mr.)  |   |   | 3 ACCOUNT # (Ethics Commission filers)<br>00000001    |  |
| 4 Date<br><br>06/25/2015   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Navejar, Rosa (Ms.)<br><br>6 Contributor address; City; State; Zip Code<br>2701 Calder Court<br>Fort Worth, TX 76107      | 7 Amount of contribution (\$)<br><br>\$100.00 | 8 In-kind contribution description (if applicable)    |  |
| 9 Principal occupation / Job title (See Instructions)<br>President               |   |   | 10 Employer (See Instructions)<br>The Rios Group      |  |
| Date<br><br>06/25/2015   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Nowlan, Olga (Mrs.)<br><br>Contributor address; City; State; Zip Code<br>1504 White Willow Lane<br>Arlington, TX 76002      | Amount of contribution (\$)<br><br>\$40.00    | In-kind contribution description (if applicable)      |  |
| Principal occupation / Job title (See Instructions)                              |   |   | Employer (See Instructions)                           |  |
| Date<br><br>06/24/2015   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Paz, Ashley and Eric (Mrs.)<br><br>Contributor address; City; State; Zip Code<br>2000 Hurley Avenue<br>Fort Worth, TX 76110 | Amount of contribution (\$)<br><br>\$100.00   | In-kind contribution description (if applicable)      |  |
| Principal occupation / Job title (See Instructions)                              |   |   | Employer (See Instructions)<br>Self                   |  |
| Date<br><br>06/25/2015   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Perales, Gladys (Ms.)<br><br>Contributor address; City; State; Zip Code<br>2108 Columbus Avenue<br>Fort Worth, TX 76164     | Amount of contribution (\$)<br><br>\$50.00    | In-kind contribution description (if applicable)      |  |
| Principal occupation / Job title (See Instructions)<br>Staff Accountant/HR Admin |   |   | Employer (See Instructions)<br>Kannegiesser Inc.      |  |
| Date<br><br>06/25/2015   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Perez, Jonathan (Mr.)<br><br>Contributor address; City; State; Zip Code<br>6933 Meadow Way Lane<br>Fort Worth, TX 76179     | Amount of contribution (\$)<br><br>\$100.00   | In-kind contribution description (if applicable)      |  |
| Principal occupation / Job title (See Instructions)<br>Education                 |   |   | Employer (See Instructions)<br>Tarrant County College |  |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form.                     |  |  | 1 PAGE #<br>Schedule: 5/6 Report: 7/14             |  |  |
| 2 FILER NAME Ramos, Jacinto Jr. (Mr.)   |  |  | 3 ACCOUNT # (Ethics Commission filers)<br>00000001 |  |  |
| 4 Date<br><br>06/25/2015  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Ramon Romero Jr. Campaign<br><br>6 Contributor address; City; State; Zip Code<br>421 Conner Avenue<br>Fort Worth, TX 76105       |  | 7 Amount of contribution (\$)<br><br>\$100.00      | 8 In-kind contribution description (if applicable)<br><br><br><br><br><br><br><br><br><br>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>   |  |
| 9 Principal occupation / Job title (See Instructions)<br>State Representative |  |  | 10 Employer (See Instructions)                     |  |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Reservoir Rest. Inc.<br><br>Contributor address; City; State; Zip Code<br>1001 Foch Street<br>Fort Worth, TX 76107                 |  | Amount of contribution (\$)<br><br>\$425.00        | In-kind contribution description (if applicable)<br>Private Party<br>Reservation for<br>Fundraiser Party<br><br><br><br><br><br><br><br><br><br>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |  |
| Principal occupation / Job title (See Instructions)                           |  |  | Employer (See Instructions)                        |  |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Rogers, Chris (Mr.)<br><br>Contributor address; City; State; Zip Code<br>129 Shady Trak<br>San Antonio, TX 78232                   |  | Amount of contribution (\$)<br><br>\$100.00        | In-kind contribution description (if applicable)<br><br><br><br><br><br><br><br><br><br>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>   |  |
| Principal occupation / Job title (See Instructions)<br>Contractor             |  |  | Employer (See Instructions)<br>Sodexo              |  |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Romero, Jose (Mr.)<br><br>Contributor address; City; State; Zip Code<br>2501 Mitchell Blvd<br>Fort Worth, TX 76105                 |  | Amount of contribution (\$)<br><br>\$50.00         | In-kind contribution description (if applicable)<br><br><br><br><br><br><br><br><br><br>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>   |  |
| Principal occupation / Job title (See Instructions)<br>Educator               |  |  | Employer (See Instructions)<br>FWISD               |  |  |
| Date<br><br>06/25/2015  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Sims, Theophlous and Nancy (Mr.)<br><br>Contributor address; City; State; Zip Code<br>4421 Kingsdale Drive<br>Fort Worth, TX 76119 |  | Amount of contribution (\$)<br><br>\$100.00        | In-kind contribution description (if applicable)<br><br><br><br><br><br><br><br><br><br>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>   |  |
| Principal occupation / Job title (See Instructions)                           |  |  | Employer (See Instructions)<br>retired             |  |  |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

|  |  |   |  |
|--|--|---|--|
| <b>The INSTRUCTION GUIDE explains how to complete this form.</b> |  | <b>1 PAGE #</b><br>Schedule: 6/6 Report: 8/14             |  |
| <b>2 FILER NAME</b> Ramos, Jacinto Jr. (Mr.)                     |  | <b>3 ACCOUNT #</b> (Ethics Commission filers)<br>00000001 |  |
| <b>4 Date</b><br><br>06/25/2015                                  | <b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Sutherland, Ann (Mrs.)<br><hr style="border-top: 1px dotted black;"/> <b>6 Contributor address; City; State; Zip Code</b><br>4028 Aragon Drive<br>Fort Worth, TX 76133  | <b>7 Amount of contribution (\$)</b><br><br>\$50.00       | <b>8 In-kind contribution description (if applicable)</b><br><br><br><br><br><b>(If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> |
| <b>9 Principal occupation / Job title (See Instructions)</b>     |  | <b>10 Employer (See Instructions)</b><br>Retired          |  |
| <b>Date</b><br><br>06/25/2015                                    | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____)<br>Torres, Kenneth (Mr.)<br><hr style="border-top: 1px dotted black;"/> <b>Contributor address; City; State; Zip Code</b><br>5803 Weathered Trail<br>Grand Prairie, TX 75052 | <b>Amount of contribution (\$)</b><br><br>\$20.00         | <b>In-kind contribution description (if applicable)</b><br><br><br><br><br><b>(If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/>   |
| <b>Principal occupation / Job title (See Instructions)</b>       |  | <b>Employer (See Instructions)</b>                        |  |



# 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.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>1 PAGE #</b><br>Schedule: 1/3 Report: 9/14              |  | <b>2 FILER NAME</b><br>Ramos, Jacinto Jr. (Mr.)  |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00000001  |  |
| <b>4 Date</b><br>01/22/2015                                |  | <b>5 Payee name</b><br>Campaign Partner Online   |  |  |  |
| <b>6 Amount (\$)</b><br>\$29.00                            |  | <b>7 Payee address</b> City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420        |  |  |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                            |  | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Advertising Expense |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Hosting |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought: Office held:  |  |
| <b>Date</b><br>02/23/2015                                  |  | <b>Payee name</b><br>Campaign Partner Online   |  |  |  |
| <b>Amount (\$)</b><br>\$29.00                              |  | <b>Payee address</b> City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420          |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Hosting     |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought: Office held:  |  |
| <b>Date</b><br>03/23/2015                                  |  | <b>Payee name</b><br>Campaign Partner Online   |  |  |  |
| <b>Amount (\$)</b><br>\$29.00                              |  | <b>Payee address</b> City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420          |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Hosting     |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought: Office held:  |  |
| <b>Date</b><br>04/22/2015                                  |  | <b>Payee name</b><br>Campaign Partner Online   |  |  |  |
| <b>Amount (\$)</b><br>\$29.00                              |  | <b>Payee address</b> City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420          |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Hosting     |  |
| Complete <b>ONLY</b> 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.

|  |  |   |  |   |  |
|--|--|---|--|---|--|
| <b>1 PAGE #</b><br>Schedule: 2/3 Report: 10/14             |  | <b>2 FILER NAME</b><br>Ramos, Jacinto Jr. (Mr.)   |  | <b>3 ACCOUNT #</b> (TEC filers)<br>00000001   |  |
| <b>4 Date</b><br>05/22/2015                                |  | <b>5 Payee name</b><br>Campaign Partner Online  |  |   |  |
| <b>6 Amount (\$)</b><br>\$29.00                            |  | <b>7 Payee address</b> City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420               |  |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                            |  | <b>(a) Category</b> (See Categories listed at the top of this schedule)<br>Advertising Expense        |  | <b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Hosting                    |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name   |  | Office sought: Office held:   |  |
| <b>Date</b><br>06/24/2015                                  |  | <b>Payee name</b><br>Michaels   |  |   |  |
| <b>Amount (\$)</b><br>\$25.96                              |  | <b>Payee address</b> City; State; Zip Code<br>359 Carroll Street<br>Fort Worth, TX 76107              |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Event Expense                  |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Glass Containers for Fundraising Event |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name   |  | Office sought: Office held:   |  |
| <b>Date</b><br>06/24/2015                                  |  | <b>Payee name</b><br>Office Depot   |  |   |  |
| <b>Amount (\$)</b><br>\$51.91                              |  | <b>Payee address</b> City; State; Zip Code<br>401 Carroll Street<br>Fort Worth, TX 76107              |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Event Expense                  |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Supplies for Fundraising Event         |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name   |  | Office sought: Office held:   |  |
| <b>Date</b><br>03/05/2015                                  |  | <b>Payee name</b><br>Office Depot   |  |   |  |
| <b>Amount (\$)</b><br>\$66.01                              |  | <b>Payee address</b> City; State; Zip Code<br>401 Carroll Street<br>Fort Worth, TX 76107              |  |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                              |  | <b>Category</b> (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |  | <b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Supplies for Campaign                  |  |
| Complete <b>ONLY</b> 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.

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>1</b> PAGE #<br>Schedule: 3/3 Report: 11/14               |  | <b>2</b> FILER NAME<br>Ramos, Jacinto Jr. (Mr.) |   | <b>3</b> ACCOUNT # (TEC filers)<br>00000001 |  |
| <b>4</b> Date<br>06/25/2015                                  | <b>5</b> Payee name<br>Rachel Delira   |   |   |   |  |
| <b>6</b> Amount (\$)<br>\$100.00                             | <b>7</b> Payee address City; State; Zip Code<br>3208 Riverlakes Drive<br>Hurst, TX 76053         |   |   |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense         |   | <b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Photographer for Fundraising Event |   |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name  |   | Office sought:  | Office held:                                |  |
| Date<br>06/29/2015   | Payee name<br>Reservoir Rest. Inc.   |   |   |   |  |
| Amount (\$)<br>\$600.00                                      | Payee address City; State; Zip Code<br>1001 Foch Street<br>Fort Worth, TX 76107                  |   |   |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Event Expense                    |   | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Space reserved for Fundraising event          |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |   | Office sought:  | Office held:                                |  |
| Date<br>06/04/2015   | Payee name<br>Stribling-Healthy with L, Olivia   |   |   |   |  |
| Amount (\$)<br>\$135.00                                      | Payee address City; State; Zip Code<br>9000 Vantage Point Drive<br>Apt 226<br>Dallas, TX 75243   |   |   |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>Advertising Expense              |   | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Website Design                                |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |   | Office sought:  | Office held:                                |  |
| Date<br>03/10/2015   | Payee name<br>US Post Office   |   |   |   |  |
| Amount (\$)<br>\$77.00                                       | Payee address City; State; Zip Code<br>2120 Ellis Ave<br>Fort Worth, TX 76164                    |   |   |   |  |
| <b>PURPOSE OF EXPENDITURE</b>                                | Category (See Categories listed at the top of this schedule)<br>OTHER - Cost of Campaign Mailbox |   | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/><br>Campaign PO box                               |   |  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name  |   | Office sought:  | Office held:                                |  |

# 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.

|  |  |   |   |   |  |
|--|--|---|---|---|--|
| <b>1</b> PAGE #<br>Schedule: 1/3 Report: 12/14 |  | <b>2</b> FILER NAME<br>Ramos, Jacinto Jr. (Mr.) |   | <b>3</b> ACCOUNT # (TEC filers)<br>00000001 |  |
| <b>4</b> Date<br>04/30/2015                    | <b>5</b> Payee name<br>Artes De La Rosa Theatre  |   |   |   |  |
| <b>6</b> Amount (\$)<br>\$120.00               | <b>7</b> Payee address City; State; Zip Code<br>1440 N. Main Street<br>Fort Worth, TX 76164  |   |   |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |   | <b>(b)</b> Description (See instructions regarding type of information required.)<br>Golf Tournament          |   |  |
| Date<br>06/22/2015                             | Payee name<br>Campaign Partner Online  |   |   |   |  |
| Amount (\$)<br>\$29.00                         | Payee address City; State; Zip Code<br>16 Dudley Street<br>Fitchburg, MA 01420   |   |   |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  |   | Description (See instructions regarding type of information required.)<br>Website Hosting                     |   |  |
| Date<br>04/02/2015                             | Payee name<br>Educational Catering Inc.  |   |   |   |  |
| Amount (\$)<br>\$26.32                         | Payee address City; State; Zip Code<br>300 Trinity Campus Circle<br>Fort Worth, TX 76102   |   |   |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |   | Description (See instructions regarding type of information required.)<br>Lunch Meeting @ TCC with TABS Staff |   |  |
| Date<br>04/15/2015                             | Payee name<br>MaCE   |   |   |   |  |
| Amount (\$)<br>\$100.00                        | Payee address City; State; Zip Code<br>PO Box 471752<br>Fort Worth, TX 76147   |   |   |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee            |   | Description (See instructions regarding type of information required.)<br>MACE Scholarship                    |   |  |

# 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.

|  |  |   |  |   |  |
|--|--|---|--|---|--|
| <b>1</b> PAGE #<br>Schedule: 2/3 Report: 13/14 |  | <b>2</b> FILER NAME<br>Ramos, Jacinto Jr. (Mr.) |  | <b>3</b> ACCOUNT # (TEC filers)<br>00000001 |  |
| <b>4</b> Date<br>04/08/2015                    | <b>5</b> Payee name<br>Northside High School   |   |  |   |  |
| <b>6</b> Amount (\$)<br>\$50.00                | <b>7</b> Payee address City; State; Zip Code<br>2211 McKinley Ave<br>Fort Worth, TX 76164  |   |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |   | <b>(b)</b> Description (See instructions regarding type of information required.)<br>Northside Mariachi Fundraiser |   |  |
| Date<br>04/14/2015                             | Payee name<br>Off The Bone BBQ   |   |  |   |  |
| Amount (\$)<br>\$28.95                         | Payee address City; State; Zip Code<br>5144 Mansfield Hwy<br>Forest Hill, TX 76119   |   |  |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |   | Description (See instructions regarding type of information required.)<br>My Brothers Keeper Luncheon              |   |  |
| Date<br>02/26/2015                             | Payee name<br>Raga, Fernando (Mr.)   |   |  |   |  |
| Amount (\$)<br>\$200.00                        | Payee address City; State; Zip Code<br>609 Kentucky Derby Lane<br>Fort Worth, TX 76179   |   |  |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |   | Description (See instructions regarding type of information required.)<br>Dinner for Youth at Gangsite             |   |  |
| Date<br>04/17/2015                             | Payee name<br>T & P Tavern   |   |  |   |  |
| Amount (\$)<br>\$120.00                        | Payee address City; State; Zip Code<br>221 W Lancaster Avenue<br>Fort Worth, TX 76102  |   |  |   |  |
| PURPOSE OF EXPENDITURE                         | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  |   | Description (See instructions regarding type of information required.)<br>MACE Scholarship Information Gathering   |   |  |

# 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.

|  |  |  |  |   |  |
|--|--|--|--|---|--|
| <b>1</b> PAGE #<br>Schedule: 3/3 Report: 14/14 |  | <b>2</b> FILER NAME<br>Ramos, Jacinto Jr. (Mr.)  |  | <b>3</b> ACCOUNT # (TEC filers)<br>00000001   |  |
| <b>4</b> Date<br>04/06/2015                    |  | <b>5</b> Payee name<br>Taqueria B Juniors  |  |   |  |
| <b>6</b> Amount (\$)<br>\$18.07                |  | <b>7</b> Payee address City; State; Zip Code<br>1426 NW 25th Street<br>Fort Worth, TX 76164      |  |   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense |  | <b>(b)</b> Description (See instructions regarding type of information required.)<br>Lunch with First Tee |  |