

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |  |   |
|---|--|--|---|
| <p>The C/OH Instruction Guide explains how to complete this form.</p>                               |  | <p>1 Filer ID (Ethics Commission Filers)</p> | <p>2 Total pages filed: <b>18</b></p>   |
| <p>3 CANDIDATE / OFFICEHOLDER NAME</p>  | <p>MS / MRS / MR FIRST MI<br/> <b>Mr. Angel R</b><br/> <small>NICKNAME LAST SUFFIX</small><br/> <b>Luebanos</b></p>  |  | <p><b>OFFICE USE ONLY</b></p> <p>Date Received</p> <p><b>RECEIVED</b></p> <p><b>JUL 16 2018</b></p> <p><b>Board of Education</b></p> <p><i>by Faye Daniels</i></p> <p>Date <u>Hand-delivered</u> or Date Postmarked<br/> <b>1-16-18</b></p> <p>Receipt # Amount \$</p> <p>Date Processed <b>1-16-18</b></p> <p>Date Imaged <b>1-16-18</b></p> |
| <p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p><input type="checkbox"/> Change of Address</p> | <p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br/> <b>3321 Ryan Ave Fort Worth TX 76110</b></p>  |  |   |
| <p>5 CANDIDATE / OFFICEHOLDER PHONE</p>   | <p>AREA CODE PHONE NUMBER EXTENSION<br/> <b>(682) 597-6261</b></p>   |  |   |
| <p>6 CAMPAIGN TREASURER NAME</p>  | <p>MS / MRS / MR FIRST MI<br/> <b>Mrs. Anahi</b><br/> <small>NICKNAME LAST SUFFIX</small><br/> <b>Esparza-Luebanos</b></p>   |  |   |
| <p>7 CAMPAIGN TREASURER ADDRESS<br/>(Residence or Business)</p>                                     | <p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br/> <b>3321 Ryan Ave Fort Worth, TX 76110</b></p>  |  |   |
| <p>8 CAMPAIGN TREASURER PHONE</p>   | <p>AREA CODE PHONE NUMBER EXTENSION<br/> <b>(817) 366-1214</b></p>   |  |   |
| <p>9 REPORT TYPE</p>  | <p> <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)         </p> |  |   |
| <p>10 PERIOD COVERED</p>  | <p>           Month Day Year    Month Day Year<br/> <b>01 / 01 / 2018</b>    THROUGH    <b>06 / 30 / 2018</b> </p>   |  |   |
| <p>11 ELECTION</p>  | <p>           ELECTION DATE    ELECTION TYPE<br/>           Month Day Year    <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description<br/> <b>05 / 06 / 17</b>    <input type="checkbox"/> General    <input type="checkbox"/> Special         </p>  |  |   |
| <p>12 OFFICE</p>  | <p>OFFICE HELD (if any)    13 OFFICE SOUGHT (if known)</p> <p><b>FWISD Board Trustee</b></p>   |  |   |
| <p><b>GO TO PAGE 2</b></p>  |  |  |   |

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Anael R Luebanos 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

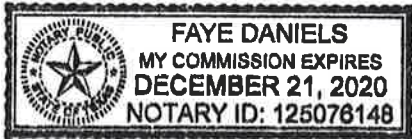
☐ Additional Pages

|                         |   |              |
|-------------------------|---|--------------|
| 17 CONTRIBUTION TOTALS  | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 250.00    |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$ 20,281.15 |
| EXPENDITURE TOTALS      | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$ 0         |
|                         | 4. TOTAL POLITICAL EXPENDITURES   | \$ 2341.22   |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$ 11,659.53 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$ 0         |

18 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.

Anael Luebanos  
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Anael Luebanos, this the 16<sup>th</sup> day of July, 20 18, to certify which, witness my hand and seal of office.

Faye Daniels Faye Daniels Executive Sec.  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME**

Anael R. Luebonos

**20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

- |     |   |             |
|-----|---|-------------|
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 13,630   |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 6,651.15 |
| 3.  | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$          |
| 4.  | <input type="checkbox"/> SCHEDULE E: LOANS  | \$          |
| 5.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS   | \$ 2341.22  |
| 6.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$          |
| 7.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$          |
| 8.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$          |
| 9.  | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$          |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$          |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$          |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$          |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

02/28/18

5 Full name of contributor

☐ out-of-state PAC (ID#:

Josue Cardenas

6 Contributor address;

City; State; Zip Code

6050 Forest River Dr, Ft. Worth, TX 76112

7 Amount of contribution (\$)

250.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/26/18

Full name of contributor

☐ out-of-state PAC (ID#:

John Avila

Contributor address;

City; State; Zip Code

1936 Warner Rd, Ft. Worth, TX 76110

Amount of contribution (\$)

1500.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/29/18

Full name of contributor

☐ out-of-state PAC (ID#:

Douglas A. Ponreck

Contributor address;

City; State; Zip Code

127 W. Woodland Ave, San Antonio, TX 78212

Amount of contribution (\$)

500.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/03/18

Full name of contributor

☐ out-of-state PAC (ID#:

John B. Kleinheinz

Contributor address;

City; State; Zip Code

301 Commerce St Suite 1900, Ft. Worth, TX 76102

Amount of contribution (\$)

2000.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

6/4/18

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Pete Geren

6 Contributor address;

City; State; Zip Code

1200 Washington Terrace, Ft Worth, TX 76107

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/04/18

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Dee Kelly

Contributor address;

City; State; Zip Code

417 Rivercrest Dr Fort Worth, TX 76107

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/04/18

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Jeff Whitfield

Contributor address;

City; State; Zip Code

2020 Glenco Ter Fort Worth, TX 76110

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/04/18

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Janice Kelly

Contributor address;

City; State; Zip Code

201 Main St Suite 2500, Ft Worth, TX 76102

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3/11

2 FILER NAME

Andel R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#)

Elizabeth Manning

6 Contributor address;

City; State; Zip Code

2217 Windsor Place, Ft. Worth, TX 76110

7 Amount of contribution (\$)

100.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Ty Williams

Contributor address;

City; State; Zip Code

662 May St. Fort Worth, TX 76104

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Nicole Van Toorn

Contributor address;

City; State; Zip Code

4012 El Campo Ave, Ft. Worth, TX 76107

Amount of contribution (\$)

\$ 250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Bryan Epstein

Contributor address;

City; State; Zip Code

2908 Alton Rd, Ft. Worth, TX 76109

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

Gina Rubio

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

500.<sup>00</sup>

6 Contributor address;

City; State; Zip Code

7408 Innisbrook Ln, Ft Worth, TX 76179

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

David F. Chappell

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

200.<sup>00</sup>

Contributor address;

City; State; Zip Code

2501 Parkview Dr. Ste 220, Ft. Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

Mike Coffey

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

250.<sup>00</sup>

Contributor address;

City; State; Zip Code

2566 Shirley Ave, Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

Richard Casarez

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

100.<sup>00</sup>

Contributor address;

City; State; Zip Code

6900 LaCantera Dr, Ft. Worth TX 76108

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#:

Julia C. Hedden

6 Contributor address; City; State; Zip Code

3300 Worth Hills Dr, Fort Worth, TX 76109

7 Amount of contribution (\$)

100.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Kenneth Barr

Contributor address; City; State; Zip Code

3101 Avondale Ave, Fort Worth, TX 76109

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Julie and Dick Abrams

Contributor address; City; State; Zip Code

6145 Wedgwood, Ft Worth, TX 76133

Amount of contribution (\$)

500.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Timothy Stevens

Contributor address; City; State; Zip Code

2000 Pembroke Dr, Ft Worth, TX 76110

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

6/11

2 FILER NAME

Anael R Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#)

Marty Leonard

6 Contributor address;

City; State; Zip Code

1411 Shady Oaks Ln, Ft. Worth, TX 76107

7 Amount of contribution (\$)

500.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Sergio de Leon

Contributor address;

City; State; Zip Code

4521 Diaz Ave, Ft. Worth TX 76107

Amount of contribution (\$)

350.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Alan Hedi

Contributor address;

City; State; Zip Code

1928 Berkeley Place, Ft. Worth, TX 76110

Amount of contribution (\$)

200.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Caroline Cranz

Contributor address;

City; State; Zip Code

3928 Modlin Ave, Fort Worth, TX 76107

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Laura Strawser

6 Contributor address;

City; State; Zip Code

2027 Glenco Ter, Ft. Worth, TX 76110

7 Amount of contribution (\$)

100.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Carlos Flores

Contributor address;

City; State; Zip Code

1415 Circle Park Blvd, Ft. Worth, TX 76164

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Judy Needham

Contributor address;

City; State; Zip Code

6341 Klamath Rd, Ft. Worth, TX 76116

Amount of contribution (\$)

150.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Salvador Espino

Contributor address;

City; State; Zip Code

1205 N. Main St, Ft. Worth, TX 76164

Amount of contribution (\$)

80.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#)

Gerald Haddock

6 Contributor address;

City; State; Zip Code

500 Main St. Suite 1015, Ft. Worth, TX 76102

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Patrick Monaghan

Contributor address;

City; State; Zip Code

105 Parkway Dr, Willow Park, TX 76087

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Molly Hyry

Contributor address;

City; State; Zip Code

4221 Blockhow, Fort Worth, TX 76109

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Bill Meadows

Contributor address;

City; State; Zip Code

121 Rivercrest Dr Ft. Worth, TX 76107

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 9/11

2 FILER NAME

Angel R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John & CJ Evans

6 Contributor address;

City; State; Zip Code

3933 Bunting Ave, Ft Worth, TX 76107

7 Amount of contribution (\$)

100.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heidi Angel

Contributor address;

City; State; Zip Code

2032 Glenco Trc Fort Worth, TX 76110

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Toby Jackson

Contributor address;

City; State; Zip Code

2108 Yosemite Ft. Worth, TX 76112

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marcelle LeBlanc

Contributor address;

City; State; Zip Code

2917 Morton St, Fort Worth, TX 76107

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#)

Francisco Hernandez

6 Contributor address;

City; State; Zip Code

800 W. Weatherford St, Ft Worth TX 76102

7 Amount of contribution (\$)

500.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Daniel Hernández

Contributor address;

City; State; Zip Code

800 W. Weatherford St. Ft. Worth, TX 76102

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Eric Fox

Contributor address;

City; State; Zip Code

3513 Overton Park Dr. E, Ft. Worth, TX 76109

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#)

Betsy Price Campaign

Contributor address;

City; State; Zip Code

P.O. Box 100066, Ft Worth, TX 76185

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11/11

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

06/04/18

5 Full name of contributor

☐ out-of-state PAC (ID#:

Robert D Benda Joani M Benda

6 Contributor address;

City; State; Zip Code

608 Paint Pony Trl N, Ft. Worth, TX 76108

7 Amount of contribution (\$)

250.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Mr. & Mrs. John V. Roach II

Contributor address;

City; State; Zip Code

2805 Alton Rd Fort Worth, TX 76109

Amount of contribution (\$)

200.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Cassco Management Company LLC

Contributor address;

City; State; Zip Code

4200 S. Hulen St Ste 612, Ft. Worth, TX 76109

Amount of contribution (\$)

250.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/04/18

Full name of contributor

☐ out-of-state PAC (ID#:

Juan F. Perez

Contributor address;

City; State; Zip Code

9108 Cliffside, Cedar Hill, TX 75104

Amount of contribution (\$)

100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

|   |  |   |   |
|---|--|---|---|
| The Instruction Guide explains how to complete this form.   |  | 1 Total pages Schedule A2:  |   |
| 2 FILER NAME<br><b>Anael R Luebanos</b>   |  | 3 Filer ID (Ethics Commission Filers)   |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |  | \$ 1,469.15   |   |
| 5 Date<br><b>06/04/18</b>   | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Kelly, Hart &amp; Hallman</b><br>7 Contributor address; City; State; Zip Code<br><b>201 Main St Suite 2500, Ft. Worth, TX 76102</b> | 8 Amount of Contribution \$<br><b>1,469.15</b>                                  | 9 In-kind contribution description<br><b>Fundraiser event</b>     |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)   |  | 11 Employer (FOR NON-JUDICIAL) (See Instructions)                               |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)  |  | 13 Contributor's job title (FOR JUDICIAL) (See Instructions)                    |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)   |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)                     |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |  |   |   |
| Date<br><b>6/25/18</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:<br><b>Anael R. Luebanos</b><br>Contributor address; City; State; Zip Code<br><b>3321 Ryan Ave, Ft. Worth, TX 76110</b>                      | Amount of Contribution \$<br><b>5,182.00</b>                                    | In-kind contribution description<br><b>Personal loan forgiven</b> |
|   |  | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  |  | Employer (FOR NON-JUDICIAL) (See Instructions)                                  |   |
| Contributor's principal occupation (FOR JUDICIAL)   |  | Contributor's job title (FOR JUDICIAL) (See Instructions)                       |   |
| Contributor's employer/law firm (FOR JUDICIAL)  |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)  |  |   |   |
|   |  |   |   |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b><br>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. |  |   |   |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| <b>1</b> Total pages Schedule F1: <u>13</u>                         |  | <b>2</b> FILER NAME <u>Anael R. Luebanos</u>   |  | <b>3</b> Filer ID (Ethics Commission Filers)   |  |
| <b>4</b> Date <u>03/02/2018</u>                                     |  | <b>5</b> Payee name <u>Anedot</u>  |  |  |  |
| <b>6</b> Amount (\$) <u>10.05</u>                                   |  | <b>7</b> Payee address; City; State; Zip Code <u>www.anedot.com</u>                        |  |  |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                           |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br><u>Fees</u>     |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| Date <u>05/10/2018</u>  |  | Payee name <u>Paul's Donuts</u>  |  |  |  |
| Amount (\$) <u>262.56</u>   |  | Payee address; City; State; Zip Code <u>1324 Hemphill St Fort Worth, TX 76104</u>          |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       |  | Category (See Categories listed at the top of this schedule)                               |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |  | Office sought Office held  |  |
| Date <u>05/20/2018</u>  |  | Payee name <u>Facebook</u>   |  |  |  |
| Amount (\$) <u>84.05</u>  |  | Payee address; City; State; Zip Code <u>www.facebook.com</u>                               |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       |  | Category (See Categories listed at the top of this schedule)<br><u>Advertising expense</u> |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name  |  | Office sought Office held  |  |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>2/3                            |  | <b>2</b> FILER NAME<br>Anael R. Luebanos  |  | <b>3</b> Filer ID (Ethics Commission Filers)   |  |
| <b>4</b> Date<br>05/23/2018   |  | <b>5</b> Payee name<br>Print Place  |  |  |  |
| <b>6</b> Amount (\$)<br>1,146.31                                    |  | <b>7</b> Payee address: City: State: Zip Code<br>1130 Ave H East, Arlington, TX 76011       |  |  |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                           |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate / Officeholder name   |  | Office sought Office held  |  |
| Date<br>05/24/2018  |  | Payee name<br>USPS  |  |  |  |
| Amount (\$)<br>100.00   |  | Payee address: City: State: Zip Code<br>2600 8th Ave, Fort Worth, TX 76110                  |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       |  | Category (See Categories listed at the top of this schedule)<br>Other (mail)                |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name   |  | Office sought Office held  |  |
| Date<br>06/04/2018  |  | Payee name<br>Anedot  |  |  |  |
| Amount (\$)<br>20.10  |  | Payee address: City: State: Zip Code<br>www.anedot.com                                      |  |  |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       |  | Category (See Categories listed at the top of this schedule)<br>Fees                        |  | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense            |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate / Officeholder name   |  | Office sought Office held  |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>          |  |   |  |  |  |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>3/3                            | <b>2</b> FILER NAME<br>Anael R. Luebanos  | <b>3</b> Filer ID (Ethics Commission Filers)   |
| <b>4</b> Date<br>06/04/2018   | <b>5</b> Payee name<br>Square Inc   |  |
| <b>6</b> Amount (\$)<br>16.91                                       | <b>7</b> Payee address; City: State: Zip Code                                   |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |   |  |
| Candidate / Officeholder name                                       |   | Office sought  |
|   |   | Office held  |

|  |  |   |
|--|--|---|
| Date<br>06/07/2018   | Payee name<br>Anedot   |   |
| Amount (\$)<br>11.33                                       | Payee address; City: State: Zip Code<br>www.anedot.com               |   |
| <b>PURPOSE OF EXPENDITURE</b>                              | Category (See Categories listed at the top of this schedule)<br>Fees | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Candidate / Officeholder name                              |  | Office sought   |
|  |  | Office held   |

|  |  |   |
|--|--|---|
| Date<br>06/15/2018   | Payee name<br>P and P Consulting   |   |
| Amount (\$)<br>690.00                                      | Payee address; City: State: Zip Code<br>1904 Jenson Rd, Ft. Worth, TX 76112        |   |
| <b>PURPOSE OF EXPENDITURE</b>                              | Category (See Categories listed at the top of this schedule)<br>Consulting Expense | Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |   |
| Candidate / Officeholder name                              |  | Office sought   |
|  |  | Office held   |

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