GAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

7 M Y B X X X X X X X X X X X X X X X X X X		or ker okt	·	OOVER SHEET PG I
The C/OH Instruction	on Guide explains ho	ow to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDE	MS/MRS/MR	FIRST	MI	OFFICE USE ONLY
NAME	MR,	JUNGUS	F,	Date Received
		JORDAN		123456
4 CANDIDATE / OFFICEHOLDE MAILING	ADDRESS / PO BOX;	APT/SUITE#; CITY; 5TARRY		RECEIVED
ADDRESS change of address	FORT	WORTH, T		JUL 1 4 2014
5 CANDIDATE/ OFFICEHOLDEI	AREA CODE	PHONE NUMBER	EXTENSION	Repeipt # FORT WOFTH CITY SECRET INTERVIEW
PHONE	MS/MRS/MR	3-2978		Date means P E
6 CAMPAIGN TREASURER NAME	MRS,	ELAINE	Mi	Date implies
	NICKNAME	PETRUS	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (residence or business)		COUNTRY WORTH		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817) 9	PHONE NUMBER 24-8898	EXTENSION	
9 REPORT TYPE	January 15	30th day before election	Runoff Exceeded \$500	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
			limit	
0 PERIOD COVERED	Month Day 61 / 01 / 2	Year THROUGH	Month Day /	Year 2014
1 ELECTION	ELECTION DATE Month Day	Year ELECTION TYPE Primary	Runoff	General Special
2 OFFICE	OFFICE HELD ((Fany) CITY COU CITY OF DISTRIC	NCIL MEMBER FORTWORTH T 6	13 OFFICE SOUGHT (if known)	
		GO TO PAG		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	uNGus	JORDAN	15 ACCOUNT # (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		
	GENERAL SPECIFIC	COMMITTEE ADDRESS	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		
	2. TOTAL (OTHER	\$. 0	
EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$100		OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	1ZED \$ 246. <u>13</u>
	4. TOTAL I	\$1997.56	
CONTRIBUTION BALANCE	5. TOTAL PO OF REPO	1	
OUTSTANDING LOAN TOTALS	6. TOTAL PI LAST DA	HE \$	
18 AFFIDAVIT	J KA JOHN DIG TO THE STATE OF TEXTS OF	is true and correct and includes all in me under Title 15, Election Code. Signature of Cand	perjury, that the accompanying report information required to be reported by Joedan idae or Officeholder
Sworn to and subso	of Suly	ne, by the said, 20, to certify which, witness m	, this the
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath			

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Accounting/Banking Legal Services Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Event Expense Polling Expense Travel Out Of District Candidate/Officeholder/Political Committee Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F: 2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers) JUNGUS JORDAN 10+7 4 Date 5 Payee name RAILHEAD SMOKEHOUSE 1-18-14 6 Amount (\$) 7 Payee address; yee address; City; State; Zip Code 2900 MONTGOMERY STREET 58.85 FORT WORTH, TEXAS 76107 (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE FOOD BEVERAGE EXPORE DISCUS ISSUES with Advisors OF EXPENDITURE Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name PARIS COFFEE SHOP 1-22-14 Payee address; City; State; Zip Code 704 MAGNOLIA FORT WORTH, TEXAS 76104 Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) FOOD / BEVERAGE EXPENSE MEET/ BREAKFAST with Advisore **PURPOSE** OF EXPENDITURE Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH Pavee name OL SOUTH PANCAKE HOUSE Payee address; City; State; Zip Code 1509 5. UNIVERSITY FORT WORTY, TEXAS 76107 Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Sphedule T) FOOD / BEVERAGE EXPENSE BREAKFAST with Advisor PURPOSE OF EXPENDITURE Candidate / Officeholder name Complete ONLY if direct Office held expenditure to benefit C/OH Payee name CHARLESTON'S RESTAURANT 5-19-14 Amount (\$) Payee address; City; State; Zip Code 5. HULFW 26.74 FORT WORTY, TEXAS 76109 Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE Meeting with Advisor PURPOSE OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Candidate / Officeholder name

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

P.O. Box 12070

Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees	Polling Expense Travel Out Of E Printing Expense Office Overhead The Instruction Guide explains how t	d/Rental Expense OTHER (enter a	iceholder/Political Committee category not listed above)
1 Total pages Schedule F:	2 FILER NAME JUNGUS JORDA	3 ACCOUN	T # (Ethics Commission Filers
4 Date 1-22-14	REATA RESTAURA	Y7	
6 Amount (\$) 70.59	7 Payee address; City; State; Zip Code 310 Hous Ton STREET FORT WORTH, TEXAS 7	6102	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) FOOD / BEVERAGE EXPENSE	(b) Description (If travel outside of Texas TRANS PA	
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date 1 - 29 - 14	Payee name CHARLESTON'S RES	STAURANT	
Amount (\$)	Payee address; City; State; Zip Code 3020 SouT4 HuLEN		
PURPOSE	FORT WORTH, TEXAS Category (See categories listed at the top of this schedule)	76/09 Description (If travel outside of Texa	as complete Schedule T)
OF EXPENDITURE	FOOD/BEVERAGE EXPENSE	DISCUSS TRANSPO	RTATION ISSUE
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date 1-30-14	Payee name TEXAS ASSOCIATION OF	BLACK CITY COUN	CIL MEMBERS
Amount (\$) 50.00	Payee address; City; State; Zip Code 1821 RUTHERFORD LANG AUSTIN, TEXAS 787	E, STE. 400	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texa	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 1-31-14	Payee name ALBERTSON'S		
Amount (\$) 55.60	Payee address; City; State; Zip Code 57.	76120	
PURPOSE	WEATHER FORD, TEXAS Category (See categories listed at the top of this schedule)	76/3 Z Description (If travel outside of Texas	, complete Schedule T)
OF EXPENDITURE	FOOD/BEVERAGE EXPENSE	MEETING WITH	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees

Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Salaries/Wages/Contract Labor

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.
Total pages Schedule F:	2 FILER NAME JUNGUS JORDAN 3 ACCOUNT # (Ethics Commission File
Date 2 - 1 - 1 H	THE DONUT PALACE II
Amount (\$) 28.50	7 Payee address; City; State; Zip Code 5400 WOODWAY DRIVE FORT WORTH, TEXAS 76/33
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE (b) Description (If travel outside of Texas, complete Schedule T) MEETING WITH APUISORS
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought Office held
Date 2-1-14	Payee name STARBUCKS STORE # 9848
Amount (\$) 97.43	Payee address; City; State; Zip Code 5000 TRAIL LAKE DRIVE FORT WORTH, TEXAS 76133
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) FOOD/BEVERAGE EXPENSE MEETING WITH ADVISORS
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name Office sought Office held
Date 2 - 5 - 14	THE BREAKFAST CLUB OF FORT WORTH
Amount (\$) 97. 00	Payee address; City; State; Zip Code 333 THROCK MORTOW #808 FORT WORTH, TEXAS 76/02
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OTHER Description (If travel outside of Texas, complete Schedule T) OUARTERLY DUES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held
3-20-14	Payee name BIRD CAFE
Amount (\$) 35. 23	Payee address; City; State; Zip Code 155 E. 14T4 STREET FORT WORTH, TEXAS 76102
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) FOOD / BEVERAGE EXPENS MEET TO DISCUSS ISSUE
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Office sought Office held

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees		·	a category not listed above)
1 Total pages Schedule F:	The Instruction Guide explains how 2 FILER NAME		HINT # (Fabine Constitution Files)
3 + 3	JUNGUS JORDAN	N/	UNT # (Ethics Commission Filers)
4 Date	5 Payee name		
3-31-14	REATA RESTAURAN	VT	
6 Amount (\$)	7 Payee address; City; State; Zip Code		
38.29	310 HOUSTON STREE		
50.	FORT WORTH, TEXAS	76102	
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of	
EXPENDITURE	FOOD BEVERAGE EXPENS	E DISCUSS TR	ANS PORTATION ISSU
9 Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought	Office held
Date 4-3-14	Payee name BIRD CAFE		
Amount (\$)	Payee address; City: State: Zip Code		
110 05	155 €. 474 ST.	_	
78.	FORT WORTH, TEXAS	76102	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of	
OF EXPENDITURE	FOOD BEVERAGE ACTENS	F MEET WAY T	RANGUBRIATION A DUIS OK
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held
Date 4-15-14	Payee name CHARLESTON'S RESTR	AURANT	
Amount (\$)	Payee address; City; State; Zip Code		
110 86	3020 5. HALEN		
48.86	FORT WORTH, TEXAS 7	6109	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of 7	
OF EXPENDITURE	FOOD BEVERAGE EXPENSE	DISCUSS POLITI	CAL 1554E
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date 4 - 14 - 14	Payee name KAY GRANGER	AMPAIGN FUN	ID
Amount (\$)	Payee address; City; State; Zip Code		
	715 JONES STREET	, SuiTE 101	
200.0	FORT WORTH, TEXA		
PURPOSE			exas, complete Schedule T)
OF EXPENDITURE	Category (See categories listed at the top of this schedule) CONTRIBUTIONS/DONATIONS MAPE BY OFFICE HOLDER	POLITICAL CO	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
and to pondit O/C	H KAY GRANGER	U.S. 70450	f of REPRESENTATIVE

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services

P.O. Box 12070

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	o complete this form.	,
1 Total pages Schedule F:	2 FILER NAME JUNGUS JORDAN	3 ACCOUNT # (Ethic	cs Commission Filers)
4 Date 5-2-14		WORTH COMMUNITY C	HARITIES
6 Amount (\$)	7 Payee address; City; State; Zip Code 3850 SILVERTOW CIR FORT WORTY, TEXAS		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) CONTRIBUTIONS DONATTOWS MADE BY OFFICE XILDER	(b) Description (If travel outside of Texas, comple	
9 Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name DH	Office sought O	ffice held
5/ 7/14	CHUY'S SOUTH	7 TH	
Amount (\$) 59.27	Payee address; City; State; Zip Code 2401 W. 7M STREET FORT WORTH, TEXAS	76107	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE	Description (If travel outside of Texas, complete THANK YOU LUNCA	•
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought Of	fice held
5/15/14	Payee name [HOP STORE # 14	165	
Amount (\$) 59.36	Payee address; City; State; Zip Code 5, W. LOOP 820 FORT WORTH, TEXAS	76132	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE	Description (If travel outside of Texas, complete THANK YOU + POLICY D	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name		ice held
Date 5/14/14	Payee name CHARLESTON'S RESTAU	RANT	
38.48	Payee address; City; State; Zip Code 3020 SOUTH HULEW FORT WORTH, TEXAS 76	:109	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE	Description (If travel outside of Texas, complete DIS CUSS Public Sof	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Offi	ice held

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SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gift/Awards/Memorials Expense Legal Services

P.O. Box 12070

Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District

Loan Repayment/Reimbursement

Transportation Equipment & Related Expense Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
4 Tatal annua Onbadula Fr	
1 Total pages Schedule F:	2 FILER NAME JUNGUS JORDAN 3 ACCOUNT # (Ethics Commission Filer
4 Date 5-15-14	5 Payee name COOL RIVER CAFE
6 Amount (\$)	7 Payee address; City; State; Zip Code 1045 HIDDEW RIDGE ROAP
44. 24	IRUING, TEXAS 75038
8 PURPOSE	(a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	FOOD BEVERAGE EXPENSE DISCUSS TRANSPORTATION 1534
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH
5/6/14	REATA RESTAURANT
Amount (\$)	Payee address; City; State; Zip Code
31.90	310 HOUSTON STREET
31.	FORT NORTH, TEXAS 76102
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	FOOD BEVERAGE EXPENSE Meet with Education Advision
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held OH
Date	Payee name
5-24-14	CHARLESTON'S RESTAURANT
Amount (\$)	Payee address; City; State; Zip Code
40 67	3020 S. HULEN
~ ·	FORT WORTH, TEXAS 76/09
PURPOSE OF	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
EXPENDITURE	FOOD/BEVERAGE EXPENSE DISCUSS Neighborhood 1554ES
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought V Office held
Date 6-17-14	Payee name IHOP STORE # 1465
Amount (\$)	Payee address; City; State; Zip Code
111 73	5901 S.W. LOOP 820
76.	FORT WORTY, TEXAS 76132
PURPOSE	Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	FOOD BEVERAGE EXPENSE THANK YOU BREAKFAST
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name Office sought Office held OH
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SCHEDULE F

	EXPENDITURE CAT	EGORIES FOR BOX 8(a)	
Advertising Expense	•	ries/Wages/Contract Labor Lo	an Repayment/Reimbursement
Accounting/Banking			ansportation Equipment & Related Expense
Consulting Expense	,		ntributions/Donations Made By Candidate/Officeholder/Political Committee
Event Expense Fees	• .	el Out Of District e Overhead/Rental Expense O	HER (enter a category not listed above)
,	• •	nins how to complete this form.	TIET (Giner a category not noted about,
1 Total pages Schedule F:	2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)
不可	Jungus Jo	RDAN	,
4 Date	5 Payee name		
6-22-14	THE ROTARY	CLUB OF FOR	IT WORTH
	7 Payee address; City; State; 2		2. 400/2.1
6 Amount (\$)		•	_
700 00	306 W. 7th STA		
300.00	FORT WORTH, T	exas 76102.4	900
8 PURPOSE	(a) Category (See categories listed at the top of this s	·	avel outside of Texas, complete Schedule T)
OF	OTHER		
EXPENDITURE	DIACK	JEMI-AI	VNUAL DUES
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/C	PH		
Date	Payee name		
6-19-14	REATH RESTA	TURANT	
Amount (\$)	Payee address; City; State; Z	ip Code	
0.7	310 HOUSTON S	TREET	
33.93			
J J .	FORT WORTH,	TEX45	
PURPOSE	Category (See categories listed at the top of this so		vel outside of Texas, complete Schedule T)
OF EXPENDITURE	FOOD BEVERAGE EX	AWSE MERT !	ith Advisor
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
	··		
Date	Payee name	P-FO IDANT	-
6-11-14	CHARLES TON'S	KEST AURAN	
Amount (\$)	Payee address; City; State; Zi	p Code	
20.56	3020 S. HULEN	STREET	
39.20		_	
· ,,	FORT WORTH, TE)		
PURPOSE	Category (See categories listed at the top of this so		rel outside of Texas, complete Schedule T)
OF EXPENDITURE	FOOD BEVERAGE	Meet w	ith Advisor
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/O	1	_	
B.t. T			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zi	Code	1
i			
			i
PURPOSE	Category (See categories listed at the top of this sch	edule) Description (If trav	el outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch	edule) Description (If trav	el outside of Texas, complete Schedule T)
OF	Category (See categories listed at the top of this sch Candidate / Officeholder name	edule) Description (If trav	el outside of Texas, complete Schedule T) Office held

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