


OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

**CANDIDATE / OFFICEHOLDER
 CAMPAIGN FINANCE REPORT**

**FORM C/OH
 COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 32
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR. NICKNAME	FIRST Jungus LAST	MI F. SUFFIX
	JORDAN		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5316 STARRY COURT FORT WORTH, TX 76123		
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION (817) 343-2978		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MRS. NICKNAME	FIRST ELAINE LAST	MI SUFFIX
	PETRUS		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3736 COUNTRY CLUB FORT WORTH, TEXAS 76109		
	8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (817) 996 2215 817 924 8898		
9 REPORT TYPE	<input checked="" 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) <input 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)		
10 PERIOD COVERED	Month Day Year Month Day Year 7 / 1 / 2018 THROUGH 12 / 31 / 2018		
11 ELECTION	ELECTION DATE Month Day Year / /		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any) CITY COUNCIL MEMBER CITY OF FORT WORTH, TX DISTRICT 6	13 OFFICE SOUGHT (if known)	

OFFICE USE ONLY

Date Received


Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME JUNGUS JORDAN 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.

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 36,265
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 8118.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 100,515.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Jungus Jordan
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JUNGUS JORDAN, this the 4th day of January 2019, to certify which, witness my hand and seal of office.

Mary Kayser
Signature of officer administering oath

MARY J KAYSER
Printed name of officer administering oath

City Secretary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

JUNGUS JORDAN

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 36,265
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 8118.39
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 of 23

2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-3-18

5 Full name of contributor out-of-state PAC (ID#: _____)

T. OSCAR & CAROL TREUINO JR.

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

7805 AMY LANE
NORTH RICHLAND HILLS, TX 76182

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-10-18

Full name of contributor out-of-state PAC (ID#: _____)

R. Denny ALEXANDER

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4200 S. HULEN ST., SUITE 617
FORT WORTH, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-10-18

Full name of contributor out-of-state PAC (ID#: _____)

FRED PARKER

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

7051 ALLEN PLACE
FORT WORTH, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-6-18

Full name of contributor out-of-state PAC (ID#: _____)

JACK R. STEVENS & JANET STEVENS

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

116 N. BROADWAY ROAD
AZLE, TX 76020

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 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-12-18

5 Full name of contributor out-of-state PAC (ID#: _____)
J. DAVID TRACY

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**2734 COLONIAL PARKWAY
FORT WORTH, TX 76109**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-15-18

Full name of contributor out-of-state PAC (ID#: _____)
**FORT WORTH FIREFIGHTERS COMMITTEE
FOR RESPONSIBLE GOVERNMENT**

Amount of contribution (\$)
2,500.00

Contributor address; City; State; Zip Code
**3855 TULSA WAY
FORT WORTH, TX 76107**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
BOB MADEJA

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**P.O. BOX 471285
FORT WORTH, TX 76147**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
JAMES CHARLES POWELL

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**P.O. BOX 444
HURST, TX 76053**

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 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-16-18

5 Full name of contributor out-of-state PAC (ID#: _____)
DON ALLEN

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**7302 TIDAL TRACE
ARLINGTON, TX 76016**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-19-18

Full name of contributor out-of-state PAC (ID#: _____)
WINSTON D. and DIXIE D. SEAMAN

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**7320 LEMON WOOD LANE
FORT WORTH, TX 76133**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
SHAREN WILSON and JOHN DOTSON

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**P.O. BOX 282
FORT WORTH, TX 76101-0282**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
SHAREN WILSON ~~XXXXXXXXXXXXXXXXXXXX~~

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**P.O. BOX 282
FORT WORTH, TX 76101-0282**

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 of 23

2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-16-18

5 Full name of contributor out-of-state PAC (ID#: _____)

HAMMER and NAILS CLUB CANDIDATE

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

100 E. 15th St., Suite 600
FORT WORTH, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-16-18

Full name of contributor out-of-state PAC (ID#: _____)

CHRISTOPHER JORDAN KEFFER
and ASHLEY KEFFER

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

7008 MITRA DRIVE
AUSTIN, TX 78739-2037

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-16-18

Full name of contributor out-of-state PAC (ID#: _____)

FORT WORTH RETIRED FIREFIGHTERS
and WIDOWS COMMITTEE FOR RESPONSIBLE GOVT.

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

1617 TIERNEY ROAD
FORT WORTH, TX 76112

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-16-18

Full name of contributor out-of-state PAC (ID#: _____)

DEE KELLY, JR.

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

417 RIVERCREST DRIVE
FORT WORTH, TX 76107

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 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-16-18

5 Full name of contributor out-of-state PAC (ID#: _____)
HUB and MARTHA BAKER

7 Amount of contribution (\$)
1,000.00

6 Contributor address; City; State; Zip Code
**121 E. EXCHANGE AVE.
FORT WORTH, TX 76164**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-13-18

Full name of contributor out-of-state PAC (ID#: _____)
**LINEBARGER, GOGGAN, BLAIR, SAMPSON
LLP, ATTORNEYS**

Amount of contribution (\$)
2,500.00

Contributor address; City; State; Zip Code
**100 THROCKMORTON ST, Suite 300
FORT WORTH, TX 76102**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
JEANNINE and VIC HENDERSON

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3863 CANDLELITE LANE
FORT WORTH, TX 76109**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-16-18

Full name of contributor out-of-state PAC (ID#: _____)
BILL and MELISSA F. PAXTON

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**313 CREEKVIEW TERRACE
ALEDO, TX 76008**

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:

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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-16-18

5 Full name of contributor out-of-state PAC (ID#: _____)

IVORY PIERCE

7 Amount of contribution (\$)

300.00

6 Contributor address; City; State; Zip Code

8016 DUSTY WAY
FORT WORTH, TX 76123

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-16-18

Full name of contributor out-of-state PAC (ID#: _____)

JUSTIN LIGHT

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6116 KENWICK AVE.
FORT WORTH, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-10-18

Full name of contributor out-of-state PAC (ID#: _____)

CLARENCE and IVANNA WIESEPAPE

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

5109 SUNSCAPE LANE S.
FORT WORTH, TX 76123

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-10-18

Full name of contributor out-of-state PAC (ID#: _____)

MARTHA LEONARD

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

1411 SHADY OAKS LANE
FORT WORTH, TX 76107

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:

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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-10-18

5 Full name of contributor

out-of-state PAC (ID#: _____)

CAPT. JAMES VIRGIL BURNETT, USN. Ret

7 Amount of contribution (\$)

25.00

6 Contributor address; City; State; Zip Code

APT 2804, 1600 TEXAS ST.
FORT WORTH, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-10-18

Full name of contributor

out-of-state PAC (ID#: _____)

MARTY and LUMOSKOWITZ

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

7137 WINDCHIME DRIVE
FORT WORTH, TX 76133

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-8-18

Full name of contributor

out-of-state PAC (ID#: _____)

THOMAS J. HARRIS + ELLEN

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

8040 VALLEY DR.
NORTH RICHLAND HILLS, TX 76182

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-9-18

Full name of contributor

out-of-state PAC (ID#: _____)

J. D. JOHNSON CAMPAIGN FUND

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

P.O. BOX 136021
FORT WORTH, TX 76136

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 of 23

2 FILER NAME
Jungus JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-8-18

5 Full name of contributor out-of-state PAC (ID#: _____)
LEE and S. KATHERINE NICOL

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**3882 SOUTH HILLS CIRCLE
FORT WORTH, TX 76109**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-15-18

Full name of contributor out-of-state PAC (ID#: _____)
TOM E, PURVIS III and MICHELE

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**5301 BYERS AVENUE
FORT WORTH, TX 76107**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-9-18

Full name of contributor out-of-state PAC (ID#: _____)
CHARLES M. and LINDA GRDOMER

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**6324 SKYLARK CIRCLE
FORT WORTH, TX 76180**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-7-18

Full name of contributor out-of-state PAC (ID#: _____)
DAVID and NANCY MARCKS

Amount of contribution (\$)
75.00

Contributor address; City; State; Zip Code
**5308 POST RIDGE DRIVE
FORT WORTH, TX 76123**

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:
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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-7-18

5 Full name of contributor out-of-state PAC (ID#: _____)

GARY FICKES

7 Amount of contribution (\$)

200.00

6 Contributor address; City; State; Zip Code

4704 CABERNET CIRCLE
COLLEYVILLE, TX 76034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-7-18

Full name of contributor out-of-state PAC (ID#: _____)

RICHARD D. MINKER & CAROL

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

2865 MANDRWOOD TRAIL
FORT WORTH, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-6-18

Full name of contributor out-of-state PAC (ID#: _____)

VERNELL STURNS

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

612 HIGH WOODS TRAIL
FORT WORTH, TX 76112

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-7-18

Full name of contributor out-of-state PAC (ID#: _____)

HALFF ASSOCIATES PAC

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

1201 N. BOWSER ROAD
RICHARDSON, TX 75081

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:

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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-7-18

5 Full name of contributor

out-of-state PAC (ID#: _____)

THOMAS S. and JACQUELINE GALBREATH

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

11717 CAMBRIAC T.
ALEDO, TX 76008

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-6-18

Full name of contributor

out-of-state PAC (ID#: _____)

CAROL and JIM DUNAWAY

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

500 ALTA DRIVE
FORT WORTH, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-4-18

Full name of contributor

out-of-state PAC (ID#: _____)

GARY W. and ANN TERRY

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

117 SHADY LAKE
HURST, TX 76054

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-6-18

Full name of contributor

out-of-state PAC (ID#: _____)

MICHAEL J. and MAUREEN HARRIS

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1328 S. ADAMS
FORT WORTH, TX 76104

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:
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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-6-18

5 Full name of contributor out-of-state PAC (ID#: _____)

SELMA FULLMER

7 Amount of contribution (\$)

25.00

6 Contributor address; City; State; Zip Code

909 EDNEY
FORT WORTH, TX 76115

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-1-18

Full name of contributor out-of-state PAC (ID#: _____)

DR. EDITH JONES

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

5502 FULLMOON DRIVE
FORT WORTH, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-2-18

Full name of contributor out-of-state PAC (ID#: _____)

JOHN and JEAN ROACH

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

2805 ALTON ROAD
FORT WORTH, TEXAS 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-2-18

Full name of contributor out-of-state PAC (ID#: _____)

NITA KIRTLEY

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

6301 OVERTON RIDGE #365
FORT WORTH, TX 76132

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:
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2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

8-3-18

5 Full name of contributor

out-of-state PAC (ID#: _____)

MARILYN and MICHAEL BERRY

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

**6217 GENDA ROAD
FORT WORTH, TX 76116**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-3-18

Full name of contributor

out-of-state PAC (ID#: _____)

GARY and JUDELL HAUENER

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

**P.O BOX 121969
FORT WORTH, TX 76121-1969**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-3-18

Full name of contributor

out-of-state PAC (ID#: _____)

MIKE and ROSIE MONCRIEF

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

**777 TAYLOR ST., SUITE 1030
FORT WORTH, TEXAS 76102**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-1-18

Full name of contributor

out-of-state PAC (ID#: _____)

TAYLOR and SHIRLEE GANDY

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

**4250 SARITA COURT
FORT WORTH, TX 76109**

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:
13 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-2-18

5 Full name of contributor out-of-state PAC (ID#: _____)
HAROLD and PAT MUCKLERoy

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code
**3455 RANCHVIEW COURT
FORT WORTH, TX 76109**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-1-18

Full name of contributor out-of-state PAC (ID#: _____)
WILL COURTNEY

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code
**5322 WEDG MONT CIRCLE N.
FORT WORTH, TX 76133**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-1-18

Full name of contributor out-of-state PAC (ID#: _____)
PACHECO KOCH PAC (BRIAN ONEILL)

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code
**6100 WESTERN PLACE
SUITE 100, FORTWORTH, TX 76107**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-1-18

Full name of contributor out-of-state PAC (ID#: _____)
Col. DIETER W. and MARY SATZ

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code
**4305 MISTY MEADOW DRIVE
FORT WORTH, TX 76133**

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:

14 of 23

2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

~~14 of 23~~

4 Date

8-1-18

5 Full name of contributor out-of-state PAC (ID#: _____)

MIKE and BEVERLY REILLY

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

1017 F. M. ROAD 5
ALEDO, TEXAS 76008

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

8-1-18

Full name of contributor out-of-state PAC (ID#: _____)

DR. PETER GRANT JORDAN

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

6721 SAVANNAH LANE
FORT WORTH, TEXAS 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-2

Full name of contributor out-of-state PAC (ID#: _____)

ARNOLD & HARRIETTE GACHMAN

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

1229 SHADY OAKS LANE
FORT WORTH, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-1

Full name of contributor out-of-state PAC (ID#: _____)

JOHN H. and LINDA MADDEX

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2120 RIDGMAR BLVD., Suite 14
FORT WORTH, TEXAS 76116

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:
15 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
7-31-18

5 Full name of contributor out-of-state PAC (ID#: _____)
MICHAEL H. PATTERSON

7 Amount of contribution (\$)
1,000.00

6 Contributor address; City; State; Zip Code
**6724 MEDINAH
FORT WORTH, TX 76132**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
7-31-18

Full name of contributor out-of-state PAC (ID#: _____)
DAN LOWRANCE

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2008 FOUR OAKS LANE
FORT WORTH, TX 76107**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
RANDALL C. and ELIZABETH GIDEON

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**425 NURSERY LANE
FORT WORTH, TX 76114**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-31-18

Full name of contributor out-of-state PAC (ID#: _____)
RED and CAROL LINDSAY

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**4345 CARTEGENA DRIVE
FORT WORTH, TX 76133**

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:
16 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
7-30-18

5 Full name of contributor out-of-state PAC (ID#: _____)
JUDITH CARRIER

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
3720 WOOTEN DRIVE
FORT WORTH, TX 76133

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
7-31-18

Full name of contributor out-of-state PAC (ID#: _____)
CARTER LLEWELLYN

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
3535 W. 7th STREET
FORT WORTH, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
G. MALCOLM LOUDEN

Amount of contribution (\$)
5,000.00

Contributor address; City; State; Zip Code
500 W. 7th ST. SUITE 1007
FORT WORTH, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
ELAINE J. and TIM PETRUS

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
3736 COUNTRY CLUB CIRCLE
FORT WORTH, TX 76109

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:
17 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
7-29-18

5 Full name of contributor out-of-state PAC (ID#: _____)
WANDA CONLIN and Dow BOREN

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1755 MARTEL AVENUE
FORT WORTH, TX 76103**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
REED PIGMAN, JR.

Amount of contribution (\$)
1,000.00

Contributor address; City; State; Zip Code
**200 TEXAS WAY
FORT WORTH, TX 76106**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
WILLIAM W. and Patricia MEADOWS

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**121 RIVERCREST DRIVE
FORT WORTH, TX 76107**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
7-30-18

Full name of contributor out-of-state PAC (ID#: _____)
STACY JANDRUCKO

Amount of contribution (\$)
1,000.00

Contributor address; City; State; Zip Code
**617 WESTWOOD AVENUE
FORT WORTH, TX 76107**

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:
18 of 23

2 FILER NAME
Jungus JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
7-28-18

5 Full name of contributor out-of-state PAC (ID#: _____)
MARY E. FAGRAS

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
**3425 WREW AVE.
FORT WORTH, TX 76133**

20.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
FRANK TESTA

Amount of contribution (\$)

7-29-18

Contributor address; City; State; Zip Code
**3605 ROGERS AVE.
FORT WORTH, TX 76109**

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
BARCLAY E and MARSHA BERDAN

Amount of contribution (\$)

7-27-18

Contributor address; City; State; Zip Code
**3639 ENCANTO DRIVE
FORT WORTH, TX 76109**

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
JEFF HOOVER

Amount of contribution (\$)

7-28-18

Contributor address; City; State; Zip Code
**2552 COCKRELL AVE
FORT WORTH, TX 76109**

100.00

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:
19 OF 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
7-27-18

5 Full name of contributor out-of-state PAC (ID#: _____)
WILLIAM and PATRICIA GORDON

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**5201 WINIFRED
FORT WORTH, TX 76133**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-3-18

Full name of contributor out-of-state PAC (ID#: _____)
GLEN and MARGARET ESTES

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**2151 GREEN OAKS Road, APT 3603
FORT WORTH, TX 76116**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-15-18

Full name of contributor out-of-state PAC (ID#: _____)
STEVE and DENISE McCUNE

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3800 WOSLEY DRIVE
FORT WORTH, TX 76133**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-14-18

Full name of contributor out-of-state PAC (ID#: _____)
MICHAEL J. and MARLENE PARKER

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**4824 GRAPEVINE TERRACE
FORT WORTH, TX 76123**

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:
20 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-13-18

5 Full name of contributor out-of-state PAC (ID#: _____)
KAREN and LARRY ANFIN

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
**7020 CASTLE CREEK COURT
FORT WORTH, TX 76132**

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
8-14-18

Full name of contributor out-of-state PAC (ID#: _____)
GERRE A UTSEY

Amount of contribution (\$)

Contributor address; City; State; Zip Code
**6126 WOODGARDEN LANE
BENBROOK, TEXAS 76132-1041**

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-14-18

Full name of contributor out-of-state PAC (ID#: _____)
LEE ROGERS

Amount of contribution (\$)

Contributor address; City; State; Zip Code
**201 PECAN STREET
FORT WORTH, TX 76102**

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
8-12-18

Full name of contributor out-of-state PAC (ID#: _____)
JOHNNY and MARJORIE STEVENS

Amount of contribution (\$)

Contributor address; City; State; Zip Code
**8120 KILLARNEY COURT
WICHITA, KANSAS 67206**

2,500.00

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: 21 of 23
2 FILER NAME JUNGUS JORDAN		3 Filer ID (Ethics Commission Filers)
4 Date 8-14-18	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRIS GARCIA	7 Amount of contribution (\$) 120.00
6 Contributor address; City; State; Zip Code 8136 CAMP BOWIE WEST FORT WORTH, TX 76116		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8-19-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAY GRANGER CAMPAIGN FUND	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1701 RIVER RUN Suite 308 FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8-24-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID PARKER	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 4008 CLARKE AVENUE FORT WORTH, TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8-31-18	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBERT and JOANIE BENDA	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 608 PAINT PONY TRAIL N. FORT 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:
22 of 23

2 FILER NAME
JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date
8-31-18

5 Full name of contributor out-of-state PAC (ID#: _____)
FREESE and NICHOLS PAC
6 Contributor address; City; State; Zip Code
4055 INTERNATIONAL PLAZA
FORT WORTH, TX 76109

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
9-25-18

Full name of contributor out-of-state PAC (ID#: _____)
CONSERVATIVE VOTERS FORUM
Contributor address; City; State; Zip Code
1144 TERRACE TRAIL
HURST, TX 76053

Amount of contribution (\$)
1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
9-29-18

Full name of contributor out-of-state PAC (ID#: _____)
DAN E. LOWRANCE
Contributor address; City; State; Zip Code
2008 FOUR OAKS LANE
FORT WORTH, TX 76107

Amount of contribution (\$)
1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/2/18

Full name of contributor out-of-state PAC (ID#: _____)
MARGARET W. and JAMES DeMOSS
Contributor address; City; State; Zip Code
2600 W. 7th St. #2644
FORT WORTH, TX 76107

Amount of contribution (\$)
100.00

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:

23 of 23

2 FILER NAME

JUNGUS JORDAN

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/18

5 Full name of contributor

out-of-state PAC (ID#: _____)

HAYDN H. CUTLER, JR.

7 Amount of contribution (\$)

2500.00

6 Contributor address; City; State; Zip Code

3825 CAMP BOWIE
FORT WORTH, TX 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
4 Date July 9, 2018	5 Payee name FORT WORTH CLUB	
6 Amount (\$) 225.16	7 Payee address; City; State; Zip Code 306 WEST SEVENTH STREET FORT WORTH, TEXAS 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER MEMBERSHIP DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date July 24, 2018	Payee name FORT WORTH PROMOTIONAL FUND AND DEVELOPMENT
Amount (\$) 100.00	Payee address; City; State; Zip Code 200 TEXAS STREET FORT WORTH, TEXAS 76102 / P.O. Box 8040 FORT WORTH, TX 76124

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRIBUTION / DONATIONS plus Flag For Southeast High School	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Aug 7, 2018	Payee name FORT WORTH CLUB
Amount (\$) 225.16 XX	Payee address; City; State; Zip Code 306 WEST SEVENTH STREET FORT WORTH, TEXAS 76102

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER MEMBERSHIP DUES	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
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4 Date 8/25/18	5 Payee name WALMART
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6 Amount (\$) 26.89	7 Payee address; City; State; Zip Code 7800 SUMMERCREEK DRIVE FORT WORTH, TEXAS 76123
-------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE "JAVA with Jungus"	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/25/18	Payee name THE DONUT PALACE II
------------------------	--

Amount (\$) 34.00	Payee address; City; State; Zip Code 5400 WOODWAY DRIVE FORT WORTH, TEXAS 76133
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE "JAVA with Jungus"	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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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Date Aug. 16/2018	Payee name FORT WORTH CLUB
-----------------------------	--------------------------------------

Amount (\$) 1,537.65	Payee address; City; State; Zip Code 306 WEST SEVENTY STREET FORT WORTH, TEXAS 76102
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE FUND RAISER	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
4 Date Sep 5, 2018	5 Payee name FORT WORTH CLUB	
6 Amount (\$) 225. ¹⁶/_{XX}	7 Payee address; City; State; Zip Code 306 West Seventh Street FORT WORTH, TEXAS 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEMBERSHIP DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date Sept 24, 2018	Payee name THE EPPSTEIN GROUP
Amount (\$) 2510. ³⁴/_{XX}	Payee address; City; State; Zip Code 1005 CONGRESS AVENUE, SUITE 800 AUSTIN, TEXAS 78701

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PRINTING EXPENSE MAILING / POSTAGE FUNDRAISER INVITATION	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Oct 5, 2018	Payee name FORT WORTH CLUB
Amount (\$) 225. ¹⁶/_{XX}	Payee address; City; State; Zip Code 306 WEST SEVENTH STREET FORT WORTH, TEXAS 76102

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) MEMBERSHIP DUES	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
4 Date Oct. 29, 2018	5 Payee name FORT WORTH METROPOLITAN BLACK CHAMBER OF COMMERCE	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code 1150 SOUTH FREEWAY FORT WORTH, TEXAS 76104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE EVENT EXPENSE PURCHASE TABLE AT ANNUAL BREAKFAST	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Nov. 7, 2018	Payee name FORT WORTH CLUB
Amount (\$) 183.61 / XX	Payee address; City; State; Zip Code 306 West SEVENTH STREET FORT WORTH, TEXAS 76102

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) MEMBERSHIP DUES OTHER	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Dec. 10, 2018	Payee name FORT WORTH CLUB
Amount (\$) 225.16 / XX	Payee address; City; State; Zip Code 306 West SEVENTH STREET FORT WORTH, TEXAS 76102

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) MEMBERSHIP DUES OTHER	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking Expense | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 50 F6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
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4 Date Dec. 15, 2018	5 Payee name FORT WORTH METROPOLITAN INDUSTRIAL Development
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6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code 1150 SOUTH FREEDWAY FORT WORTH, TEXAS 76104
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRIBUTION / DONATION COACH HUGHES INVITATIONAL BASKETBALL TOURNEY	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Dec. 24, 2018	Payee name THURSDAY MORNING BREAKFAST ASSOCIATION
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Amount (\$) 250.00	Payee address; City; State; Zip Code 777 TAYLOR STREET SUITE 1030 FORT WORTH, TEXAS 76102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER MEMBERSHIP DUES	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date Dec. 26, 2018	Payee name TEXAS ASSOCIATION OF BLACK CITY COUNCIL MEMBERS
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Amount (\$) 50.00	Payee address; City; State; Zip Code 1821 RUTHERFORD LANE, Suite 400 AUSTIN, TEXAS 78754
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER MEMBERSHIP DUES	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 6	2 FILER NAME JUNGUS JORDAN	3 Filer ID (Ethics Commission Filers)
4 Date Dec. 26, 2019	5 Payee name THE ROTARY CLUB OF FORT WORTH	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 306 WEST SEVENTH STREET FORT WORTH, TEXAS 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	MEMBERSHIP DUES	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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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