

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

**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: **19**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	Jeanette					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
	Martinez					
5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Hand-delivered or Date Postmarked
	[REDACTED]					
6 CAMPAIGN TREASURER NAME	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #		
	()					
7 CAMPAIGN TREASURER ADDRESS	MS / MRS / MR	FIRST	MI	Amount \$		
	Nakia					
8 CAMPAIGN TREASURER PHONE	NICKNAME	LAST	SUFFIX	Date Processed		
	Cole					
9 REPORT TYPE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					Date Imaged
	4805 Tahoe Drive, Fort Worth, TX 76119					
10 PERIOD COVERED	AREA CODE	PHONE NUMBER	EXTENSION	Date Processed		
	()					
11 ELECTION	<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)					
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
12 OFFICE	Month	Day	Year	Month	Day	Year
	6	1	23	THROUGH	6	30
13 OFFICE SOUGHT (if known)	ELECTION DATE		ELECTION TYPE			
	Month	Day	Year	Primary	Runoff	Other Description
14 NOTICE FROM POLITICAL COMMITTEE(S)	6 / 10 / 23		General Special			
	OFFICE HELD (if any)		OFFICE SOUGHT (if known)			
Fort Worth City Council District 11						
Additional Pages	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	Charter Schools Now PAC				
	SPECIFIC	COMMITTEE ADDRESS				
		3005 S Lamar Blvd., Ste. D109 #250, Austin, TX 78704				
	COMMITTEE CAMPAIGN TREASURER NAME					
	Rex Gore					
	COMMITTEE CAMPAIGN TREASURER ADDRESS					
	1301 W Oltorf Street, Austin, TX 78704					

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Roy Charles Brooks		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 53,973.33
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 74,018.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,785.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

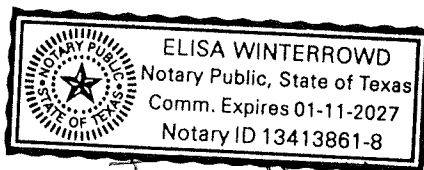
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Jeanette Martinez this the 20th day of July, 2023 to certify which, witness my hand and seal of office.

Signature of officer administering oath: [Signature] Printed name of officer administering oath: Elisa Winterrowd Title of officer administering oath: Sr Admin Assist

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Jeanette Martinez		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 40,545.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 13,428.33
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 53,316.38
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 19,935.65
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 766.82
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. 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: Sch: 1/4 Rpt: 4/19
2 FILER NAME Martinez, Jeanette		3 Filer ID
4 Date 06/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Felix 6 Contributor address; City; State; Zip Code 150 Renzel Boulevard Fort Worth, TX 76116	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Wallace Contributor address; City; State; Zip Code 915 E Cannon Street Fort Worth, TX 76104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Steve Contributor address; City; State; Zip Code 1409 Summit Avenue Fort Worth, TX 76102	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sendera Title
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chappell, Wade Contributor address; City; State; Zip Code 6329 Klamath Road Fort Worth, TX 76116	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Pearl Snap Kolaches
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Committee for Public Safety Contributor address; City; State; Zip Code 2501 Parkview Drive, Ste. 600 Fort Worth, TX 76102	Amount of Contribution (\$) \$22,100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/19
2 FILER NAME Martinez, Jeanette		3 Filer ID
4 Date 06/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) For the Children PAC 6 Contributor address; City; State; Zip Code P.O. Box 159 Fort Worth, TX 76102	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greater Fort Worth Real Estate Council PAC Contributor address; City; State; Zip Code 777 Main Street No. 2100 Fort Worth, TX 76102	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Alex Contributor address; City; State; Zip Code 245 Willow Ridge Road Fort Worth, TX 76103	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mervil Contributor address; City; State; Zip Code 1511 Oakland Blvd Fort Worth, TX 76103	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Workforce Solutions for Tarrant County
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meadows, Patricia Contributor address; City; State; Zip Code 121 Rivercrest Drive Fort Worth, TX 76107	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/19
2 FILER NAME Martinez, Jeanette		3 Filer ID
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Irma 6 Contributor address; City; State; Zip Code 2600 West 7th Street #1413 Fort Worth, TX 76107	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramon Romero Campaign Contributor address; City; State; Zip Code PO Box 181 Fort Worth, TX 76101	Amount of Contribution (\$) \$900.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramon Romero Campaign Contributor address; City; State; Zip Code PO Box 181 Fort Worth, TX 76101	Amount of Contribution (\$) \$1,800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramon Romero Campaign Contributor address; City; State; Zip Code PO Box 181 Fort Worth, TX 76101	Amount of Contribution (\$) \$2,035.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robles, Ana Christa Contributor address; City; State; Zip Code 203 E Woodin Blvd Dallas, TX 75216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) VP of Education		Employer (See Instructions) The Concilio

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/19
2 FILER NAME Martinez, Jeanette		3 Filer ID
4 Date 06/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy C Brooks Campaign 6 Contributor address; City; State; Zip Code PO Box 16868 Fort Worth, TX 76162	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Herbert Contributor address; City; State; Zip Code PO Box 3212 Houston, TX 77253	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh Ranches Limited Partnership Contributor address; City; State; Zip Code 155 Walsh Drive Aledo, TX 76008	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 8/19	
2 FILER NAME Martinez, Jeanette		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Nettles Campaign	8 Amount of contribution (\$) \$2,592.00	9 In-kind contribution description Phone Banking
	7 Contributor address; City; State; Zip Code PO Box 19254 Fort Worth, TX 76119	<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 06/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Beck Campaign	Amount of contribution (\$) \$394.68	In-kind contribution description Texting
	Contributor address; City; State; Zip Code PO Box 12328 Fort Worth, TX 76110	<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)			
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Mario	Amount of contribution (\$) \$390.17	In-kind contribution description Printing
	Contributor address; City; State; Zip Code 2744 5th Avenue Fort Worth, TX 76110	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 9/19	
2 FILER NAME Martinez, Jeanette		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/10/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Mario	8 Amount of contribution (\$) \$600.00	9 In-kind contribution description Canvassing
	7 Contributor address; City; State; Zip Code 2744 5th Avenue Fort Worth, TX 76110	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		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 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Mario	Amount of contribution (\$) \$1,200.00	In-kind contribution description Canvassing
	Contributor address; City; State; Zip Code 2744 5th Avenue Fort Worth, TX 76110	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		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)			
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramon Romero Campaign	Amount of contribution (\$) \$3,192.56	In-kind contribution description Mailer
	Contributor address; City; State; Zip Code PO Box 181 Fort Worth, TX 76101	<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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 10/19	
2 FILER NAME Martinez, Jeanette		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/10/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rio, Joseph	8 Amount of contribution (\$) \$3,606.00	9 In-kind contribution description Media
7 Contributor address; City; State; Zip Code 1818 Roberts Cut Off Road Fort Worth, TX 76114		<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) Real Estate	
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 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy C Brooks Campaign	Amount of contribution (\$) \$1,452.92	In-kind contribution description Mailer
Contributor address; City; State; Zip Code PO Box 16868 Fort Worth, TX 76162		<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)			

POLITICAL EXPENDITURES 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: Sch: 1/7 Rpt: 11/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/30/2023	5 Payee name ActBlue	
6 Amount (\$) \$14.41	7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2023	Payee name Bank of America	
Amount (\$) \$16.00	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/15/2023	Payee name Blue Base Group	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 7800 Landmark Ridge Street Fort Worth, TX 76133	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 2/7 Rpt: 12/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/01/2023	5 Payee name Castillo, Vanessa	
6 Amount (\$) \$450.00	7 Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name Castillo, Vanessa	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2023	Payee name Castillo, Vanessa	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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.

1 Total pages Schedule F1: Sch: 3/7 Rpt: 13/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/01/2023	5 Payee name Corpus, Cindy	
6 Amount (\$) \$450.00	7 Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name Corpus, Cindy	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/12/2023	Payee name Corpus, Cindy	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1701 E Robert Street #813 Fort Worth, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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.

1 Total pages Schedule F1: Sch: 4/7 Rpt: 14/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/03/2023	5 Payee name Dean, Jeremy	
6 Amount (\$) \$165.00	7 Payee address; City; State; Zip Code 3532 Purington Avenue Fort Worth, TX 76103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/11/2023	Payee name Hill, Thomasina	
Amount (\$) \$225.00	Payee address; City; State; Zip Code 3841 German Pointer Way Fort Worth, TX 76123	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/06/2023	Payee name Jefferson, Michael	
Amount (\$) \$330.00	Payee address; City; State; Zip Code 2253 Revolutionary Way, Apt. 6202 Fort Worth, TX 76119	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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.

1 Total pages Schedule F1: Sch: 5/7 Rpt: 15/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/11/2023	5 Payee name Jones, Stacy	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 3841 German Pointer Way Fort Worth, TX 76123	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/05/2023	Payee name Murphy Nasica	
Amount (\$) \$4,700.97	Payee address; City; State; Zip Code P.O. Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name Murphy Nasica	
Amount (\$) \$14,000.00	Payee address; City; State; Zip Code P.O. Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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.

1 Total pages Schedule F1: Sch: 6/7 Rpt: 16/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/13/2023	5 Payee name Murphy Nasica	
6 Amount (\$) \$27,500.00	7 Payee address; City; State; Zip Code P.O. Box 1648 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2023	Payee name Navarro, Alma	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 2855 Burchill Road Fort Worth, TX 76105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Banking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name Sanchez, Daniel	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 1304 Stone Creek Drive Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 17/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/12/2023	5 Payee name Sanchez, Daniel	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 1304 Stone Creek Drive Mansfield, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name Sanchez, Marissa	
Amount (\$) \$180.00	Payee address; City; State; Zip Code 5177 Britton Ridge Lane Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2023	Payee name Sanchez, Marissa	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 5177 Britton Ridge Lane Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Greeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F2: Sch: 1/1 Rpt: 18/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/30/2023	6 Payee name Murphy Nasica
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7 Amount (\$) \$19,935.65	8 Payee address; City; State; Zip Code P.O. Box 1648 Austin, TX 78767
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing/Canvassing/Mailers/Text/Push Cards/Bonus
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 19/19	2 FILER NAME Martinez, Jeanette	3 Filer ID
4 Date 06/01/2023	5 Payee name Capital Grille	
6 Amount (\$) \$766.82 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 800 Main Street Fort Worth, TX 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held