CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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: 13									
3 CANDIDATE / OFFICEHOLDER	Ms/MRs/MR Mrs.	FIRST Jeanette			МІ		OFFICE	USE ONLY	
NAME	NICKNAME	LAST Martinez			SUFFIX	· · Date Re	ceived		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX;	APT / SUIT	E#; CITY;	STAT	E; ZIP CODE	JF	CSO RI NN 16 '2 CSO R	4 PM2:34	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER		EXTE	ENSION	. 652000 1460		or Date Postmarked	
6 CAMPAIGN	MS / MRS / MR	FIRST			МІ	Receipt	#	Amount \$	
TREASURER NAME	Ms.	Nakia				Date Pro	Date Processed		
	NICKNAME	Cole			SUFFIX	Date Im	naged		
7 CAMPAIGN TREASURER ADDRESS	street address (NO PO BOX PLEASE); Drive, Fort V			CITY;	Sim	STATE;	ZIP CODE	
(Residence or Business)									
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	b.	EXTE	ENSION				
9 REPORT TYPE	January 15	30th d	ay before election		Runoff		15th day aff treasurer ap (Officeholde		
	July 15	8th day	y before election		Exceeded Modified Reporting Limit		Final Repor	t (Attach C/OH - FR)	
10 PERIOD COVERED	Month 07	Day Yes		rhrough	Mont 12	Day 31	Year / 23		
11 ELECTION	ELECTION DA	TE			ELECTION TY	PE			
	Month Day	Year	Primary General	Runoff Special	Other Descriptio	n			
12 OFFICE	OFFICE HELD (if any) Councilmemb	er District 11		13 OFF	ICE SOUGHT (if kn	own)			
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	EHOLDER. THESE EXI AND OFFICEHOLDERS COMMITTEE NAM	PENDITURES MAY HA ARE REQUIRED TO R	AVE BEEN MA	ADE WITHOUT THE C	ANDIDATE'S O	R OFFICEHOL	MMITTEES TO SUPPORT .DER'S KNOWLEDGE OR F SUCH EXPENDITURES.	
Additional Pages	GENERAL	COMMITTEE CAM		NAME					
	SPECIFIC	COMMITTEE CAM		39/3/3/3/3/4/3/4					
		COMMITTEE CAM	PAIGN TREASURE	K AUDRES					
		G	O TO PAG	E 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Jeanette Martinez		16 Filer	ID (Ethics (Commission Filers)
17 CONTRIBUTION TOTALS	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)		\$ 1	7,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 2	6,322.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY	\$	1,166.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE	\$	0.00
	swear, or affirm, under penalty of perjury, that the accompanying report is true	e and co	rrect and in	cludes all information
le le	N_			
	Signature of Ca	andidata	or Officebo	lder .
	Signature of Ca	andidate i	or Omcerio	, aoi
	Please complete either option below	v:		
(1) Affidavit	ELISA WINTERROWD Notary Public, State of Texas Comm. Expires 01-11-2027 Notary ID 13413861-8			
Sworn to and subscribed	T 11 10 1:	16th	day of	January.
20 21 to certify	which, witness my hand and seal of office.		Λ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Signature of officer administ	ering oath Printed name of officer administering oath	Dr.	Title of offi	ocer administering oath
	OR			_
(2) Unsworn Declarat	ion			
My name is	, and my date of birth is	s		•
My address is				·
Executed in			(zip code)	
	County, State of , on the day of (mont	th)	,(year)
	Signature of Candi	idate/Offic	ceholder (D	eclarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

1	19 FILER NAME Jeanette Martinez 20 Filer ID (Ethics Com				
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	17,600		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$			
4.	SCHEDULE E: LOANS	\$			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	vs \$	18,061.43		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	5,185.65		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUT	rions \$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$			
9.	■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	3,075.26		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH \$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIO	NS \$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETU TO FILER	JRNED \$			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/13 FILER NAME Filer ID Martinez, Jeanette 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$500.00 11/21/2023 Abrams, Dick 6 Contributor address; City; State; Zip Code 6750 Locke Avenue, 3rd Floor Fort Worth, TX 76116 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) FF, LLC Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 12/11/2023 Adam Medrano Consulting Contributor address; City; State; Zip Code TX Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$50.00 12/11/2023 Allison, Jimika Contributor address; City; State; Zip Code 4525 Adobe Drive Fort Worth, TX 76123 Principal occupation / Job title (See Instructions) Employer (See Instructions) City of Fort Worth Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: Arizola, Amanda \$100.00 12/11/2023 Contributor address; City; State; Zip Code PO Box 430 Hurst, TX 76053 Employer (See Instructions) Principal occupation / Job title (See Instructions) **AFN** NTX PO Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 12/21/2023 B Glen Whitley Campaign Contributor address; City; State; Zip Code 345 Charleston Pl. Hurst, TX 76054 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/6 Rpt: 5/13 FILER NAME Filer ID Martinez, Jeanette Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 12/28/2023 Carillo Funeral Directors 6 Contributor address; City; State; Zip Code 2615 S Buckner Blvd. Dallas, TX 75227 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$200.00 12/01/2023 Casarez, Richard Contributor address; City; State; Zip Code 6900 La Cantera Drive Fort Worth, TX 76108 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Oncor Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50.00 12/08/2023 Cole, Nakia Contributor address; City; State; Zip Code 4805 Tahoe Drive Fort Worth, TX 76119 Principal occupation / Job title (See Instructions) Employer (See Instructions) **FWISD** Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$500.00 12/21/2023 Davis, Jeff Contributor address; City; State; Zip Code 2325 Mistletoe Drive Fort Worth, TX 76110 Employer (See Instructions) Principal occupation / Job title (See Instructions) Republic Title Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$1,000.00 FT. Worth Retired Firefighters Committee for Responsible Government 12/21/2023 Contributor address; City; State; Zip Code 103 Green Oaks Ct. Hudson Oaks, TX 76087 **Employer (See Instructions)** Principal occupation / Job title (See Instructions)

	WONE	RY POLITICAL	CONTRIBUTIO)NS		SCHEDUL	E A1
	The Instru	ion Guide explains h	ow to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/13	
:	FILER NAME	1				Filer ID	
1	Date 12/21/2023	—			7	Amount of Contribution (\$)	\$5,000.00
		Fort Worth, TX 76107		O Employer (Con Instance)	Ţ		
3	Principal occu	ation / Job title (See Instruct	ons)	9 Employer (See Instruction:	s)		
	Date 12/21/2023	Full name of contributor Firehouse Auto Sales Contributor address; City 4900 NE 28th Street	out-of-state PAC (ID#:		••	Amount of Contribution (\$)	\$100.00
		Haltom City, TX 76117	,				
	Principal occu	ation / Job title (See Instruct	ions)	Employer (See Instruction	ıs)		
	Date 12/21/2023	Full name of contributor Fox, Eric Contributor address; Cit 3513 Overton Park Dr				Amount of Contribution (\$)	\$250.00
		Fort Worth, TX 76109					
	Principal occu	ation / Job title (See Instruc	tions)	Employer (See Instruction Lockheed Martin	ns)		
	Date 07/18/2023	Full name of contributor Fox, Eric Contributor address; Cit 3513 Overton Park Di	y; State; Zip Code	:)	•••	Amount of Contribution (\$)	\$500.00
	Principal occ	Fort Worth, TX 76109 ation / Job title (See Instruc		Employer (See Instruction Lockheed Martin	ns)		
	Date 12/21/2023	Full name of contributor Geren, Preston Contributor address; Cit 1200 Washington Ter			•••	Amount of Contribution (\$)	\$250.00
		Fort Worth, TX 76107					
	Principal occ	eation / Job title (See Instruc		Employer (See Instruction Sid Richardson Found		on	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/6 Rpt: 7/13 2 FILER NAME Filer ID Martinez, Jeanette 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$500.00 07/19/2023 Hammer and Nails Club-Candidate 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) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 12/11/2023 King, Benjamin Contributor address; City; State; Zip Code 126 Mesquite Meadow Lane Fort Worth, TX 76126 Principal occupation / Job title (See Instructions) Employer (See Instructions) Metro Golf Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$250.00 11/20/2023 Lewis, Glenn Contributor address; City; State; Zip Code 5600 Rockhill Road Fort Worth, TX 76112 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$1,500.00 07/05/2023 Linebarger Goggan Blair & Sampson Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 12/21/2023 Martinez, David Contributor address; City; State; Zip Code 4920 Fair Park Blvd. Fort Worth, TX 76115 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/6 Rpt: 8/13 FILER NAME Filer ID Martinez, Jeanette 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$500,00 12/08/2023 Martinez, Jeanette 6 Contributor address; City; State; Zip Code P.O. Box 34952 Fort Worth, TX 76162 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) **Tarrant County** out-of-state PAC (ID#:_ Amount of Contribution (\$) Date Full name of contributor 07/05/2023 \$500.00 Michael D. Crain - Campaign Account Contributor address; City; State; Zip Code 4450 Oak Park Lane #100427 Fort Worth, TX 76109 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 12/08/2023 Montalvo, Lorena Contributor address; City; State; Zip Code 3015 S Adams Street Fort Worth, TX 76110 Employer (See Instructions) Principal occupation / Job title (See Instructions) Mercy Clinic COO Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 11/27/2023 Montgomery, Steve Contributor address; City; State; Zip Code 500 Throckmorton Street #1704 Fort Worth, TX 76120 Employer (See Instructions) Principal occupation / Job title (See Instructions) Fort Worth Chamber Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$250.00 12/11/2023 Moreno, Jesse Contributor address; City; State; Zip Code 4809 Victor Street Dallas, TX 75246 Principal occupation / Job title (See Instructions) Employer (See Instructions) City of Dallas

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/6 Rpt: 9/13 3 Filer ID FILER NAME Martinez, Jeanette 5 Full name of contributor 7 Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: \$250.00 11/16/2023 Perez, Mario 6 Contributor address; City; State; Zip Code 2744 5th Avenue Fort Worth, TX 76110 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 12/11/2023 Perez, Mario Contributor address; City; State; Zip Code 2744 5th Avenue Fort Worth, TX 76110 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$300.00 12/16/2023 Robles, Ana Christa Contributor address; City; State; Zip Code 203 E Woodin Blvd Dallas, TX 75216 Employer (See Instructions) Principal occupation / Job title (See Instructions) The Concilio VP of Education Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 11/17/2023 Roby III, Richard Contributor address; City; State; Zip Code 6234 S Kylark Circle North Richland Hills, TX 76180 Employer (See Instructions) Principal occupation / Job title (See Instructions) **TXAMRON**

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District 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. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 1/2 Rpt: 10/13 Martinez, Jeanette Date Payee name 12/31/2023 ActBlue Payee address; State; Zip Code 6 Amount (\$) City; \$70.53 P.O. Box 441146 Somerville, MA 02144 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Transaction Fees Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/31/2023 Bank of America State; Zip Code Amount (\$) Payee address; City; \$80.00 TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly Account Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/07/2023 Firestone and Robertson Distilling Co. Payee address; City; State; Zip Code Amount (\$) \$3,160.90 2601 Whiskey Ranch Road Fort Worth, TX 76119 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraiser Venue Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OF EXPENDITURE Consulting Expense Office sought Office held		Candidate/Officeholder/Politica Credit Card Payment	
Date O71,0/2023	1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
O7120/2023		-	
Amount (\$) \$3,750.00 7 Payee address; City: State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (8) Category (see Categories listed at the top of this schedule) Consulting Expense (1) Consu	4	Date	5 Payee name
### Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schiedule) (b) Description Cancil fit aware unside of Texas. Complete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Complete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Complete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Complete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Camplete Schiedule T. Cancil st Austin, TX, officeholder individual of Texas. Camplete Schiedule T. Campl		07/10/2023	Murphy Nasica
Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categorise listed at the top of this schedule) (b) Description Christ if rawal custide of Texas. Complete Schedule T. Christ if favalin. TX, officeholder faving expense	6	Amount (\$)	7 Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date 07/28/2023 Amount (\$) PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH (b) Description Office held		\$3,750.00	PO Box 1648
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date 07/28/2023 Amount (\$) PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct expenditure to benefit C/OH (b) Description Office held			
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Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office sought Office held	8		
Complete ONLY if direct expenditure to benefit C/OH Date O7/28/2023 Payee name Murphy Nasica Amount (\$) Payee Address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Date Payee name Murphy Nasica Payee name Office sought Office held Payee name Murphy Nasica Amount (\$) Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) (b) Description Consulting Expense Consulting Expense (a) Category (see Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct response Consulting Expense Complete ONLY if direct response Consulting Expense Complete ONLY if direct response Candidate/Officeholder name Office sought Office sought Office held expenditure to benefit C/OH			Consuming Expense
Complete ONLY if direct expenditure to benefit C/OH Date			
Date 07/28/2023 Amount (\$) \$1,000.00 Payee address; City; State; Zip Code PD Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE Candidate/Officeholder name 12/29/2023 Amount (\$) \$1,000.00 Candidate/Officeholder name Office sought Office held Payee name Murphy Nasica Amount (\$) \$10,000.00 Po Box 1648 Austin, TX 78767 PURPOSE expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
Date 07/28/2023 Amount (\$) \$1,000.00 Payee address; City; State; Zip Code PD Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE Candidate/Officeholder name 12/29/2023 Amount (\$) \$1,000.00 Candidate/Officeholder name Office sought Office held Payee name Murphy Nasica Amount (\$) \$10,000.00 Po Box 1648 Austin, TX 78767 PURPOSE expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	_	Operation ONLY if discont	Condidate/Officeholder name Office cought Office held
Amount (\$) Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE Consulting Expense Candidate/Officeholder name Office sought Office held Austin, TX 78767 Candidate/Officeholder name Office sought Office held Austin, TX 78767 Candidate/Officeholder name Office sought Office held Date 12/29/2023 Amount (\$) Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office held	9		
Amount (\$) \$1,000.00 Payee address; City; State; Zip Code Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Consulting Expense (b) Description Coheck if rawel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct expenditure to benefit C/OH Date 12/29/2023 Amount (\$) Payee name Murphy Nasica Amount (\$) Payee address; City; State; Zip Code Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense Consulting Expense Consulting Expense Candidate/Officeholder name Office sought Office louiside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		Date	Payee name
### Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		07/28/2023	Murphy Nasica
### Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code
Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense Consulting Expense Consulting Expense Candidate/Officeholder name Office sought Office held Payee name Murphy Nasica Amount (\$) Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			PO Box 1648
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if fravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct expenditure to benefit C/OH Date 12/29/2023 Amount (\$) Payee name Murphy Nasica Amount (\$) Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Office held Office held		• ••••	
Consulting Expense Consul			Austin, TX 78767
Complete ONLY if direct expenditure to benefit C/OH Date Payee name Murphy Nasica Amount (\$) Payee address; City; State; Zip Code \$10,000.00 PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Consulting Expense Conflict Sought Office sought Office held Consulting Expense Conflict Sought Office sought Office held Consulting Expense Conflict Sought Office sought Office held			
Complete ONLY if direct expenditure to benefit C/OH Date 12/29/2023 Amount (\$) Payee address; City; State; Zip Code \$10,000.00 PO Box 1648 Austin, TX 78767 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Consulting Expense Candidate/Officeholder name Office sought Office held			Consulting Expense
Complete ONLY if direct expenditure to benefit C/OH Date			
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UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule F2: 2 FILER NAME 3 Sch: 1/1 Rpt: 12/13 Martinez, Jeanette \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 6 Payee name 12/31/2023 Murphy Nasica Payee address; State; Zip Code Amount (\$) City; \$5,185.65 PO Box 1648 Austin, TX 78767 TYPE OF 9 Non-Political X Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Expenses Office held Candidate/Officeholder name 11 Complete ONLY if direct Office sought expenditure to benefit C/OH Version V3.5.1.0bfcfb67 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Advertising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Fees Food/Beverage Expense Polling Expense Travel in District Travel Out of District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule G: 2 FILER NAME Martinez, Jeanette Sch: 1/1 Rpt: 13/13 Date Payee name Chadra Mezza and Grill 12/11/2023 Payee address; State; Zip Code 6 Amount (\$) City; \$2,365.26 1701 Galveston Avenue Reimbursement from political contributions intended Fort Worth, TX 76110 Check if travel outside of Texas. Complete Schedule T. (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Я Check if Austin, TX, officeholder living expense OF **Event Expense EXPENDITURE** Fundraiser Food & Drink Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 12/11/2023 Marquise Productions State; Zip Code Payee address; City; Amount (\$) \$600,00 Reimbursement from political contributions intended TX PURPOSE Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF **Event Expense EXPENDITURE** Fundraiser Entertainment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name **USPS** 11/15/2023 State; Zip Code City; Amount (\$) Payee address; 7101 Bryant Irvin Road \$110.00 Reimbursement from political contributions intended Fort Worth, TX 76132 Check if travel outside of Texas. Complete Schedule T. Description **PURPOSE** Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** PO Box Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH