

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

<b>The SPAC Instruction Guide explains how to complete this form.</b>		1 Filer ID	2 Total pages filed: 10
3 COMMITTEE NAME Our Community Our Future 2022		<b>OFFICE USE ONLY</b>	
		Date Received	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	777 Taylor Street Suite 900 Fort Worth, TX 76102		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	MS.	ROSA	
NICKNAME		LAST	SUFFIX
NAVEJAR			
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	777 TAYLOR STREET		SUITE 900 FORT WORTH TX 76102
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX;		APT / SUITE #; CITY; STATE; ZIP CODE
	777 TAYLOR STREET		SUITE 900 FORT WORTH TX 76102
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(817)	336.2491	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded modified reporting limit
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Dissolution (Attach PAC-DR)
		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	04/28/2022		07/01/2022
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 05/07/2022	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Special <input type="checkbox"/> Other

**CSO REC'D  
JUL 5 '22 PM3:42**

**GO TO PAGE 2**

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM SPAC  
COVER SHEET PG 2**

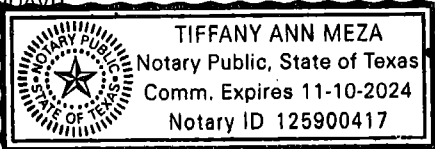
**12 COMMITTEE NAME**  
Our Community Our Future 2022

**13 Filer ID**

<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>  _____  <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>  _____	
	<input checked="" type="checkbox"/> Measure	<b>BALLOT IDENTIFICATION / #</b> FWPROP A-E	<b>ELECTION DATE</b> Month Day Year 05/07/2022
	<b>DESCRIPTION</b> TO SUPPORT CITY OF FORT WORTH PROPS A,B,C,D,E		

<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$	\$0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	\$42,000.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$93,000.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$0.00

**16 AFFIDAVIT**



TIFFANY ANN MEZA  
Notary Public, State of Texas  
Comm. Expires 11-10-2024  
Notary ID 125900417

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.

*Rosa Navajar*  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rosa Navajar, this the 15<sup>th</sup> day of July, 2022, to certify which, witness my hand and seal of office.

*[Signature]*  
\_\_\_\_\_  
Signature of officer administering oath

Tiffany Meza  
\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - SPAC**

<b>17 COMMITTEE NAME</b> Our Community Our Future 2022	<b>18 Filer ID</b>
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<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 10,500.00
5.	<input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,500.00
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 93,000.00
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/1 Rpt: 4/10
<b>2</b> FILER NAME Our Community Our Future 2022		<b>3</b> Filer ID
<b>4</b> Date 05/10/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGUIRRE & FIELDS LP	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code 7215 NEW TERRITORY BLVD SUITE 100 SUGAR LAND, TX 77479		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILA Jr., JOHN	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 1936 WARNER ROAD  FORT WORTH, TX 76110		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS & MCDONNELL TEXAS PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 10709 MARSHA LANE  HOUSTON, TX 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUITT-ZOLLARS INC TEXAS PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 5430 LBJ FREEWAY SUITE 1500 DALLAS, TX 75240		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALSH RANCHES LIMITED PARTNERSHIP	Amount of Contribution (\$) \$20,000.00
Contributor address; City; State; Zip Code 155 WALSH DRIVE  ALEDO, TX 76008		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 5/10
2 FILER NAME Our Community Our Future 2022		3 Filer ID
4 Date 05/02/2022	5 Corporation / Labor Organization name COLUMBIA STRATEGIC CONSULTING GROUP LLC	7 Amount of contribution (\$) \$500.00
	6 Corporation / Labor Organization address; City; State; Zip Code 306 WEST 7TH STREET SUITE 505 FORT WORTH, TX 76102	
Date 05/02/2022	Corporation / Labor Organization name HDR, INC.	Amount of contribution (\$) \$5,000.00
	Corporation / Labor Organization address; City; State; Zip Code 1917 SOUTH 67TH STREET  OMAHA, NE 68106	
Date 05/02/2022	Corporation / Labor Organization name REAL ESTATE COUNCIL OF GREATER FORT WORTH	Amount of contribution (\$) \$5,000.00
	Corporation / Labor Organization address; City; State; Zip Code PO BOX 479474  FORT WORTH, TX 76147	

**NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION**

**SCHEDULE C2**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule C2: Sch: 1/1 Rpt: 6/10</p>	
<p><b>2</b> FILER NAME Our Community Our Future 2022</p>		<p><b>3</b> Filer ID</p>	
<p><b>4</b> Date 06/27/2022</p>	<p><b>5</b> Corporation / Labor Organization name FORT WORTH CHAMBER OF COMMERCE</p> <hr/> <p><b>6</b> Corporation / Labor Organization address; City; State; Zip Code 777 TAYLOR STREET SUITE 900 FORT WORTH, TX 76102</p>	<p><b>7</b> Amount of contribution(\$) \$1,500.00</p>	<p><b>8</b> In-kind contribution description Administrative Support</p>
		<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>	

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 7/10	<b>2</b> FILER NAME Our Community Our Future 2022	<b>3</b> Filer ID
<b>4</b> Date 06/13/2022	<b>5</b> Payee name FULCRUM STRATEGY PARTNERS	
<b>6</b> Amount (\$) \$12,961.21  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGNS (PRINTING, DISTRIBUTING, & MAINTENANCE) FOR COMMITTEE
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/13/2022	Payee name FULCRUM STRATEGY PARTNERS	
Amount (\$) \$1,375.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 CREATION OF LOGO FOR COMMITTEE
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/13/2022	Payee name FULCRUM STRATEGY PARTNERS	
Amount (\$) \$3,269.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 DATABASE MANAGEMENT FOR COMMITTEE
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 8/10	<b>2</b> FILER NAME Our Community Our Future 2022	<b>3</b> Filer ID
<b>4</b> Date 06/13/2022	<b>5</b> Payee name FULCRUM STRATEGY PARTNERS	
<b>6</b> Amount (\$) \$19,528.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MAILER (DESIGN, PRINTING, PHOTOGRAPHY) FOR COMMITTEE
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/13/2022	Payee name FULCRUM STRATEGY PARTNERS	
Amount (\$) \$5,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 WEBSITE DESIGN FOR COMMITTEE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/13/2022	Payee name FULCRUM STRATEGY PARTNERS	
Amount (\$) \$6,833.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185	
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 CONSULTING SERVICES FOR COMMITTEE
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: 3/3 Rpt: 9/10	2 FILER NAME Our Community Our Future 2022	3 Filer ID
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4 Date 06/13/2022	5 Payee name FULCRUM STRATEGY PARTNERS
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6 Amount (\$) \$15,000.00  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 SURVEY FOR COMMITTEE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/27/2022	Payee name FULCRUM STRATEGY PARTNERS
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Amount (\$) \$28,532.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 100511  FORT WORTH, TX 76185
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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 CONSULTING SERVICES FOR COMMITTEE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**POLITICAL COMMITTEE  
AFFIDAVIT OF DISSOLUTION**

**FORM PAC-DR**

10 of 10

The Instruction Guide explains how to complete this form. **\*\*Complete only if "Report Type" on page 1 is marked "Dissolution" \*\***

1 COMMITTEE NAME

Our Community Our Future 2022

2 Filer ID

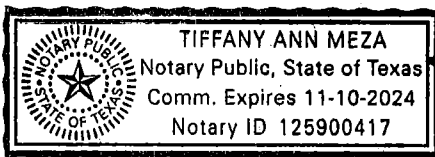
3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

*Rosa Navejar*

Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rosa Navejar, this the 1<sup>st</sup> day of July, 2022, to certify which, witness my hand and seal of office.

*Tiffany Meza*  
Signature of officer administering oath

Tiffany Meza  
Printed name of officer administering oath

Title of officer administering oath