

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 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 21
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR NICKNAME "Bernie"	FIRST Bernd LAST Scheffler	MI R SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; 3028 Willing Ave Fort Worth, TX 76110		APT / SUITE #; CITY; STATE; ZIP CODE
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817)		PHONE NUMBER 588 6162 EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs NICKNAME Elbitar	FIRST Christina LAST	MI L SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 3016 6th Ave Fort Worth, TX 76110 APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)		
9 REPORT TYPE		PHONE NUMBER 723 5356 EXTENSION	
<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 type="checkbox"/> July 15 <input checked="" 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 4 / 10 / 2014 THROUGH 5 / 1 / 2014		
11 ELECTION	ELECTION DATE Month Day Year 5 / 10 / 2014 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) OFFICE SOUGHT (if known) Fort Worth City Council Dist. 9		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

Bernie Scheffler

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 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)

\$

2010.

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

364341

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

2895.04

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.

Bernd R Scheffler
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bernd Scheffler, this the 14 day of May, 20 14, to certify which, witness my hand and seal of office.

Mary Ann Purvis
Signature of officer administering oath

Mary Ann Purvis
Printed name of officer administering oath

VP
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

10

2 FILER NAME

Bernie Schaffer

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/11/
2014

5 Full name of contributor

☐ out-of-state PAC (ID#:

Timothy Matko

6 Contributor address; City; State; Zip Code

920 Ravenswood Drive
Grapevine, TX 76051

7 Amount of
contribution (\$)

25.

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/16

Full name of contributor

☐ out-of-state PAC (ID#:

Jay Ellis

Contributor address; City; State; Zip Code

16 McCullam Road
Burleson, TX 76028

Amount of
contribution (\$)

50.

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/16

Full name of contributor

☐ out-of-state PAC (ID#:

Clayton Darnell

Contributor address; City; State; Zip Code

9714 Twin Creek Dr
Dallas, TX 75228

Amount of
contribution (\$)

25.

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/16

Full name of contributor

☐ out-of-state PAC (ID#:

Megan Henderson

Contributor address; City; State; Zip Code

2832 Ryan Place
Fort Worth, TX 76110

Amount of
contribution (\$)

25.

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Director of Excellent Things

Fort Worth, South, Inc.

Date

4/16

Full name of contributor

☐ out-of-state PAC (ID#:

Kathryn Pokladnik

Contributor address; City; State; Zip Code

2601 Syracuse Dr.
Irving, TX 75062

Amount of
contribution (\$)

25.

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/15/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ben Isgur</i> 6 Contributor address; City; State; Zip Code <i>2504 Sandage Ave Fort Worth, TX 76109</i>	7 Amount of contribution (\$) <i>50.</i> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <i>Consultant</i>		10 Employer (See Instructions) <i>PWC</i>	
Date <i>4/15/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Stephanie Isak</i> Contributor address; City; State; Zip Code <i>1410 Fountain View Dr Houston, TX 77057</i>	Amount of contribution (\$) <i>10.</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/15/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brenda Davis</i> Contributor address; City; State; Zip Code <i>1204 Lipscomb Fort Worth, TX 76104</i>	Amount of contribution (\$) <i>20.</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/10/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Bernie Scheffler</i> Contributor address; City; State; Zip Code <i>3028 Willing Ave, 76110</i>	Amount of contribution (\$) 7. <i>7.</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable) <i>Notary Fee</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/16/2014</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Bernie Scheffler</i> Contributor address; City; State; Zip Code <i>3028 Willing Ave, 76110</i>	Amount of contribution (\$) <i>100.</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/16/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Patrick Yagle</i>	7 Amount of contribution (\$) <i>25.</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3017 Willing Ave Fort Worth, TX 76110</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Engineer</i>		10 Employer (See Instructions) <i>Lockheed Martin</i>	
Date <i>4/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Kevin Lee</i>	Amount of contribution (\$) <i>25</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3524 Cattlebarn Dr Roanoke, TX 76262</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Race Promoter</i>		Employer (See Instructions) <i>Self Employed</i>	
Date <i>4/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Justin Lauderdale</i>	Amount of contribution (\$) <i>10.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>16540 Splitridge Court Fort Worth, TX 76108</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Christopher Travelise</i>	Amount of contribution (\$) <i>100.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>12808 Medina River Way Austin, TX 78732</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Thomas J Daniels</i>	Amount of contribution (\$) <i>250.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>626 Larkwood Dr San Antonio, TX 78209</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/17/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Keith Maddox</i>	7 Amount of contribution (\$) <i>10.</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>7428 Ewing Ave Fort Worth, TX 76116</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John Nile Fischer</i>	Amount of contribution (\$) <i>25.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2837 Townsend Dr Fort Worth, TX 76110</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ryan Roskey</i>	Amount of contribution (\$) <i>10.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1523 Gwasso St Apt 4 Fort Worth, TX 76107</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Liat Weingart</i>	Amount of contribution (\$) <i>50.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>44 Montgomery St. San Francisco, CA 94104</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Angela Landrum</i>	Amount of contribution (\$) <i>10.</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1309 Bardfield Ave Garland, TX 75041</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/17</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>James Finley</i> 6 Contributor address; City; State; Zip Code <i>61 Douglas Ct E Meadow, NY 11554</i>	7 Amount of contribution (\$) <i>25.</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jerry Hawkins</i> Contributor address; City; State; Zip Code <i>Fort Worth TX</i>	Amount of contribution (\$) <i>20.</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John Hernandez</i> Contributor address; City; State; Zip Code <i>213 Ranch House Rd Willow Park, TX 76087</i>	Amount of contribution (\$) <i>50.</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Michelle Johnson</i> Contributor address; City; State; Zip Code <i>161 Camoflege Circle Aledo, TX 76008</i>	Amount of contribution (\$) <i>20</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/18</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brian McCarthy</i> Contributor address; City; State; Zip Code <i>4813 Westridge Ave, 76116</i>	Amount of contribution (\$) <i>10</i>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Schaffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/18/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Joshua Wright</i> 6 Contributor address; City; State; Zip Code <i>2822 Marigold Ave, 76111</i>	7 Amount of contribution (\$) <i>10</i> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brooke Hampshire</i> Contributor address; City; State; Zip Code <i>2403 Little Creek Richardson, TX 75080</i>	Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Stephen Kinch</i> Contributor address; City; State; Zip Code <i>2904 Hartwood Dr Fort Worth TX 76109</i>	Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Erin Kinch</i> Contributor address; City; State; Zip Code <i>2904 Hartwood Dr Fort Worth TX 76109</i>	Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Lauren Lay</i> Contributor address; City; State; Zip Code <i>1226 Mulholland Dr Grapevine, TX 76051</i>	Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Barnie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/19/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Rachel Spire</i> 6 Contributor address; City; State; Zip Code <i>1226 Mulholland Dr Grapevine, TX 76051</i>	7 Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>David LaViolette</i> Contributor address; City; State; Zip Code <i>7600 Echo Hill Fort Worth TX 76148</i>	Amount of contribution (\$) <i>10</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Dan Barrett</i> Contributor address; City; State; Zip Code <i>6844 Brants Ln Fort Worth TX 76116</i>	Amount of contribution (\$) <i>75</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/23</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Debra Barrett</i> Contributor address; City; State; Zip Code <i>6844 Brants Ln Fort Worth TX 76116</i>	Amount of contribution (\$) <i>75</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>George Gdovin</i> Contributor address; City; State; Zip Code <i>2944 Willing Ave Fort Worth TX 76110</i>	Amount of contribution (\$) <i>25</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Schaffer</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/24/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Richard Wilks</i>	7 Amount of contribution (\$) <i>50</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>Arlington, TX 76004</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>4/24</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Peter Gilliland</i>	Amount of contribution (\$) <i>10</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>806 E 3rd St Fort Worth, TX 76102</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Barista</i>		Employer (See Instructions) <i>Avoca Coffee</i>	
Date <i>4/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Aguila McGrew</i>	Amount of contribution (\$) <i>10</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3309 Victorian Manor Ln Houston, TX 77047</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Tim Keith</i>	Amount of contribution (\$) <i>10</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2724 Willing Ave Fort Worth, TX 76110</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>4/28</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brian Holland</i>	Amount of contribution (\$) <i>10</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2749 Ryan Place Dr Fort Worth, TX 76110</i>		(If travel outside of Texas, complete Schedule T)	
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/22/2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Steve Halliday</i>	7 Amount of contribution (\$) <i>50</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>1601 S Henderson Fort Worth, TX 76104</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Realtor</i>		10 Employer (See Instructions) <i>Self</i>	
Date <i>4/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Nathan Landry</i>	Amount of contribution (\$) <i>25</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>Fort Worth, TX</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Bicycle sales guru</i>		Employer (See Instructions) <i>Colonel's Bicycles</i>	
Date <i>5/1</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>John Troppy</i>	Amount of contribution (\$) <i>100</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>5312 Aurora Dr Austin, TX 78756</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/1</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Toshko Vankov</i>	Amount of contribution (\$) <i>100</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1608 Timber Glen Dr Bedford, TX 76022</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Shop guy</i>		Employer (See Instructions) <i>Trinity Bicycles</i>	
Date <i>4/30</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Bernie Scheffler</i>	Amount of contribution (\$) <i>147</i>	In-kind contribution description (if applicable) <i>Postage Stamps</i>
Contributor address; City; State; Zip Code <i>3028 Willing Ave, 76110</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) <i>Self</i>	
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bernie Scheffler</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5/11 2014</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jerry Hawkins</i> 6 Contributor address; City; State; Zip Code <i>Fort Worth, TX</i>	7 Amount of contribution (\$) <i>20</i> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>5/1</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Bernie Scheffler</i> Contributor address; City; State; Zip Code <i>3028 Willing Ave Fort Worth, TX</i>	Amount of contribution (\$) <i>181</i> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 9	2 FILER NAME Bernie Schaffler	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/11	5 Payee name Paypal, Inc	
6 Amount (\$) 1.03	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fee	(b) Description (If travel outside of Texas, complete Schedule T) merchant processing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 4/16	Payee name Paypal, Inc	
Amount (\$) .59	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule T) Processing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 4/16	Payee name Paypal	
Amount (\$) 1.75	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule T) Proc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 4/16	Payee name Paypal	
Amount (\$) 1.03	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule T) Proc.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Bernie Schiller</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/16</i>		5 Payee name <i>Paypal</i>			
6 Amount (\$) <i>1.03</i>		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Fee</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>1.03</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>1.03</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>1.03</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>1.03</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Bernie Schaffer</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/16</i>		5 Payee name <i>Paypal</i>			
6 Amount (\$) <i>.59</i>		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Fee</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>3.20</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/16</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>.88</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>4/17</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>.59</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Bernie Schaffer</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/17</i>		5 Payee name <i>Paypal</i>			
6 Amount (\$) <i>1.03</i>		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Fee</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/17</i>		Payee name <i>Paypal</i>			
Amount (\$) <i>.59</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/17</i>		Payee name <i>PayPal</i>			
Amount (\$) <i>.59</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/17</i>		Payee name <i>PayPal</i>			
Amount (\$) <i>1.75</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <u>Bernie Schaffar</u>	3 ACCOUNT # (Ethics Commission Filers)			
4 Date <u>4/17</u>	5 Payee name <u>Paypal</u>				
6 Amount (\$) <u>1.03</u>	7 Payee address; City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <u>Fee</u>	(b) Description (If travel outside of Texas, complete Schedule T) <u>Proc.</u>			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Candidate / Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date <u>4/18</u>	Payee name <u>Paypal</u>				
Amount (\$) <u>1.75</u>	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Fee</u>	Description (If travel outside of Texas, complete Schedule T) <u>Proc</u>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Candidate / Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date <u>4/18</u>	Payee name <u>Paypal</u>				
Amount (\$) <u>.88</u>	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Fee</u>	Description (If travel outside of Texas, complete Schedule T) <u>Proc.</u>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Candidate / Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date <u>4/18</u>	Payee name <u>Paypal</u>				
Amount (\$) <u>.59</u>	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Fee</u>	Description (If travel outside of Texas, complete Schedule T) <u>Proc</u>			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Candidate / Officeholder name</td> <td style="width:25%; border: none;">Office sought</td> <td style="width:25%; border: none;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Bernie Schffler</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/18</i>	5 Payee name <i>PayPal</i>	
6 Amount (\$) <i>1.59</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Fee</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/19</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>1.03</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/19</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>1.75</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/19</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>1.75</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Bernie Schffler</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/21</i>	5 Payee name <i>PayPal</i>	
6 Amount (\$) <i>.59</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Fee</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/23</i>		
Payee name <i>PayPal</i>		
Amount (\$) <i>4.65</i>		
Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Proc Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/24</i>		
Payee name <i>PayPal</i>		
Amount (\$) <i>1.03</i>		
Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/24</i>		
Payee name <i>PayPal</i>		
Amount (\$) <i>1.75</i>		
Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>Bernie Schaffer</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/24</i>	5 Payee name <i>PayPal</i>	
6 Amount (\$) <i>.59</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Fee</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/25</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>.59</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/25</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>.59</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <i>4/28</i>	Payee name <i>PayPal</i>	
Amount (\$) <i>.59</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fee</i>	Description (If travel outside of Texas, complete Schedule T) <i>Proc.</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME <i>Bernie Schaffer</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>4/24/2014</i>		5 Payee name <i>Modern Postcard</i>			
6 Amount (\$) <i>1304.56</i>		7 Payee address; City; State; Zip Code <i>1675 Faraday Ave Carlsbad, CA 92008</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Postcard Printing</i>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/25/2014</i>		Payee name <i>United States Postal Service</i>			
Amount (\$) <i>1470.</i>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Postage</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>4/26</i>		Payee name <i>The Big Picture</i>			
Amount (\$) <i>831.36</i>		Payee address; City; State; Zip Code <i>614 Hemphill Fort Worth TX 76104</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Yard Signs</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED