

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 35	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME Mrs.	FIRST LAST Jennifer Trevino	MI SUFFIX M	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4917 Robinson St. Fort Worth, TX 76114			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817)	PHONE NUMBER 319 - 5876		EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME Mrs.	FIRST LAST Sara Lynch		MI SUFFIX P
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1601 College Avenue Fort Worth, TX 76104			
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 723 - 2917	EXTENSION	
9 REPORT TYPE	<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 03 / 28 / 2017		Month Day Year 04 / 26 / 2017	
11 ELECTION	ELECTION DATE Month Day Year 05 / 06 / 2017	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) n/a	13 OFFICE SOUGHT (if known) FW City Council District 2		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Jennifer Trevino 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

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

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0 ⁰⁰
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,011.41
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0 ⁰⁰
	4. TOTAL POLITICAL EXPENDITURES	\$ 11305.57
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 15888.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0 ⁰⁰

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.

Jennifer Trevino
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jennifer Trevino, this the 28th day of April, 2017, to certify which, witness my hand and seal of office.

Mary Kayser Signature of officer administering oath
MARY KAYSER Printed name of officer administering oath
City Secretary Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Jennifer Trevino</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,755. ⁰⁰
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2256.41
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ —
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ —
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4922.79
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 6382.78
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ —
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ —
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ —
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ —
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ —
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ —

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/8/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Albert + Perez Law Office
6 Contributor address; City; State; Zip Code
2235 N. Main St Fort Worth, TX 76164

7 Amount of contribution (\$)
\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/12/17

Full name of contributor out-of-state PAC (ID#: _____)
Carlos + Martha De Anda
Contributor address; City; State; Zip Code
2913 Lipscomb St, FW, TX 76110

Amount of contribution (\$)
\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/1/17

Full name of contributor out-of-state PAC (ID#: _____)
Susan Wilcox
Contributor address; City; State; Zip Code
2600 W. 7th St. #2650 Fort Worth, TX 76107

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
3/26/17

Full name of contributor out-of-state PAC (ID#: _____)
Tanisia Queppet
Contributor address; City; State; Zip Code
3225 Chesington Dr. Fort Worth, TX 76137

Amount of contribution (\$)
\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Lizbeth + Mark Tinch

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
472 Goodnight Tr. Rhame, TX 76078

\$50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

3/26/17

Ann Rice

Contributor address; City; State; Zip Code

3900 Westcliff Rd S. Fort Worth, TX 76109

\$150⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

3/28/17

Crystal + Jonathan Craig

Contributor address; City; State; Zip Code

4317 Longmeadow Way Fort Worth, TX 76133

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

3/29/17

Kim Olson

Contributor address; City; State; Zip Code

P.O. Box 615

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
3/29/17

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
4620 Washburn Ave, Fort Worth, TX 76107

\$200⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/4/17

Tobin Clark
Contributor address; City; State; Zip Code

\$100⁰⁰

4005 W. 6th St. Fort Worth TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/5/17

Vincent Craig
Contributor address; City; State; Zip Code

\$100⁰⁰

804 Quail Park Lane Cleburne, TX 76031

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/5/17

Mark Baver
Contributor address; City; State; Zip Code

\$200⁰⁰

609 Colts Neck Ct Colleyville TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/5/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloria Baeza 6 Contributor address; City; State; Zip Code 4741 N. Fircroft Ave Covina, CA 91722	7 Amount of contribution (\$) \$50⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/6/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melody Dennis Contributor address; City; State; Zip Code 4924 Robinson St. Fort Worth, TX 76114	Amount of contribution (\$) \$100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/7/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret DeMass Contributor address; #2644 City; State; Zip Code 2600 W. 7th St. Fort Worth TX 76107	Amount of contribution (\$) \$150⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esmael Forouzes Contributor address; City; State; Zip Code 4611 Fairlane Fort Worth, TX 76119	Amount of contribution (\$) \$200⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Spicer	7 Amount of contribution (\$) \$500⁰⁰
6 Contributor address; City; State; Zip Code 6038 Lovell Ave Fort Worth, TX 76116		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Palko	Amount of contribution (\$) \$200⁰⁰
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucy Cervera	Amount of contribution (\$) \$50⁰⁰
Contributor address; City; State; Zip Code 6639 CR 527 Burleson TX 76028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helen Ellison	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 500 Throckmorton St. #2612 Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Williams	7 Amount of contribution (\$) 25⁰⁰
6 Contributor address; City; State; Zip Code 3500 Lenox Dr Fort Worth TX 76107		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emily Puder Quillen	Amount of contribution (\$) \$ 75⁰⁰
Contributor address; City; State; Zip Code 2348 Rock Creek Rd Crowley, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mark Presswood	Amount of contribution (\$) \$ 100⁰⁰
Contributor address; City; State; Zip Code 2940 Mistys Run FortWorth, TX 76244		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anna Alvarado	Amount of contribution (\$) \$ 300⁰⁰
Contributor address; City; State; Zip Code 3809 Westcliff Rd S. FortWorth, TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Peter Watson
6 Contributor address; City; State; Zip Code
690 E. Lamar Blvd Ste 400 Arlington, TX 76011

7 Amount of contribution (\$)
\$50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/11/17

Full name of contributor out-of-state PAC (ID#: _____)
Don Boren
Contributor address; City; State; Zip Code
1755 Martel Ave Fort Worth, TX 76103

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/11/17

Full name of contributor out-of-state PAC (ID#: _____)
Wilma Lopez
Contributor address; City; State; Zip Code
6033 Portridge Dr. Fort Worth, TX 76135

Amount of contribution (\$)
\$200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/11/17

Full name of contributor out-of-state PAC (ID#: _____)
Dianna Flores
Contributor address; City; State; Zip Code
2503 High Oak Dr. Fort Worth, TX 76012

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

4/11/17

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

Marie Murphy

7 Amount of contribution (\$)

\$100⁰⁰

6 Contributor address; City; State; Zip Code

5829 Mount Plymouth Pt Fort Worth, TX 76179

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/11/17

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

Tonya Veasey

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

PO Box 11296 Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11/17

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

Cynthia Weeks

Amount of contribution (\$)

\$50⁰⁰

Contributor address; City; State; Zip Code

11600 Live Oak Creek Dr. Fort Worth, TX 76108

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11/17

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

Silvia Luna

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

4708 Tony Ct. Fort Worth, TX 76135

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

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

Edward Perkins

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
16524 Cowboy Trail FortWorth, TX 76247

\$50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Lisa Kinkaid

Amount of contribution (\$)

4/11/17

Contributor address; City; State; Zip Code
Alvarado TX 76009

\$1000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Sandra Dias

Amount of contribution (\$)

4/11/17

Contributor address; City; State; Zip Code
4700 Belladonna Dr Fort Worth TX 76233

\$20⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Christina Elbitar

Amount of contribution (\$)

4/11/17

Contributor address; City; State; Zip Code
3016 6th Ave Fort Worth, TX 76110

\$1000⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME
Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/17

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
362 Foch St. Fort Worth, TX 76107

\$50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/11/17

Vincent Craig

Contributor address; City; State; Zip Code

804 Quail Park Lane Cleburne, TX 76031

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/11/17

Leo + Lisa Mares

Contributor address; City; State; Zip Code

8920 Mares St Fort Worth TX 76244

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Amanda Arizola

Contributor address; City; State; Zip Code

PO Box 430 Hurst, TX 76053

\$250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

4/25/17

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

Becky Beasley

6 Contributor address; City; State; Zip Code
4620 Washburn Ave Fort Worth, TX 76107

7 Amount of contribution (\$)

\$200⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/25/17

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

Elizabeth Beck - Johnson

Contributor address; City; State; Zip Code
2717 Ryan Ave Fort Worth TX

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Jill Black

Contributor address; City; State; Zip Code
2631 Ward Pkwy Fort Worth TX 76110

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Elizabeth Blake

Contributor address; City; State; Zip Code
3401 Leith Ave Fort Worth, TX 76133

Amount of contribution (\$)

\$150⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/25/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Catarina Bonilla
6 Contributor address; City; State; Zip Code
362 Foch St. Fort Worth, TX 76107

7 Amount of contribution (\$)
\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Eva Bonilla
Contributor address; City; State; Zip Code
362 Foch St. Fort Worth, TX 76107

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Dori Boone-Costantino
Contributor address; City; State; Zip Code
3912 Clarke Fort Worth, TX 76107

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Natalie Chapa
Contributor address; City; State; Zip Code
3722 Harley Ave Fort Worth, TX 76107

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

4/25/17

5 Full name of contributor

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

Jacquelyn Crim-McCraty

6 Contributor address;

City; State; Zip Code

4817 Warton Hollow St Fort Worth TX 76109

7 Amount of contribution (\$)

\$50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/25/17

Full name of contributor

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

Kathleen Culebro

Contributor address;

City; State; Zip Code

3850 Washburn Ave Fort Worth TX 76107

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

Full name of contributor

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

Leslie Culver

Contributor address;

City; State; Zip Code

2717 Manorwood Trail. FortWorth, TX 76109

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

Full name of contributor

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

Leslie Dell

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/25/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Dawn Pillon
6 Contributor address; #619 City; State; Zip Code
3100 W. 7th St. Fort Worth TX 76107

7 Amount of contribution (\$)
\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Marilyn Englander
Contributor address; City; State; Zip Code
1300 Washington Terrace Fort Worth TX 76107

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Sandra Garcia
Contributor address; City; State; Zip Code
3317 N. Nichols St. FortWorth, TX 76106

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Ruthann Geer
Contributor address; City; State; Zip Code
6121 CR 608 Burleson, TX 76028

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date **4/25/17** 5 Full name of contributor out-of-state PAC (ID#: _____)
Susanna Gorski
6 Contributor address; City; State; Zip Code
36 Valley Ridge Rd Fort Worth TX 76107

7 Amount of contribution (\$) **\$100⁰⁰**

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

Date **4/25/17** Full name of contributor out-of-state PAC (ID#: _____)
Alison Head
Contributor address; City; State; Zip Code
2020 Hillcrest St Fort Worth TX 76107

Amount of contribution (\$) **\$100⁰⁰**

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **4/25/17** Full name of contributor out-of-state PAC (ID#: _____)
Amy Jacobs
Contributor address; City; State; Zip Code
3721 Fox Hollow St. Fort Worth, TX 76109

Amount of contribution (\$) **\$100⁰⁰**

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **4/25/17** Full name of contributor out-of-state PAC (ID#: _____)
Eric Johnson
Contributor address; City; State; Zip Code
3525 Turtlecreek Blvd #11A Dallas, TX 76219

Amount of contribution (\$) **\$150⁰⁰**

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/25/17

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

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
12713 Old Weatherford Rd Aledo TX 76008

\$150⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Frances Lyle
Contributor address; City; State; Zip Code
4420 Overton Crest St. Fort Worth, TX 76109

\$125⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Rosalinda Martinez
Contributor address; City; State; Zip Code
2907 Ellis Ave Fort Worth, TX 76106

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Cheryl McDonald
Contributor address; City; State; Zip Code
2405 Medford Court East, Fort Worth, TX 76109

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date

4/25/17

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

Kimberley medley

6 Contributor address; City; State; Zip Code

6024 Annandale Dr Fort Worth TX 76132

7 Amount of contribution (\$)

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/25/17

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

Melissa Mitchell

Contributor address; City; State; Zip Code

2429 Rogers Ave Fort Worth TX

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Susan Motheral

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Elizabeth Ray

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME

Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date

4/25/17

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

Anita Robeson

7 Amount of contribution (\$)

\$100⁰⁰

6 Contributor address; City; State; Zip Code

2933 Veranda Lane Southlake TX 76092

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/25/17

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

Victoria Ruiz

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

3645 Dornay Lane # 422 Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Anette Soto

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

4749 Bracken Dr. Fort Worth, TX 76137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/25/17

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

Kathy Spicer

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

6038 Lovell Ave Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME
Jennifer Trevino

3 Filer ID (Ethics Commission Filers)

4 Date
4/25/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Nancy Swartz
6 Contributor address; City; State; Zip Code
5606 P&G Club Dr. Arlington TX 76017

7 Amount of contribution (\$)
\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Erin Taylor-Fenner
Contributor address; City; State; Zip Code
7325 Brentwood Stair Rd FortWorth, TX 76112

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Texas Latina List
Contributor address; City; State; Zip Code
10918 Albeon Park Dr. San Antonio, TX 78249

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/25/17

Full name of contributor out-of-state PAC (ID#: _____)
Barbara Trevino
Contributor address; City; State; Zip Code
14650 White Settlement FortWorth, TX 76108

Amount of contribution (\$)
\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date
4/26/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Susannah Touzel
6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)
\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
4/14/17

Full name of contributor out-of-state PAC (ID#: _____)
Brian Gage
Contributor address; City; State; Zip Code
15814 Longvale Houston, TX 77059

Amount of contribution (\$)
\$250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/26/17

Full name of contributor out-of-state PAC (ID#: _____)
Cathy Holt
Contributor address; City; State; Zip Code
8805 Turnberry Ct. Fort Worth, TX 76179

Amount of contribution (\$)
\$1000⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
4/26/17

Full name of contributor out-of-state PAC (ID#: _____)
Eliza Beth Kelly
Contributor address; City; State; Zip Code
6757 Sea Turtle Way Fort Worth, TX 76135

Amount of contribution (\$)
\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julio + Judy Perez	7 Amount of contribution (\$) \$100⁰⁰
4/26/17	6 Contributor address; City; State; Zip Code 7252 Yolanda Dr. Fort Worth, TX 76112	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rachel Chasteen	Amount of contribution (\$) \$100⁰⁰
4/26/17	Contributor address; City; State; Zip Code 3912 Felisa Place Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnica Reed Hawkins	Amount of contribution (\$) \$100⁰⁰
4/26/17	Contributor address; City; State; Zip Code 4458 Truman Court Fort Worth TX 76112	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annie's List Foundation	Amount of contribution (\$) \$500⁰⁰
4/18/17	Contributor address; City; State; Zip Code PO Box 303277 Austin, TX 78703	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BJ Sanders	7 Amount of contribution (\$) \$500⁰⁰
6 Contributor address; City; State; Zip Code 1600 Texas St. #2401 Fort Worth, TX 76102		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/26/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leann Behrens	Amount of contribution (\$) \$500⁰⁰
Contributor address; City; State; Zip Code 2244 Winton Terr W Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/25/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emma Preciado	Amount of contribution (\$) \$100⁰⁰
Contributor address; City; State; Zip Code 10918 Albeon Park Dr. San Antonio, TX 78249		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/18/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victoria Adams 6 Contributor address; City; State; Zip Code 2330 medford Ct. E Fort Worth, TX 76109	7 Amount of contribution (\$) \$400⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/18/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant County Stonewall Democrats Contributor address; City; State; Zip Code 7016 Hawaii Lane Arlington, TX 76016	Amount of contribution (\$) \$300⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/18/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Utt Contributor address; City; State; Zip Code 2901 6th Ave Fort Worth, TX 76110	Amount of contribution (\$) \$50⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/26/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Airin Barnett Contributor address; City; State; Zip Code 6222 Hulen Bend Blvd, Fort Worth, TX 76132	Amount of contribution (\$) \$100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 25
2 FILER NAME Jennifer Trevino		3 Filer ID (Ethics Commission Filers)
4 Date 4/25/17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert West 6 Contributor address; City; State; Zip Code 301 Commerce St. Ste 3500 Fort Worth, TX 76102	7 Amount of contribution (\$) \$ 200⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/22/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catalina Garcia Contributor address; City; State; Zip Code 7622 Royal Place Dallas, TX 75230	Amount of contribution (\$) \$ 50⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/22/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Lathas List Contributor address; City; State; Zip Code PO Box 64025 Fort Worth, TX 76164	Amount of contribution (\$) \$ 300⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/18/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flo Bruner Contributor address; City; State; Zip Code 5522 Katey Lane Arlington, TX 76017	Amount of contribution (\$) \$ 100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **25**

2 FILER NAME **Jennifer Trevino**

3 Filer ID (Ethics Commission Filers)

4 Date

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

7 Amount of contribution (\$)

4/25/17

Tina Toal maness
6 Contributor address; City; State; Zip Code

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Hollace Weiner
Contributor address; City; State; Zip Code
4210 Stonedale Road Fort Worth, TX 76116

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

Hilary Weinstein
Contributor address; City; State; Zip Code
3100 W 7th St. #803 Fort Worth, TX 76107

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

4/25/17

shelly Jeff Whitfield
Contributor address; City; State; Zip Code
2020 Glenco Terrace Fort worth, TX

\$100⁰⁰

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3	
2 FILER NAME Jennifer Treviño		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 4/11/17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Mares	8 Amount of Contribution \$ \$41.41	9 In-kind contribution description beverages
7 Contributor address; City; State; Zip Code 8920 Marana St Fort Worth TX 76244		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Attorney		11 Employer (FOR NON-JUDICIAL) (See Instructions) First Cash, Inc.	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magdalena's - Juan Rodriguez	Amount of Contribution \$ \$1500⁰⁰	In-kind contribution description went
Contributor address; City; State; Zip Code 502 Grand Ave A Fort Worth TX 76164		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Executive Chef		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3	
2 FILER NAME Jennifer Treviño		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 4/25/17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren + Matt Wilkins	8 Amount of Contribution \$ \$75.00	9 In-kind contribution description refreshments
7 Contributor address; City; State; Zip Code 8445 Ranch Hand Tr Fort Worth TX 76131		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 4/11/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anna Alvarado	Amount of Contribution \$ \$180.00	In-kind contribution description beverages
Contributor address; City; State; Zip Code 3809 Westcliff Rd S Fort Worth TX 76107		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) General Counsel		Employer (FOR NON-JUDICIAL)(See Instructions) First Cash, Inc.	
Contributor's principal occupation (FOR JUDICIAL) attorney		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3	
2 FILER NAME Jennifer Treviño		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 4/25/17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arita + Vincent Craig	8 Amount of Contribution \$ \$450.00	9 In-kind contribution description event venue deposit
7 Contributor address; City; State; Zip Code 804 Quail Park Ln Cleburne TX 76031		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 3/31/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer + Chris Trevino	Amount of Contribution \$ \$10.00	In-kind contribution description Facebook ads
Contributor address; City; State; Zip Code 4917 Robinson St Fort Worth TX 76114		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.	
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **2** 2 FILER NAME **Jennifer Treviño** 3 Filer ID (Ethics Commission Filers)

4 Date **4/18/17** 5 Payee name **Vistaprint**

6 Amount (\$) **\$67.98** 7 Payee address; City; State; Zip Code **275 Wymar St. Waltham MA 02451**

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) **printing expense**

(b) Description
 Check if travel outside of Texas. Complete Schedule T.
 Check if Austin, TX, officeholder living expense

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

Date **3/29/17** Payee name **Rose's Cafe**

Amount (\$) **\$199.04** Payee address; City; State; Zip Code **6050 Haur Ylak Lake Worth, TX 76135**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule) **event expenses**

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

Date **4/10/17** Payee name **Wells Fargo**

Amount (\$) **\$3.00** Payee address; City; State; Zip Code **420 Montgomery St. San Francisco CA 94104**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule) **fees**

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Jennifer Treviño	3 Filer ID (Ethics Commission Filers)
4 Date 3/23, 4/19, 4/20+4/25	5 Payee name Kwik Kopy	
6 Amount (\$) \$1,333.64	7 Payee address; City; State; Zip Code 1850 Handley Drive, Fort Worth TX 76112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) printing 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/27, 3/29, 4/17, 4/19, 4/26	Payee name Signs By Tomorrow - Fort Worth	
Amount (\$) \$2,480.09	Payee address; City; State; Zip Code 3509 NW Loop 820 Fort Worth, TX 76106	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/30 + 3/31	Payee name Underground Printing	
Amount (\$) \$574.24	Payee address; City; State; Zip Code 818 Clark Street Evanston, IL 60201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense (t-shirts)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Jennifer Trevino	3 Filer ID (Ethics Commission Filers)
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4 Date 3/28/17-4/26/17	5 Payee name Paypal
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6 Amount (\$) 231.74	7 Payee address; City; State; Zip Code 2211 N. First St. San Jose, CA 95131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees - Donations	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/28/17-4/26/17	Payee name Square
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Amount (\$) 33.01	Payee address; City; State; Zip Code 1455 Market St. Ste 600, San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees - Donations	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME Jennifer Treviño	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 6,382.78
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5 Date April 2017	6 Payee name Joseph Landeros
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7 Amount (\$) \$2,000.00	8 Payee address; City; State; Zip Code 4149 Bracken Drive, Fort Worth, TX 76137
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/17	Payee name Kwik Kopy
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Amount (\$) \$4,382.78	Payee address; City; State; Zip Code 1850 Handley Drive, Fort Worth, TX 76112
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense (mailer)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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