

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:

22

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Ann

Zadeh

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX;

APT./SUITE#;

CITY;

STATE;

ZIP CODE

☐ change of address

P.O. Box 12173

Fort Worth TX 76110

**5 CANDIDATE/
OFFICEHOLDER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(817)

924-3811

**6 CAMPAIGN
TREASURER
NAME**

MS/MRS/MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Jim (Jamshyd)

Zadeh

**7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)**

STREET ADDRESS (NO PO BOX PLEASE);

APT./SUITE#;

CITY;

STATE;

ZIP CODE

115 W. 2nd Street Suite 201

Fort Worth, TX 76102

**8 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(817)

335-5100

9 REPORT TYPE


January 15



30th day before election



Runoff

15th day after campaign
treasurer appointment
(officeholder only)

July 15



8th day before election

Exceeded \$500
limit

Final report (Attach C/OH - FR)

**10 PERIOD
COVERED**

Month

Day

Year

6 / 14 / 14

THROUGH

Month

Day

Year

12 / 31 / 14

11 ELECTION

Month

ELECTION DATE

Day

Year

5 / 9 / 15

ELECTION TYPE

☐ Primary☐ Runoff☒ General☐ Special
12 OFFICE

OFFICE HELD (if any)

City of Fort Worth

City Council District 9

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME****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

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

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

\$ NA

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 28,125.00

**EXPENDITURE
TOTALS**

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

\$ NA

4. TOTAL POLITICAL EXPENDITURES

\$ 6851.47

**CONTRIBUTION
BALANCE**

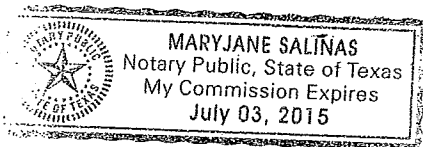
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 31,573.29

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 15,000.00

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann Zadeh, this the 15 day of January, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath

MaryJane Salinas

Printed name of officer administering oath

Notary

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:

18

2 FILER NAME

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.27.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

PATRIC J HARRIS

6 Contributor address; City; State; Zip Code

1328 S. ADAMS
FT. WORTH TX 76104

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

MICHAEL HARRIS

Contributor address; City; State; Zip Code

1328 S. ADAMS
FT. WORTH TX 76104

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.26.14

Full name of contributor

☐ out-of-state PAC (ID#)

MARLENE L. BECKMAN

Contributor address; City; State; Zip Code

2300 MEDFORD CT
FT. WORTH TX 76109

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.24.14

Full name of contributor

☐ out-of-state PAC (ID#)

BRYAN EPPSTEIN

Contributor address; City; State; Zip Code

2908 ALTON RD
FT. WORTH TX 76109

Amount of contribution (\$)

800.00

In-kind contribution description (if applicable)

FUNDRAISING
INVITATION
MAILER

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.21.14

Full name of contributor

☐ out-of-state PAC (ID#)

REED W. PIGMAN

Contributor address; City; State; Zip Code

200 TEXAS WAY
FT. WORTH TX 76106

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.27.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

KELLEY HART

6 Contributor address; City; State; Zip Code

201 MAIN ST # 2500
FT. WORTH TX 76102

7 Amount of contribution (\$)

1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

BLAKE WOODARD

Contributor address; City; State; Zip Code

1300 S. UNIVERSITY #600
FT. WORTH TX 76107

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.25.14

Full name of contributor

☐ out-of-state PAC (ID#)

MR. OR MRS. JOHN V. ROACH III

Contributor address; City; State; Zip Code

2805 ALTON RD
FT. WORTH TX 76109

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

MELANIE R. PERTU

Contributor address; City; State; Zip Code

4901 BRYCE AVE #18
FT. WORTH, TX 76107

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.22.14

Full name of contributor

☐ out-of-state PAC (ID#)

ELAINE J. PETRUS

Contributor address; City; State; Zip Code

3736 COUNTRY CLUB GR
FT. WORTH TX 76109

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.23.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

JIM JOHNSON

6 Contributor address; City; State; Zip Code

3224 ROGER AVE
FT. WORTH TX 76109

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.23.14

Full name of contributor

☐ out-of-state PAC (ID#)

JASON M. SMITH

Contributor address; City; State; Zip Code

4714 ALTADR.
FT. WORTH TX 76107

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.24.14

Full name of contributor

☐ out-of-state PAC (ID#)

MAX O. HOLDERBY

Contributor address; City; State; Zip Code

2401 W. 7TH ST. #307
FT. WORTH TX 76107

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.21.14

Full name of contributor

☐ out-of-state PAC (ID#)

TIM EVANS

Contributor address; City; State; Zip Code

115 W. 2ND ST #202
FT. WORTH TX 76102

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

EDWARD P. BASS

Contributor address; City; State; Zip Code

201 MAIN ST. #2700
FT. WORTH TX 76102

Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.20.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

FT. WORTH FIREFIGHTERS COMMITTEE

6 Contributor address: City: State: Zip Code

FOR RESPONSIBLE GOVERNMENT PAC
8855 TULSA WAY
FT. WORTH TX 76107

7 Amount of contribution (\$)

2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.25.14

Full name of contributor

☐ out-of-state PAC (ID#)

CHARLES DREIFUS

Contributor address: City: State: Zip Code

2416 PARK PLACE
FT. WORTH TX 76110

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.15.14

Full name of contributor

☐ out-of-state PAC (ID#)

RICHARD N. ABRAMS 1994

Contributor address: City: State: Zip Code

RWOC TRUST
6145 WEDGEWOOD
FT. WORTH TX 76133

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.25.14

Full name of contributor

☐ out-of-state PAC (ID#)

L.W. OR TERESA E. ELUS

Contributor address: City: State: Zip Code

1205 MISTLETOE DR.
FT. WORTH TX 76110

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.24.14

Full name of contributor

☐ out-of-state PAC (ID#)

VICTOR J. BOSCHINI JR.

Contributor address: City: State: Zip Code

3861 BELLAIRE CIR.
FT. WORTH TX 76109

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.31.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

MAC CHURCHILL

6 Contributor address; City; State; Zip Code

611 RIVERCREST DR.
FT. WORTH TX 76107

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

7.18.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORIN

Contributor address; City; State; Zip Code

2804 W. BEWICK ST
FT. WORTH TX 76109

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.21.14

Full name of contributor

☐ out-of-state PAC (ID#)

M. BETH KRUGLER

Contributor address; City; State; Zip Code

306 W. BROADWAY
FT. WORTH TX 76104

Amount of
contribution (\$)

150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.28.14

Full name of contributor

☐ out-of-state PAC (ID#)

DANIEL BARRETT

Contributor address; City; State; Zip Code

6000 WESTERN PL. #200
FT. WORTH TX 76107

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.24.14

Full name of contributor

☐ out-of-state PAC (ID#)

BONNIE NEWBERRY JR.

Contributor address; City; State; Zip Code

3416 HARWENTERR.
FT. WORTH TX 76109

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.27.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

G. PHILIP POOLE

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3637 WATONGA
FT. WORTH TX 76107

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

JAMES OR MARGARET DEMOSS

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2600 W. 7TH
FT. WORTH TX 76107

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

JUDITH L. HARMAN

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2222 WINTON TERR E
FT. WORTH TX 76109

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.26.14

Full name of contributor

☐ out-of-state PAC (ID#)

MARGARETH CRADDOCK

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4904 DEXTER
FT. WORTH TX 76107

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.28.14

Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT L. SNOKE

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3826 6TH AVE
FT. WORTH TX 76110

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.24.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

SUSAN ALEN KUNE

6 Contributor address; City; State; Zip Code

2421 SHIRLEY AVE
FT. WORTH TX 76109

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.22.14

Full name of contributor

☐ out-of-state PAC (ID#)

HOLT HICKMAN

Contributor address; City; State; Zip Code

5008 MERRY MOUNT
FT. WORTH, TX 76107

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

BRIAN EWENSER

Contributor address; City; State; Zip Code

500 TH ROCK MORTON
FT. WORTH TX 7602 #2804

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

K. UUMAN D. SCHUTTE

Contributor address; City; State; Zip Code

6513 SAUCON VALEY DR
FT. WORTH TX 76132

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

MERALEN TYSON

Contributor address; City; State; Zip Code

1351 MISTLETOE
FT. WORTH TX 76110

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.27.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

EVA BONILLA

6 Contributor address; City; State; Zip Code

3700 W. 6TH ST # B
FT. WORTH TX. 76107

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORIN

Contributor address; City; State; Zip Code

2804 W. BEWICK ST
FT. WORTH TX 76109

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

KAREN M KROH DBA

Contributor address; City; State; Zip Code

2618 COCKRELL AVE
FT. WORTH TX 76109

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.26.14

Full name of contributor

☐ out-of-state PAC (ID#)

DAN E. LOWRANCE

Contributor address; City; State; Zip Code

2008 FOR OAKS LN
FT. WORTH TX 76107

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.25.14

Full name of contributor

☐ out-of-state PAC (ID#)

R. DENNY ALEXANDER

Contributor address; City; State; Zip Code

4200 S. HULEN #617
FT. WORTH TX 76109

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.26.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

PILLAR CANDIA CAMPAIGN

6 Contributor address; City; State; Zip Code

2610 GOLDEN ROD
FT. WORTH TX 76111

7 Amount of
contribution (\$)

50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

STEPHEN C. MAXWELL

Contributor address; City; State; Zip Code

3904 DRISKELL BLVD
FT. WORTH TX 76107

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

COBY WOOTEN

Contributor address; City; State; Zip Code

4909 RIVER BEND DR.
FT. WORTH TX 76109

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

VICTORIA BARGAS

Contributor address; City; State; Zip Code

301 E. DREW
FT. WORTH TX 76110

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

ROBERT WEST

Contributor address; City; State; Zip Code

301 COMMERCE #3500
FT. WORTH TX 76102

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8-27-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

WEST MILLER

6 Contributor address; City; State; Zip Code

3933 CARUTH BLVD
DALLAS TX 75225

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8-28-14

Full name of contributor

☐ out-of-state PAC (ID#)

ELLEN WARTHOE

Contributor address; City; State; Zip Code

2701 WILLING AVE
FT. WORTH TX 76110

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9-1-14

Full name of contributor

☐ out-of-state PAC (ID#)

DIANE STURDIVANT

Contributor address; City; State; Zip Code

3536 ROGERS
FT. WORTH TX 76109

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-22-14

Full name of contributor

☐ out-of-state PAC (ID#)

TERI KARAMAN + PAUL

Contributor address; City; State; Zip Code

733 BANDIT TR.
FT. WORTH TX 76248

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-26-14

Full name of contributor

☐ out-of-state PAC (ID#)

WANDA WOODARD

Contributor address; City; State; Zip Code

3921 STONE HEDGE RD
FT. WORTH, TX 76109

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.22.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

BRIAN JOUN

6 Contributor address; City; State; Zip Code

3217 STADIUM DR.
FT. WORTH TX 76109

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9.12.14

Full name of contributor

☐ out-of-state PAC (ID#)

DAVID PETTIT

Contributor address; City; State; Zip Code

1201 CLOVER LANE
FT. WORTH TX 76107

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.18.14

Full name of contributor

☐ out-of-state PAC (ID#)

BRYAN EPPSTEIN

Contributor address; City; State; Zip Code

2908 ALTON RD
FT. WORTH TX 76109

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.4.14

Full name of contributor

☐ out-of-state PAC (ID#)

EVNA M BIVENS

Contributor address; City; State; Zip Code

5913 MCKASKLE D.
FT. WORTH TX 76124

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8.27.14

Full name of contributor

☐ out-of-state PAC (ID#)

FRAN MCCARTHY

Contributor address; City; State; Zip Code

2245 5TH AVE FT. WORTH
TEXAS 76110

Amount of contribution (\$)

300.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9.4.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

G. MALCOLM LOUDEN

7 Amount of contribution (\$)

2,500.⁰⁰

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

500 W. 7TH ST. #27
FT. WORTH TX 76102 STE 1007

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9.11.14

Full name of contributor

ARDON MOORE

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

1409 THOMAS PL.
FT. WORTH, TX 76107

Amount of contribution (\$)

500.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.12.14

Full name of contributor

ROBERT BENDA

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

608 PAINT PONY TR. N.
FT. WORTH, TX 76108

Amount of contribution (\$)

250.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.15.14

Full name of contributor

VIRGINIA V. THRESH

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

800 FREEMAN LN #311
GRASSVALEY CA 95949

Amount of contribution (\$)

100.⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.13.14

Full name of contributor

WARREN PRETLOW RIDDICK

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

4328 GREEN BRIER DR.
DALLAS TX 75225

Amount of contribution (\$)

250.⁰⁰

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9.13.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

FT. WORTH RETIRED FIRE FIGHTERS
WIDOWS COMMITTEE PAC

7 Amount of
contribution (\$)

500.00

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

1617 TIERNEY RD
FT. WORTH TX 76112

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.28.14

Full name of contributor

☐ out-of-state PAC (ID#)

GLENN LEWIS

Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

100 THROCKMORTON #300
FT WORTH TX 76102

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.10.14

Full name of contributor

☐ out-of-state PAC (ID#)

MIKE MONCRIEF CAMPAIGN

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

777 TAYLOR ST. #1030
FT. WORTH TX 76102

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.9.14

Full name of contributor

☐ out-of-state PAC (ID#)

FREESE + NICHOLS PAC

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

4055 INTERNATIONAL PLAZA
FT. WORTH TX 76109 #200

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.11.14

Full name of contributor

☐ out-of-state PAC (ID#)

SHIRLEE J. GANDY

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

4250 SARITA CT
FT. WORTH TX 76109

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9.15.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

THOMAS R. SLOANE

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

4801 BELDON TR.
COLLEYVILLE TX 76034

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9.3.14

Full name of contributor

☐ out-of-state PAC (ID#)

RANDALL C. GIDEON

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3812 MONTICELLO DR
FT. WORTH TX 76107

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.24.14

Full name of contributor

☐ out-of-state PAC (ID#)

JUDY NEEDHAM

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7579 SURFSIDE DR.
FT. WORTH TX 76135

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.3.14

Full name of contributor

☐ out-of-state PAC (ID#)

CLARA I. CORBIN

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3412 WORTH HILLS DR
FT. WORTH TX 76109

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.8.14

Full name of contributor

☐ out-of-state PAC (ID#)

VERNEU STURNS

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

612 HIGHWOODS TR
FT. WORTH, TX 76112

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8.27.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

GOOD GOVERNMENT FUND PAC

6 Contributor address; City; State; Zip Code

201 MAIN ST #2500
FT. WORTH TX 76102

7 Amount of contribution (\$)

2,500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8.13.14

Full name of contributor

☐ out-of-state PAC (ID#)

FIRESTONE & ROBERTSON

Contributor address; City; State; Zip Code

901 W. VICKERY
FT. WORTH TX 76104

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.18.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY L. D. WORKIN

Contributor address; City; State; Zip Code

2804 W. BEWICK
FT. WORTH TX 76109

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9.14.14

Full name of contributor

☐ out-of-state PAC (ID#)

GUENN R. MAHLER

Contributor address; City; State; Zip Code

9921 CRAWFORD FARMS DR.
FT. WORTH TX 76244

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.3.14

Full name of contributor

☐ out-of-state PAC (ID#)

STEVEN C. COCA NOWER

Contributor address; City; State; Zip Code

1628 FAIRMONT
FT. WORTH TX 76104

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9.28.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

MARGARET JOHNSON

6 Contributor address; City; State; Zip Code

2118 PARK PLACE AVE
FT. WORTH TX 76110

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9.16.14

Full name of contributor

☐ out-of-state PAC (ID#)

MARK A. TOPEL

Contributor address; City; State; Zip Code

5004 WAREHAM DR.
FT. WORTH TX 76017

Amount of contribution (\$)

400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11-18-14

Full name of contributor

☐ out-of-state PAC (ID#)

LANCE EVANS

Contributor address; City; State; Zip Code

115 W. 2ND ST. #202
FT. WORTH TX 76102

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.28.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10-18-14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11-22-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

8-27-14

Full name of contributor

☐ out-of-state PAC (ID#)

CADE LOVELACE

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2316 5TH AVE
FT. WORTH TX 76110

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-26-14

Full name of contributor

☐ out-of-state PAC (ID#)

PATRICIA VORIES

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2400 MISTLETOE BLVD.
FT. WORTH TX 76110

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-31-14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2804 W. BEWICK
FT. WORTH TX 76109

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8-31-14

Full name of contributor

☐ out-of-state PAC (ID#)

AMANDA ROSALES

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6013 WESTER AVE
FT. WORTH TX 76133

(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

ANN ZADEH

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9.29.14

5 Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

6 Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9.6.14

Full name of contributor

☐ out-of-state PAC (ID#)

LYNDA HILL

Contributor address; City; State; Zip Code

P.O. BOX 997
FT. WORTH TX 76101

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.18.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11.15.14

Full name of contributor

☐ out-of-state PAC (ID#)

GARY DWORKIN

Contributor address; City; State; Zip Code

2804 WEST BEWICK
FT. WORTH TX 76109

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

(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 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 ANN ZADEH		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8.31.14		5 Payee name USPS			
6 Amount (\$) 44.00		7 Payee address; City; State; Zip Code 2600 8TH AVE. FT. WORTH TX 76110			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) FEES		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 9-5-14		Payee name BOSQUEZ PRINTING			
Amount (\$) 84.44		Payee address; City; State; Zip Code 1327 E. SEMINARY DR. FT. WORTH TX 76115			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING		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
Date 8.19.14		Payee name USPS			
Amount (\$) 98.00		Payee address; City; State; Zip Code 2600 8TH AVE FT. WORTH TX 76110			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FEES		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
Date 9-5-14		Payee name CITY CLUB			
Amount (\$) 1873.93		Payee address; City; State; Zip Code P.O. BOX 910885 DALLAS TX 75391			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FOOD/BEV		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

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		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-5-14		5 Payee name LAURIE WISDOM			
6 Amount (\$) 75.00		7 Payee address; City; State; Zip Code 8500 TANGLELIDGE FT. WORTH TX 76123			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) PRINTING		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12-17-14		Payee name COCKRELL INNOVATION			
Amount (\$) 279.31		Payee address; City; State; Zip Code P.O. BOX 1568 FT. WORTH TX 76101			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING		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
Date 12-17-14		Payee name COCKRELL INNOVATION			
Amount (\$) 162.50		Payee address; City; State; Zip Code P.O. BOX 1568 FT. WORTH TX 76101			
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
Date 11-30-14		Payee name PAYPAL			
Amount (\$) 78.49		Payee address; City; State; Zip Code 2221 NORM FIRST ST SAN JOSE CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FEES		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					

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 ANN ZADEH		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11-17-14		5 Payee name USPS			
6 Amount (\$) 44.00		7 Payee address; City; State; Zip Code 8TH AVE STATION 2600 8TH AVE FT. WORTH TX 76110			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) FEES		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-19-14		Payee name TRAVIS Q. PARMER			
Amount (\$) 4,000.00		Payee address; City; State; Zip Code P.O. BOX 11517 FT. WORTH TX 76110			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) CONSULTING EXP		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12-31-14		Payee name WEUS FARGO			
Amount (\$) 112.00		Payee address; City; State; Zip Code P.O. BOX 6995 PORTLAND OR 97228			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FEES		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY 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 ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED