Signature of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Zimm	nerman, Winton B		14 ACCOUNT # (E 00000003	Ethics Commission filer
5 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the carout the candidate's or officeholder's knowledge or consent. Candidate by receive notice of such expenditures		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	Fort Worth Police Offices Assn Political Action C	ommittee	
	GENERAL CONTRACT	COMMITTEE ADDRESS 904 Collier Fort Worth, TX 76102		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME COOK, Lloyd		
additional pages		COMMUTTEE CAMPAIGN TREASURER ADDRESS 904 Collier Fort Worth, TX 76102		***
6 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,670.00
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	35,076.87
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	48,771.61
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
AFFIX NOTARY	BETH A ELLIS Notary ID #38562 My Commission Exp March 5, 2021	Signature of C	all information require	d to be reported by
Sworn to and subscrit		11567 1000000000	, this the	7th day
of april,	20 <u>17</u> , to ce	rtify which, witness my hand and seal of office.		
D. # Q8	Im	Beth A ELLIS	nothry	

Print name of officer administering oath

Title of officer administering oath

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	
FILER NAME	Zimmerman, Winton B		Schedule: 1/7 3 ACCOUNT# (00000003	Report: 3/12 Ethics Commission filers)
Date	5 Full name of contributor ut-of-state PAC (IDA Acme Brick Company Good Government Fund	#)	7 Amount of contribution (\$)	8 In-king contribution description (if applicable)
04/17/2017	6 Contributor address; City; State; Zip Code P O Box 425 Fort Worth, TX 76101		\$500.00	
Principal occu	pation / Job title (See Instructions)	10 Employer (See Ins		exas, complete Schedule T)
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 6732 Medinah Dr Fort Worth, TX 76132		\$100.00	
			(If travel outside of Te	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Inst	tructions)	
Date	Full name of contributor ut-of-state PAC (IDI	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 6216 Locke Fort Worth, TX 76116		\$50.00 	
			(If travel outside of Te	exas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See Inst	tructions)	
Date	Full name of contributor	#	Amount of contribution (\$)	in-kind contribution description (if applicable)
04/24/2017	Contributor address; City; State; Zip Code 201 Main Street, Ste 2700 Fort Worth, TX 76102		\$1,500.00	
			(If travel outside of Te	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins	tructions)	
Dete	Full name of contributor	#)	Amount of 's contribution (\$)	in-kind contribution description (if applicable)
Date			\$300.00	
04/17/2017	Contributor address; City; State; Zip Code P O Box 482 Fort Worth, TX 76101		1	
	P O Box 482		i	exas, complete Schedule T)

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/7	Report: 4/12
2 FILER NAME	Zimmerman, Winton B			(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID# Cadieux, Chester and Casie III)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/21/2017	6 Contributor address; City; State; Zip Code 6808 E 109th St Tulsa, OK 74133		\$500.00	
				exas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 3100 W Alabama St Houston, TX 77098		\$750.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occur	Dation / Job title (See Instructions)	Employer (See In:		
		pioyor (cco iii		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code P O Box 542016 Omaha, NE 68154		\$1,000.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Freese and Nichols)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 4055 International Plaza, Ste 200 Fort Worth, TX 76109		\$200.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occur	Dation / Job title (See Instructions)	Employer (See In:		
T Titloipai occup	realist 7 sob file (ose margarions)	Linployer (oce in	Structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code P.O. Box 33937 Fort Worth, TX 76162		\$1,000.00	
	Totali, 17 10102			_
				exas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
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The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/7	Report: 5/12
2 FILER NAME	Zimmerman, Winton B		3 ACCOUNT# 00000003	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Gavras, J Chris)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/17/2017	6 Contributor address; City; State; Zip Code 1301 Throckmorton St, Apt 2105 Fort Worth, TX 76102		\$300.00	exas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In		one, complete constants 1, C
Date	Full name of contributor ut-of-state PAC (ID# Gorrondona, Brad		Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 108 Enchanted Ct N Burleson, TX 76028		\$500.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Greer, Charles)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 6367 Elm Crest Ct Fort Worth, TX 76132		\$50.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
04/21/2017	Contributor address; City; State; Zip Code 4400 Northview Ct Akedo, TX 76008		\$250.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Halff Associates State PAC)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 1201 N Bowser Road Richardson, TX 75081		\$250.00	
				exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/7	7 Report: 6/12
2 FILER NAME	Zimmerman, Winton B		3 ACCOUNT# 00000003	(Ethics Commission filers)
4 Date	5 Full name of contributor uut-of-state PAC (ID# Harris, Thomas)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/17/2017	6 Contributor address; City; State; Zip Code 8040 Valley Drive North Richland Hills, TX 76182		\$250.00	
				Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#_ Hines, Wm Bart)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 3720 Winifred Dr Fort Worth, TX 76133		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor ut-of-state PAC (ID#_ Jensen, Daniel)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/07/2017	Contributor address; City; State; Zip Code 4004 Hartwood Fort Worth, TX 76109		\$250.00	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor uut-of-state PAC (ID#_ Johnson, Steven and Judy)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/09/2017	Contributor address; City; State; Zip Code 3533 Overton View Ct Fort Worth, TX 76109		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID#_Lowrance, Dan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/21/2017	Contributor address; City; State; Zip Code 2008 Four Oaks Lane Fort Worth, TX 76107		\$2,000.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

P.O.Box 12070

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	D+ 7/40
FILER NAME	Zimmerman, Winton B		Schedule: 5/7 3 ACCOUNT # 00000003	(Ethics Commission filers)
Date	5 Full name of contributor ut-of-state PAC (ID# Maddux, John H)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/21/2017	6 Contributor address; City; State; Zip Code 2120 Ridgemar Blvd., Ste 14 Fort Worth, TX 76116		\$250.00	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	10 Employer (See Inst		exas, complete scriedule 17
Date	Full name of contributor ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable
04/17/2017	Contributor address; City; State; Zip Code 3862 Candlelite Ln Fort Worth, TX 76109		\$300.00	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Inst	ructions)	
Date	Full name of contributor ut-of-state PAC (ID#_Middleton, Charles		Amount of contribution (\$)	In-kind contribution description (if applicable
04/09/2017	Contributor address; City; State; Zip Code 7017 Battle Creek Rd Fort Worth, TX 76116		\$50.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Inst	ructions)	
Date	Full name of contributor uut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable
04/17/2017	Contributor address; City; State; Zip Code 950 Commerce St Fort Worth, TX 76102		\$2,000.00 	
			(If travel outside of T	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Inst	ructions)	
Date	Full name of contributor ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable
Duto			\$500.00	
04/17/2017	Contributor address; City; State; Zip Code 950 Commerce St Fort Worth, TX 76102		1	
	950 Commerce St		i	exas, complete Schedule T)

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	7. 0
2	FILER NAME	Zimmerman, Winton B		3 ACCOUNT# 00000003	7 Report: 8/12 (Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Moncrief, W A)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/17/2017	6 Contributor address; City; State; Zip Code 950 Commerce St Fort Worth, TX 76102		\$1,000.00	
_					Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2017	Contributor address; City; State; Zip Code 4425 Owendale Dr Fort Worth, TX 76116		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
-	Principal occur	Deation / Job title (See Instructions)	Employer (See In		. с.
	Date	Full name of contributor ut-of-state PAC (ID# Muckleroy, Harold)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2017	Contributor address; City; State; Zip Code 3455 Ranch View Court Fort Worth, TX 76109		\$300.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor ut-of-state PAC (ID# Nowell, Mickey)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2017	Contributor address; City; State; Zip Code 7316 Madeira Dr Fort Worth, TX 76112		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Political Action Committee of Pacheco Koch)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2017	Contributor address; City; State; Zip Code 7557 Rambler Road, Ste 1400 Dallas, TX 75231		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

THE MSTRUCT	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/7	Report: 9/12
FILER NAME	Zimmerman, Winton B		1	Ethics Commission filers)
Date	5 Full name of contributor ut-of-state PAC (ID# Price, Betsy	!)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
04/07/2017	6 Contributor address; City; State; Zip Code P O Box 100066 Fort Worth, TX 76185		\$500.00	
			(If travel outside of Te	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 128 Sycamore Ct Grapevine, TX 76051		\$250.00	
			(If travel outside of Te	exas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		,
Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2017	Contributor address; City; State; Zip Code 7950 Camp Bowie West Fort Worth, TX 76116		\$500.00	
Principal occu	pation / Job title (See Instructions)	Employer (See In		exas, complete Schedule T)
i inicipal occu	pation, see the (eee mandadons)	Employer (occ iii	Stadeonsy	
Date	Full name of contributor ut-of-state PAC (ID# Weikum, Stephen		Amount of contribution (\$)	In-kind contribution description (if applicable)
04/20/2017	Contributor address; City; State; Zip Code 9757 Stoney Brook Rd Fort Worth, TX 76108		\$20.00	
	1		(If travel outside of Te	exas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Advertising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Accounting/Banking Legal Services Consulting Expense Event Expense Travel In District Contributions/Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Zimmerman, Winton B Schedule: 1/3 Report: 10/12 0000003 Date 5 Payee name 04/27/2017 Anedote 6 Amount (\$) Payee address City; State; Zip Code P O Box 84314 \$39.63 Baton Rouge, LA 70884 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Bank providor Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name 04/07/2017 Murphy Nasica Amount (\$) Payee address City; State; Zip Code \$1,500.00 815-A Brazos St, Ste 304 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting service Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Murphy Nasica 04/07/2017 Amount (\$) Payee address City; State: Zip Code 815-A Brazos St, Ste 304 \$6,905.26 Austin, TX 78701 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting service Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 04/11/2017 Murphy Nasica Amount (\$) Payee address City; State; Zip Code 815-A Brazos St, Ste 304 \$3,000.00 Austin, TX 78701

Description

Consulting service

Office sought:

Check if Austin, TX, officeholder living expense

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

Consulting Expense

Candidate / Officeholder name

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH (If travel outside of Texas, complete Schedule T)

Office held:

Texas Ethics Commission Austin, Texas 78711-2070 P.O.Box 12070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Legal Services Contributions/Donations Made By Candidate/Officeholder/Political Committee Consulting Expense Food/Beverage Expense Travel In District Travel Out Of District **Event Expense** Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Zimmerman, Winton B 00000003 Schedule: 2/3 Report: 11/12 5 Payee name Date 04/11/2017 Murphy Nasica 6 Amount (\$) 7 Payee address City; State; Zip Code 815-A Brazos St, Ste 304 \$14,705.44 Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Consulting service Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/12/2017 Murphy Nasica Amount (\$) Payee address City; State; Zip Code 815-A Brazos St, Ste 304 \$1,521.28 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting service Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name Murphy Nasica 04/20/2017 Amount (\$) Payee address City; State; Zip Code 815-A Brazos St, Ste 304 \$6,905.26 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting fee Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name USPS 04/07/2017 Amount (\$) Payee address City; State; Zip Code Trinity River \$300.00 Fort Worth, TX

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

Consulting Expense

Candidate / Officeholder name

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH Office held:

Description (If travel outside of Texas, complete Schedule T) Consulting service - Postage

Check if Austin, TX, officeholder living expense

Office sought:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial 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)

Schedule: 3/3 Re	2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (TEC filers 00000003
Date	5 Payee name		
04/07/2017	USPS		and the first of t
Amount (\$) \$200.00	7 Payee address City; State; Zip Code Trinity River Fort Worth, TX		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel ou Consulting services - I	tside of Texas, complete Schedule T) [Postage
		Check if Austin, TX, officel	nolder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held: