CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Winton NICKNAME LAST Zim Zimmerman	MI B. SUFFIX	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 11400 Northview Drive Fort Worth, TX 76008	CITY; STATE; ZIP CODE	RECEIVED JULIA 2016 OTT OF FORT WORTH OTT OF FORT WORTH
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (817) 244-8646	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Arthur NICKNAME LAST Gene Miers	MI E. SUFFIX	Receipt # Amount \$ Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT 5608 Malvey Avenue, #209 Fort Worth, TX 76107	/ SUITE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (817) 735-1454	EXTENSION	
9 REPORT TYPE	January 15 30th day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 01 / 01 / 2016	Month O6 THROUGH	Day Year 2016
11 ELECTION	ELECTION DATE Month Day Year Prima Gene	Description	
12 OFFICE	OFFICE HELD (if any) Fort Worth City Council District 3	13 OFFICE SOUGHT (if known)
	GO T	O PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

12 C / OH NAME	Zimmanna Mari	1	Pile ID	
13 C / OH NAME	Zimmerman, Winton	14	Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures These expenditures may have been made without the d officeholders are required to report this information or	candidate's or officeholder's k	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH/	AN PLEDGES. \$	0.00
TOTALS		ARANTEES OF LOANS), UNLESS ITEMIZED CAL CONTRIBUTIONS		
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	\$	12,517.0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		T DAY OF THE \$	96,713.14
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE LAST DAY \$	84,196.40
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	perjury, that the accompanying the following the report formation required to be report	ng report is ted by me
		Signature of Ca	m En laandidate or Officeholder	
AFFIX N	OTARY STAMP / SEAL AB	OVE		
Sworn to and sub		aid Winton Zimmeran	, this the 13th	day
or stuly	, 20 <u> 6</u> , to c	ertify which, witness my hand and seal of office.	My Commo	Expires
1	1			~ -

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 8 19 Filer ID 18 FILER NAME Zimmerman, Winton 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 12.517.04 X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District

Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers
Sch: 1/5 Rpt: 4/8	Zimmerman, Winton		
Date	5 Payee name		
01/08/2016	Gene Miers, CPA		
Amount (\$)	7 Payee address; City; State; Zip Code		
\$395.00	5608 Malvey Avenue, Suite 209 Fort Worth, TX 76107		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Accounting/Banking	Check if travel outs	ide of Texas. Complete Schedule T.
OF		Check if Austin,	TX, officeholder living expense
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/01/2016	Fort Worth Police Officer Matt Pierce Fund		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	c/o: Fort Worth Police Officers Association 2501 Parkview Drive, #600 Fort Worth, Tx 76102		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Contributions/Donations Made By	Check if travel outsi	de of Texas. Complete Schedule T.
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, 1	TX, officeholder living expense
LAPENDITONE		Contribution	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/01/2016	AHHS Booster Club		
Amount (\$)	Payee address; City; State; Zip Code		
\$100.00	4813 Bellflower Way		
\$100.00	Fort Worth, TX 76123		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE			ide of Texas, Complete Schedule T.
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin,	TX, officeholder living expense
	Candidate Sincerotein Cities Committee	Deserves	
	Candidate / Officeholder name	Donation Office sought	Office held
Complete ONLY if direct expenditure to benefit C/OF		Ouice sought	Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a retenany not listed shows)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/ The Instruction Guide explains how to	Wages/Contract Labor Other (enter a category not listed above) complete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 2/5 Rpt: 5/8	Zimmerman, Winton		
4 Date	5 Payee name		
04/07/2016	MedStar Golf Tournament		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$400.00	2900 Alta Mere Drive Fort Worth, TX 76116		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	PURPOSE Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule		
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense	
EXPENDITURE		Contribution	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
04/19/2016	JTD Strategies LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,250.00	201 Main Street, #600 Fort Worth, Tx 76102		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	Auvertising Expense	Check if Austin, TX, officeholder living expense	
		Charter Election	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
04/21/2016	ITD Strategies II C		
Amount (\$)	JTD Strategies LLC Payee address; City; State; Zip Code		
\$3,551.74	201 Main Street, #600 Fort Worth, TX 76102		
200	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE		Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense	
AN LIWITOIL			
		Charter Election	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

redit dard Paymon	The Instruction Guide explains how to d	omplete this form.		
Total pages Schedule F1	2 FILER NAME	3 File	er ID (Ethics Commission Filers)	
Sch: 3/5 Rpt: 6/8	Zimmerman, Winton			
Date	5 Payee name			
04/25/2016	JTD Strategies LLC			
Amount (\$)	7 Payee address; City; State; Zip Code			
\$3,650.30	201 Main Street, #600			
	Fort Worth, TX 76102			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense Charter Election		
OF	Autoriting Experies			
EXPENDITURE				
		Onarci Licotori		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held	
Date	Payee name			
04/28/2016	JTD Strategies LLC			
Amount (\$)	Payee address; City; State; Zip Code			
\$75.00	201 Main Street, #600			
	Fort Worth, Tx 76102			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Check if travel outside of Texas. Complete Schedule T.			
OF	Advertising Expense	Check if Austin, TX, offi	ceholder living expense	
EXPENDITURE		Charter Election		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/C	iH			
D.4-	Payee name			
Date	ayee hanc			
05/00/0040	Cone Miore CDA			
05/02/2016 Amount (\$)	Gene Miers, CPA Payee address; City; State; Zip Code			
Amount (4)				
\$395.00	5608 Malvey Avenue, Suite 209 Fort Worth, TX 76107			
\$395.00	Fort Worth, TX 76107	<u> </u>		
\$395.00		Description Chastista of E	avan Complete School do T	
PURPOSE	Fort Worth, TX 76107 Category (See Categories listed at the top of this schedule)	Check if travel outside of To	exas. Complete Schedule T.	
	Fort Worth, TX 76107	Check if travel outside of To	exas. Complete Schedule T. iceholder living expense	
PURPOSE OF	Fort Worth, TX 76107 Category (See Categories listed at the top of this schedule)	Check if travel outside of To	iceholder living expense	
PURPOSE OF	Fort Worth, TX 76107 Category (See Categories listed at the top of this schedule)	Check if travel outside of To	iceholder living expense	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F1:	2 FILER NAME	3 F	iler ID (Ethics Commission Filers
Sch: 4/5 Rpt: 7/8	Zimmerman, Winton		
Date	5 Payee name		
05/03/2016	USS Fort Worth Support Committee		***
Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,000.00	PO Box 246 Fort Worth, TX 76101		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.		
OF	Candidate/Officeholder/Political Committee	Check if Austin, TX, o	fficeholder living expense
EXPENDITURE		Contribution	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/06/2016	Greater FW Civic Leaders		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	3850 Silverton Circle, #1301 Fort Worth, Tx 76133		
PURPOSE Contributions/Donations Made By Check if t			exas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Contribution	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/27/2016	FW Drowning Prevention Coalition		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	PO Box 11813 Fort Worth, TX 76110		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contributions/Donations Made By		exas. Complete Schedule T. ficeholder livirig expense
	Candidate/Officeholder/Political Committee		
		Contribution	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out of District
Other (out of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salanes/ The Instruction Guide explains how to	Wages/Contract Labor Other (enter a category not listed above) complete this form.		
Total pages Schedule F1: 2 FILER NAME Sch: 5/5 Rpt: 8/8 Zimmerman, Winton				
4 Date	Zimmerman, Winton			
	5 Payee name			
06/27/2016	Snowball Express			
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 611 S. Main, #400 Grapevine, TX 76051			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
OF	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense		
EXPENDITURE		Contribution		
9 Complete ONLY if direct expenditure to benefit C/OF	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 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	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	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/O	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED		