


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**CITY SECRETARY  
FT. WORTH, TX**

**FORM C/OH  
COVER SHEET PG 1**

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000111	2 PAGE # 1 of 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Winton B		OFFICE USE ONLY Date Received  Date Hand-delivered or file is postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Zim Zimmerman		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11400 Northview Drive Fort Worth, TX 76008		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Arthur E		
	NICKNAME LAST SUFFIX Gene Miers		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5608 Malvey Ave., Ste 209 Fort Worth, TX 76107		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    Month Day Year 01/01/2017    THROUGH    04/06/2017		
10 ELECTION	ELECTION DATE Month Day Year 05/06/2017	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) City Councilman District 3		12 OFFICE SOUGHT (if known) City Councilman District 3
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** Zimmerman, Winton B**14 ACCOUNT #** (Ethics Commission filers)  
00000111**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This box is for notice of political expenditures 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**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 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)

\$

37,392.68

**EXPENDITURE  
TOTALS**

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

90,700.78

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

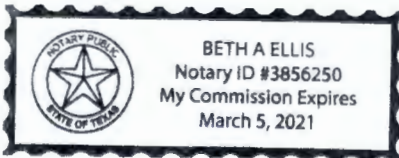
\$

67,178.48

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

\$

0.00

**17 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 WB Zimmerman, this the 6<sup>th</sup> day  
of April, 20 17, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Beth A. ELLIS

Print 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 PAGE # Schedule: 1/13 Report: 3/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, R Denny (Mr.)  6 Contributor address; City; State; Zip Code 4200 S Hulen St., Ste 617 Fort Worth, TX 76109	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anfin, Larry  Contributor address; City; State; Zip Code 7020 Castle Creek Court Fort Worth, TX 76132	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/08/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Applequist, Chris  Contributor address; City; State; Zip Code 9034 Meadowknoll Drive Dallas, TX 75243	Amount of contribution (\$)  \$95.80	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Avila, John Jr.  Contributor address; City; State; Zip Code 2600 West 7th Street Unit 1831 Fort Worth, TX 76107	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bares, Gus S  Contributor address; City; State; Zip Code 2711 Simondale Drive Fort Worth, TX 76109	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 2/13 Report: 4/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000111

**4** Date

03/02/2017

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barnes, Bradford S

**6** Contributor address; City; State; Zip Code  
4405 Harley Ave  
Fort Worth, TX 76107

**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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Barr, Kenneth L

Contributor address; City; State; Zip Code  
3101 Avondale Avenue  
Fort Worth, TX 76109

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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Boschini, Victor J

Contributor address; City; State; Zip Code  
3100 Avondale Ave  
Fort 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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Churchill, Mac

Contributor address; City; State; Zip Code  
611 River Crest Drive  
Fort Worth, TX 76107

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

03/30/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Conatser, Jerry

Contributor address; City; State; Zip Code  
5327 Wichita St  
Fort Worth, TX 76119

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)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 3/13 Report: 5/24	
<b>2</b> FILER NAME Zimmerman, Winton B		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000111	
<b>4</b> Date  03/02/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conatser Construction TX LP  ..... <b>6</b> Contributor address; City; State; Zip Code 5327 Wichita St Fort Worth, TX 76119	<b>7</b> Amount of contribution (\$)  \$1,000.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conatser Site Services TX LP  ..... Contributor address; City; State; Zip Code P O Box 15804 Fort Worth, TX 76119	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooperstein, Karen  ..... Contributor address; City; State; Zip Code 1332 Coral Dr Coppell, TX 75019	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Croy, Mike and Nancy  ..... Contributor address; City; State; Zip Code 6905 Tumbling Trail Fort Worth, TX 76116	Amount of contribution (\$)  \$95.80	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edrington, Rhonda  ..... Contributor address; City; State; Zip Code 6505 Meadow West Dr Fort Worth, TX 76132	Amount of contribution (\$)  \$95.80	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 4/13 Report: 6/24	
2 FILER NAME Zimmerman, Winton B			3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fickes, Gary  6 Contributor address; City; State; Zip Code 4704 Cabernet Circle Colleyville, TX 76034		7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freese and Nichols PAC  Contributor address; City; State; Zip Code 4055 Onternational Plaza, Ste 200 Fort Worth, TX 76109		Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date  03/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geesbregt, John  Contributor address; City; State; Zip Code 6710 FoxPointe RD Fort Worth, TX 76132		Amount of contribution (\$)  \$1,500.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gideon, Randall C  Contributor address; City; State; Zip Code 2600 W 7th St, Apt 2548 Fort Worth, TX 76107		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date  03/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gikkey, Garey  Contributor address; City; State; Zip Code 1201 Kelpie Court Fort Worth, TX 76111		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/13 Report: 7/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Good Government Fund  6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$)  \$1,500.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greater Fort Worth Association of Realtors for PAC - Noncorporate  Contributor address; City; State; Zip Code 2650 Parkview Dr Fort Worth, TX 76102	Amount of contribution (\$)  \$2,500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffin, Curtis  Contributor address; City; State; Zip Code 6619 Pine Valley Pl Fort Worth, TX 76132	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/15/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hannigan, Edward J  Contributor address; City; State; Zip Code 3613 Chapin Ct Fort Worth, TX 76116	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, James R  Contributor address; City; State; Zip Code 619 Rivercrest Fort Worth, TX 76107	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 6/13 Report: 8/24	
2 FILER NAME Zimmerman, Winton B				3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/15/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogan, Gary		7 Amount of contribution (\$)  \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2117 Rolling Creek Run Fort Worth, TX 76108			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  03/08/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howeth, T A		Amount of contribution (\$)  \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6224 Curzon Ave Fort Worth, TX 76116			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) J D Johnson Campaign		Amount of contribution (\$)  \$300.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 136021 Fort Worth, TX 76136			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jandrucko, Stacey		Amount of contribution (\$)  \$2,000.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 617 Westwood Avenue Fort Worth, TX 76107			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, Rodney D		Amount of contribution (\$)  \$95.80		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3908 Lynncrest Dr Fort Worth, TX 76109			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 7/13 Report: 9/24	
2 FILER NAME Zimmerman, Winton B				3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/13/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lamers, John		7 Amount of contribution (\$)  \$95.80		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3405 Acom Run Fort Worth, TX 76109			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  03/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leavens, Thomas		Amount of contribution (\$)  \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3839 South Hills Circle Fort Worth, TX 76109			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leonard, Martha V		Amount of contribution (\$)  \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1411 Shady Oaks Lane Fort Worth, TX 76107			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Linebarger Googan Blair & Sampson, LLP		Amount of contribution (\$)  \$2,500.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 17428 Austin, TX 78765			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Louden, G Malcolm		Amount of contribution (\$)  \$2,000.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 W 7th St, Unit. #27 Ste 1007 Fort Worth, TX 76102			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		1 PAGE # Schedule: 8/13 Report: 10/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melcher, John Q  6 Contributor address; City; State; Zip Code Box 100009 Fort Worth, TX 76185	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merrill, Rick  Contributor address; City; State; Zip Code 3818 Monticello Fort Worth, TX 76107	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/22/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Melissa  Contributor address; City; State; Zip Code 2429 Rogers Avenue Fort Worth, TX 76109	Amount of contribution (\$)  \$239.95	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moncrief, Mike and Rosie  Contributor address; City; State; Zip Code 777 Taylor Street, Ste 1030 Fort Worth, TX 76102	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montesi, Terry  Contributor address; City; State; Zip Code 1701 River Run, Ste 500 Fort Worth, TX 76107	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/13 Report: 11/24	
2 FILER NAME Zimmerman, Winton B				3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  02/28/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montseran Properties, LLC		7 Amount of contribution (\$)  \$1,000.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6000 Western Pl, Ste 110 Fort Worth, TX 76107			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  03/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moroneso, Philip		Amount of contribution (\$)  \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2821 W 7th St, Ste 700 Fort Worth, TX 76107			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/29/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MV Services, Inc		Amount of contribution (\$)  \$500.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P O Box 34225 Fort Worth, TX 76162			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Navejar, Rosa		Amount of contribution (\$)  \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2701 Calder Ct Fort Worth, TX 76107			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  03/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newell, Carla		Amount of contribution (\$)  \$750.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5101 Cliffrose Lane Fort Worth, TX 76109			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 10/13 Report: 12/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000111

**4** Date

03/02/2017

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perot, H R Jr.

**6** Contributor address; City; State; Zip Code  
3000 Turtle Creek Blvd  
Dallas, TX 75219

**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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Pigman, Reed Jr.

Contributor address; City; State; Zip Code  
200 Texas Way  
Fort 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)

Date

03/14/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ponitz, Ken

Contributor address; City; State; Zip Code  
11324 Northview Drive  
Aledo, TX 76008

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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Powell, James Charles

Contributor address; City; State; Zip Code  
P O Box 444  
Hurst, TX 76053

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

03/02/2017

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Raney, John

Contributor address; City; State; Zip Code  
4103 South Texas Ave., Ste 103  
Bryan, TX 77802

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)



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/13 Report: 13/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roach, John V  6 Contributor address; City; State; Zip Code 2800 Alton Rd Fort Worth, TX 76109	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Snodgrass, Elizabeth  Contributor address; City; State; Zip Code 6917 Hazeltine Dr Fort Worth, TX 76132	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stingley, Taleigh  Contributor address; City; State; Zip Code 3212 River Park Ln S Fort Worth, TX 76116	Amount of contribution (\$)  \$23.73	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sturns, Vernell  Contributor address; City; State; Zip Code 612 Highwoods Trl Fort Worth, TX 76112	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sweeney, Charles  Contributor address; City; State; Zip Code P O Box 8720 Fort Worth, TX 76124	Amount of contribution (\$)  \$2,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/13 Report: 14/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000111	
4 Date  03/06/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Progress Fund  6 Contributor address; City; State; Zip Code 801 Cherry Street - Unit #9 Fort 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) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thornhill, S J  Contributor address; City; State; Zip Code 7201 Hawkins View, Ste 101 Fort Worth, TX 76132	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Turner, Wesley  Contributor address; City; State; Zip Code 2717 Cokonial Pkwy Fort Worth, TX 76109	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Underwood Equipment Co  Contributor address; City; State; Zip Code 2900 Marquita Dr Fort Worth, TX 76116	Amount of contribution (\$)  \$2,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) UNPJ Holding Co, LTD  Contributor address; City; State; Zip Code 715 E 9th Street Fort Worth, TX 76102	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 13/13 Report: 15/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000111

**4** Date

03/29/2017

**5** Full name of contributor

Walton, Mark

☐ out-of-state PAC (ID# \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code

6620 Sahalee Dr  
Fort Worth, TX 76132

**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

03/29/2017

Full name of contributor

William Jones Productions

☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

4220 RiverHollow Dr  
Fort Worth, TX 76116

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

03/30/2017

Full name of contributor

Woodard, Wanda

☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

3921 Stonehenge Rd  
Fort 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)

**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/9 Report: 16/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 01/13/2017		<b>5 Payee name</b> Gene Miers CPA			
<b>6 Amount (\$)</b> \$395.00		<b>7 Payee address</b> City; State; Zip Code 5608 Malvey Ave., Ste 209 Fort Worth, TX 76107			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Banking  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 03/01/2017		<b>Payee name</b> Glen E Ellman Photography			
<b>Amount (\$)</b> \$800.00		<b>Payee address</b> City; State; Zip Code P. O. Box 126081 Benbrook, TX 76126			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photographs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/24/2017		<b>Payee name</b> Go Daddy			
<b>Amount (\$)</b> \$193.06		<b>Payee address</b> City; State; Zip Code 14455 North Hayden Road, Ste 219 Scottsdale, AZ			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 01/06/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$250.00		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	



**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/9 Report: 17/24	<b>2</b> FILER NAME Zimmerman, Winton B	<b>3</b> ACCOUNT # (TEC filers) 00000111
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<b>4</b> Date 01/06/2017	<b>5</b> Payee name Murphy Nasica Associate
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<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign consultant
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/09/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$433.35	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign consultant
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/17/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$8,667.36	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Consultant
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 01/19/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$1,923.75	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant expense
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/9 Report: 18/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 02/01/2017		<b>5 Payee name</b> Murphy Nasica Associate			
<b>6 Amount (\$)</b> \$13,239.35		<b>7 Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/01/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$3,000.00		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant expense  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/06/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$396.91		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/09/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$457.46		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	



**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/9 Report: 19/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 02/14/2017	<b>5 Payee name</b> Murphy Nasica Associate				
<b>6 Amount (\$)</b> \$6,111.09	<b>7 Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/15/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$428.67	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/16/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$866.55	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 02/22/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$487.35	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/9 Report: 20/24	<b>2</b> FILER NAME Zimmerman, Winton B	<b>3</b> ACCOUNT # (TEC filers) 00000111
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<b>4</b> Date 02/28/2017	<b>5</b> Payee name Murphy Nasica Associate
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<b>6</b> Amount (\$) \$3,171.73	<b>7</b> Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/01/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/01/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$13,205.44	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 03/01/2017	Payee name Murphy Nasica Associate
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Amount (\$) \$4,000.00	Payee address City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 6/9 Report: 21/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 03/02/2017	<b>5 Payee name</b> Murphy Nasica Associate				
<b>6 Amount (\$)</b> \$185.00	<b>7 Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 03/03/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$1,500.00	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 03/03/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$1,500.00	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 03/03/2017	<b>Payee name</b> Murphy Nasica Associate				
<b>Amount (\$)</b> \$3,000.00	<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 7/9 Report: 22/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 03/03/2017		<b>5 Payee name</b> Murphy Nasica Associate			
<b>6 Amount (\$)</b> \$5,002.94		<b>7 Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 03/06/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$478.05		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 03/08/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$3,153.31		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consultant  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 03/21/2017		<b>Payee name</b> Murphy Nasica Associate			
<b>Amount (\$)</b> \$5,650.00		<b>Payee address</b> City; State; Zip Code 815-A Brazos St #304 Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	



**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 8/9 Report: 23/24		<b>2 FILER NAME</b> Zimmerman, Winton B		<b>3 ACCOUNT # (TEC filers)</b> 00000111	
<b>4 Date</b> 03/22/2017		<b>5 Payee name</b> Murphy Nasica Associate			
<b>6 Amount (\$)</b> \$3,500.00		<b>7 Payee address City; State; Zip Code</b> 815-A Brazos St #304 Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/17/2017		<b>Payee name</b> Tarrant County Junior Livestock Association			
<b>Amount (\$)</b> \$1,000.00		<b>Payee address City; State; Zip Code</b> 6713 Telephone Road, Ste 301 Fort Worth, TX 76135			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 02/27/2017		<b>Payee name</b> The Fort Worth Club			
<b>Amount (\$)</b> \$1,355.41		<b>Payee address City; State; Zip Code</b> 306 West Seventh Street Fort Worth, TX 76102			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fund raising  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 03/06/2017		<b>Payee name</b> U S P S			
<b>Amount (\$)</b> \$249.00		<b>Payee address City; State; Zip Code</b> Fort Worth, TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	

**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)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 9/9 Report: 24/24		<b>2</b> FILER NAME Zimmerman, Winton B		<b>3</b> ACCOUNT # (TEC filers) 00000111	
<b>4</b> Date 03/22/2017		<b>5</b> Payee name U S P S			
<b>6</b> Amount (\$) \$100.00		<b>7</b> Payee address City; State; Zip Code Fort Worth, TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	