# CITY SECRETARY FT. WORTH, TX

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete the	his form. 1 Filer ID		2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIR		MI	OFFICE USE ONLY
	NICKNAME LAS Biv	ST ens	SUFFIX	RECEIVED  APR - 7 2017  APR - 7 2017  Pale Hand Officer of Control Worth
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUI 5913 McKaskle Drive	ITE#; CITY;	ZIP CODE	Date Hand-delivered of Part Bostmarked  Receipt # Amount
Change of Address	Fort Worth, TX 76119			Date Processed  Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRS	ST	MI	
	NICKNAME LAS	T	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX	PLEASE); AP	T / SUITE #; CITY;	STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU	MBER EXTENSION		
8 REPORT TYPE		th day before election	Runoff  Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2017	THROUGH	Month Day 03/27/2017	Year
10 ELECTION	ELECTION DATE Month Day Year	Primary  X General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) Place Fort Worth, District 5		12 OFFICE SOUGHT (i	f known)
		GO TO PAGE 2	8	

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 14

					2 01 14				
13 C / OH NAME	Bivens, Gyna		14 Filer ID						
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.								
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
_	GENERAL	COMMITTEE ADDRESS							
	SPECIFIC	COMMITTEE ADDRESS							
	Si Edillo								
		COMMITTEE CAMPAIGN TREASURER NAM	ΛE						
		COMMITTEE CAMPAIGN TREASURER ADD	DRESS						
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTH ARANTEES OF LOANS), UNLESS ITEMIZED	ER THAN PLEDGES,	\$	0.00				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LO	OANS)	\$	7,325.00				
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNL	ESS ITEMIZED	\$	27.40				
	4. TOTAL POLITIC	AL EXPENDITURES		\$	5,355.21				
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF TH RIOD	HE LAST DAY OF THE	\$	0.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	S AS OF THE LAST DAY	\$	0.00				
17 AFFADAVIT									
			nalty of perjury, that the acc es all information required to de.						
	RONALD P. GONZALES ID #10520616 My Commission Expires May 17, 2020	Hy Bignatur	re of Candidate or Officehold	der					
	TARY STAMP / SEAL ABO	Guna Rivens	, this the 7th		day				
of to and subsc	ribed before me, by the sa	rtify which, witness my hand and seal of office.			uuy				
Signature of office	er administering	Printed name of officer administering	Title of officer	administeri	ng oath				

# FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 14 19 Filer ID 18 FILER NAME Bivens, Gyna 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE \$ 7,325.00 X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 5,355.21 5. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/14 Filer ID 2 FILER NAME Bivens, Gyna Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$100.00 03/07/2017 Austin, James N/Gloria N 6 Contributor address; City; State; Zip Code 2401 Scott Avenue Fort Worth, TX 76103 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 03/07/2017 \$25.00 Barnes, Bertha Contributor address; City; State; Zip Code 4450 Burke Rd. Fort Worth, TX 76119 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$150.00 03/09/2017 Barr, Kenneth (Mr.) Contributor address; City; State; Zip Code 3101 Avondale Fort Worth, TX 76109 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 03/07/2017 Beckman, Marlene Contributor address; City; State; Zip Code 2300 Medford Court East Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 03/13/2017 \$300.00 Bell Helicopter Textron Inc, PAC Contributor address; City; State; Zip Code PO Box 482 Fort Worth, TX 76101 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.1093

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/6 Rpt: 5/14 Filer ID 2 FILER NAME Bivens, Gyna Amount of Contribution (\$) 4 Date Full name of contributor out-of-state PAC (ID#: \$200.00 03/27/2017 BenefiTree Enterprises, LLC 6 Contributor address; City; State; Zip Code 4700 Bryant Irvin Court Suite 304 Fort Worth, TX 76107 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:\_ Amount of Contribution (\$) Date Full name of contributor \$500.00 03/07/2017 Berry, Marilyn F/Michael K Contributor address; City; State; Zip Code 6217 Genoa Road Fort Worth, TX 76116 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$250.00 03/07/2017 Biggins, Lillie Contributor address; City; State; Zip Code TX Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 03/07/2017 Caldwell, Charles Contributor address; City; State; Zip Code PO Box 601174 Dallas, TX 75360 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$300.00 03/08/2017 Doulas, Olga Sharon Contributor address; City; State; Zip Code 6502 Watch Hill Arlington, TX 76002 **Employer (See Instructions)** Principal occupation / Job title (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/6 Rpt: 6/14 Filer ID 2 FILER NAME Bivens, Gyna 4 Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#; 03/07/2017 \$100.00 Fersing, Jan Contributor address; City; State; Zip Code 3800 Trailwood Lane Fort Worth, TX 76109 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/02/2017 \$1,500.00 Good Government Fund Contributor address; City; State; Zip Code 200 Main Street Fort Worth, TX 76102 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$30.00 03/07/2017 Hadley, Mildred (Mrs.) Contributor address; City; State; Zip Code 6017 Truman Drive Fort Worth, TX 76112 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/06/2017 \$200.00 Havener, Gary W/Judelle W Contributor address; City; State; Zip Code PO Box 121969 Fort Worth, TX 76121 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 03/08/2017 \$100.00 Hunter, Eugene/Collie Contributor address; City; State; Zip Code 1400 Country Manor Rd. Fort Worth, TX 76134 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/6 Rpt: 7/14 Filer ID 2 FILER NAME Bivens, Gyna 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$20.00 03/07/2017 Ingram, William/Shirley 6 Contributor address; City; State; Zip Code 5512 Eisenhower Drive Fort Worth, TX 76112 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 03/07/2017 Johnson, Willis/Sophia Contributor address; City; State; Zip Code 1001 Belleview Dallas, TX 75215 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$200.00 03/05/2017 Jones, Theodore/Ola M Contributor address; City; State; Zip Code 3232 Knox Fort Worth, TX 76119 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$200.00 03/07/2017 Navejar, Rosa Contributor address; City; State; Zip Code 2701 Calder Court Fort Worth, TX 76107 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$100.00 03/07/2017 Newby, Carl/Sandra Contributor address; City; State; Zip Code 715 Jones Fort Worth, TX 76102 **Employer (See Instructions)** Principal occupation / Job title (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/6 Rpt: 8/14 Filer ID 2 FILER NAME Bivens, Gyna Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 03/07/2017 Proctor, John 6 Contributor address; City; State; Zip Code PO Box 765129 Dallas, TX 75216 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$200.00 03/07/2017 Sadberry, Charles A/Birdie M Contributor address; City; State; Zip Code 14801 Meadowland Circle Newark, TX 76071 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 03/07/2017 Scarth, Danny Contributor address; City; State; Zip Code 505 Highwoods Trail Fort Worth, TX 76112 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$250.00 03/27/2017 Tucker, Allen Contributor address; City; State; Zip Code 1601 BRiar Drive Bedford, TX 76022 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$100.00 03/27/2017 Turner, Paulette Contributor address; City; State; Zip Code 3801 Hillside Trail Grapevine, TX 76051 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/6 Rpt: 9/14 3 Filer ID 2 FILER NAME Bivens, Gyna 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$100.00 03/06/2017 Ware, Wyntress/Theois 6 Contributor address; City; State; Zip Code 6322 Warwick Hills Drive Fort Worth, TX 76132 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 03/17/2017 West, Robert Contributor address; City; State; Zip Code 301 Commerce Street Suite 3500 Fort Worth, TX 76102 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$100.00 03/07/2017 Williams, Billy T/Martha M Contributor address; City; State; Zip Code 4327 Vine Ridge Court Arlington, TX 76017 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services  The Instruction Guide explains how to complete			se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed	above)			
1	Total pages Schedule F1:	2	FILER NAM	E					2.0.7	3	Filer ID	
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4	Date	5	Payee name	<del></del>						<u> </u>		* 1 10 10 10 10 10 10 10 10 10 10 10 10 1
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9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholo	ler name	0	ffice s	ought			Office held	
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## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

			Gift/Awards/Memoria Legal Services The Instruction			Wage	s/Contract Labor	Travel Out of District OTHER (enter a categ	ory not listed above)	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
	Sch: 2/5 Rpt: 11/14		Bivens, Gyr							
4	Date	5	Payee name		2					
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6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	ode			
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8	PURPOSE OF	(a)		e Categories listed a	t the top of this sc	hedule)	(b)	Description	aide of Toyon Complete S	Sabadula T
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	PURPOSE	(a)	Category (Se	Categories listed at	t the top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Credit Card	Payment					side of Texas. Complete S	
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	expenditure to benefit C/OF				·		J			

## SCHEDULE F1

Advertising Expense

Event Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense
Transportation Equipment & Related Ex

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	ood/Beverage Expense oift/Awards/Memorials Expense egal Services  Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)	
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8	PURPOSE OF	I .	(See Categories listed at the top of this sch	hedule)	b) Description	- uto	ida -4 Tayan Camulata Cabadula T	
	EXPENDITURE	Advertising	J Expense		<u> </u>		ide of Texas. Complete Schedule T. , officeholder living expense	
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9	Complete ONLY if direct expenditure to benefit C/OH		fficeholder name C	Office soug	nt		Office field	
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	PURPOSE	(a) Category (	See Categories listed at the top of this sch	hedule)	b) Description	_		
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	EXPENDITURE		/Officeholder/Political Ćomm	nittee			officeholder living expense	
		İ			donation to K	elly	Allen Gray Campaign	
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	Complete ONLY if direct		ficeholder name C	Office sough	nt		Office held	
	expenditure to benefit C/OF	1						

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Travel in District Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 4/5 Rpt: 13/14 Bivens, Gyna 4 Date Payee name 03/27/2017 Hone Depot 6 Amount (\$) Payee address; City; State; Zip Code \$18.94 **Bridge Street** Fort Worth, TX 76112 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Sign equipment **EXPENDITURE** Check if Austin, TX, officeholder living expense plastic ties and other equipment for signs Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2017 **IHOP** Amount (\$) Payee address; City; State; Zip Code \$26.81 TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Strategy Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/23/2017 Julio's Amount (\$) Payee address; City; State; Zip Code \$600.00 TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Set Up Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp	Office Overh Polling Expe ee Printing Expe Salaries/Wa	pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E		T	3 Filer ID
	Sch: 5/5 Rpt: 14/14	Bivens, Gyr				
4	Date	5 Payee name	)			
	03/21/2017	Murphy Nas				
6	Amount (\$) \$4,147.90	7 Payee addres	ess; City;	State; Zip Code	}	
8	PURPOSE					
	PURPOSE OF EXPENDITURE	(a) Category <sub>(Se</sub>	See Categories listed at the top of t Expense	his schedule)	Check if Austin, T	outside of Texas. Complete Schedule T. TX, officeholder living expense design and printing
9	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office sough	t	Office held
	Date	Payee name				
_	01/09/2017	Wendy's			<u></u>	
	Amount (\$) \$13.60	Payee addres	ss; City; S	State; Zip Code	30.04.40	
		TX				
	PURPOSE OF EXPENDITURE		ee Categories listed at the top of the age Expense	is schedule) (b)	البينيا	utside of Texas. Complete Schedule T. FX, officeholder living expense ON
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic H	eholder name:	Office sought		Office held