

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**OFFICIAL RECORD
CITY SECRETARY**

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

FT. WORTH, TX

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 19

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Jeanette
Martinez

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 812-0270

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI

NICKNAME LAST SUFFIX

Nakia
Cole

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

(Residence or Business)

4805 Tahoe Drive, Fort Worth, TX 76119

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 946-4933

9 REPORT TYPE

- January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year
03 / 28 / 2023 04 / 26 / 2023

11 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff Other Description

05 / 06 / 2023 General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Fort Worth City Council District 11

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
GENERAL	Charter Schools Now Pac
	COMMITTEE ADDRESS
	3005 S Lamar Blvd., Ste. D109 #250, Austin, TX 78704
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	Rex Gore
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	1301 W Oltorf St., Austin, TX 78704

OFFICE USE ONLY

Date Received

CSO REC'D
APR 28 12:38 PM '23

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Jeanette Martinez</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,230. ⁰⁰
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 36,723.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,439.42
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

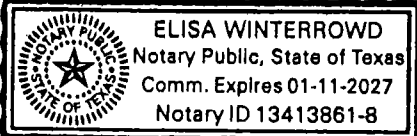
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jm

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Jeanette Martinez this the 28th day of April, 2023, to certify which, witness my hand and seal of office.

[Signature] Elisa Winterrowd Admin Assist.
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Jeanette Martinez</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,230. ⁰⁰
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,839.86
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 19,153.70
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 730. ⁰⁰
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <p style="text-align: center; font-size: 1.2em;">Jeanette Martinez</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="font-size: 1.2em;">3/28/23</p>	5 Full name of contributor out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Jeff Davis</p>	7 Amount of contribution (\$) <p style="font-size: 1.2em;">500.⁰⁰</p>
6 Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">2325 Mistletoe Dr., Fort Worth, TX 76110</p>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <p style="font-size: 1.2em;">3/30/23</p>	Full name of contributor out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Robert Fernandez</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">100.⁰⁰</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">2305 Colonial Pkwy., Fort Worth, TX 76109</p>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <p style="font-size: 1.2em;">4/2/23</p>	Full name of contributor out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">Domingo Garcia</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">1,000.⁰⁰</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">1111 W. Mockingbird Ln., Dallas, TX 75247</p>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <p style="font-size: 1.2em;">4/5/23</p>	Full name of contributor out-of-state PAC (ID#: _____) <p style="font-size: 1.2em;">James McClinton</p>	Amount of contribution (\$) <p style="font-size: 1.2em;">100.⁰⁰</p>
Contributor address; City; State; Zip Code <p style="font-size: 1.2em;">411 Dublin St., Fort Worth, TX 75067</p>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/6/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Alfred Micallef</i>	7 Amount of contribution (\$) <i>1,000.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>1401 N Bowie Dr., Weatherford, TX 76086</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/6/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Richard Roby</i>	Amount of contribution (\$) <i>500.⁰⁰</i>
Contributor address; City; State; Zip Code <i>7578 Morrison Ct., Fort Worth, TX 76112</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/13/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Ty Stimpson</i>	Amount of contribution (\$) <i>250.⁰⁰</i>
Contributor address; City; State; Zip Code <i>4113 Ridglea Country Club Dr., Fort Worth, TX 76126</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/17/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Crystal Alba</i>	Amount of contribution (\$) <i>100.⁰⁰</i>
Contributor address; City; State; Zip Code <i>6448 Gregg Rd., Krum, TX 76249</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/18/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Vero Olmos</i>	7 Amount of contribution (\$) <i>50.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>2408 Purselley Ave., Fort Worth, TX 76112</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/18/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Mario Perez</i>	Amount of contribution (\$) <i>250.⁰⁰</i>
Contributor address; City; State; Zip Code <i>2744 5th Ave, Fort Worth, TX 76110</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Stephen Tidwell</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>429 College Ave. Apt 242, Fort Worth, TX 76104</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Andres Aruñá</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>637 Samuels Ave. Apt 1038, Fort Worth, TX 76102</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/19/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Rocio Aguilar</i>	7 Amount of contribution (\$) <i>25.⁰⁰</i>
	6 Contributor address; City; State; Zip Code <i>1425 Blazing Star Trail, Fort Worth, TX 76028</i>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Curtis Knowles</i>	Amount of contribution (\$) <i>50.⁰⁰</i>
	Contributor address; City; State; Zip Code <i>366 HCR 133D, Hillsboro, TX 76645</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Rick Brunson</i>	Amount of contribution (\$) <i>100.⁰⁰</i>
	Contributor address; City; State; Zip Code <i>2110 Emerald Lake Dr., Arlington, TX 76013</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Carla Brown</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
	Contributor address; City; State; Zip Code <i>6411 Forest Hill Dr., Forest Hill, TX 76119</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/20/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Lety Gomez</i>	7 Amount of contribution (\$) <i>100.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>1136 Hidden Lake Dr., Burleson, TX 76028</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/20/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Laura Kinkade</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>2786 Quail Ridge Cir., Fullerton, CA 92835</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/20/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Lindsey Klatzkin</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>4416 Norwich Dr., Fort Worth, TX 76109</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/20/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Margie Thomas</i>	Amount of contribution (\$) <i>50.⁰⁰</i>
Contributor address; City; State; Zip Code <i>5001 Strathmore Terrace, Colleyville, TX 76034</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/21/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>David Salgado</i>	7 Amount of contribution (\$) <i>300.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>7929 Joreen Drive, NRH, TX 76180</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Catherine Junior</i>	Amount of contribution (\$) <i>100.⁰⁰</i>
Contributor address; City; State; Zip Code <i>421 Hummingbird Trail, Crowley, TX 76033</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Jesse Rangel</i>	Amount of contribution (\$) <i>500.⁰⁰</i>
Contributor address; City; State; Zip Code <i>10 Duskview Ln., Fort Worth, TX 76134</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Theresa Parsons</i>	Amount of contribution (\$) <i>50.⁰⁰</i>
Contributor address; City; State; Zip Code <i>608 Woodside Dr., Hurst, TX 76053</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/21/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Jeff Whitfield</i>	7 Amount of contribution (\$) <i>250.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>1319 Black Walnut Lane, Arlington, TX 76005</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Roderick Miles</i>	Amount of contribution (\$) <i>100.⁰⁰</i>
Contributor address; City; State; Zip Code <i>5617 Seawood Dr., Fort Worth, TX 76123</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Jen Rangel</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>2132 S Jennings Ave., Fort Worth, TX 76110</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/21/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Mervil Johnson</i>	Amount of contribution (\$) <i>50.⁰⁰</i>
Contributor address; City; State; Zip Code <i>1511 Oakland Blvd., Fort Worth, TX 76103</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/21/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Yesenia Valdez</i> 6 Contributor address; City; State; Zip Code <i>4809 Victor Street, Dallas, TX 75246</i>	7 Amount of contribution (\$) <i>30.⁰⁰</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/22/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Juan Rodriguez</i> Contributor address; City; State; Zip Code <i>6889 Hightower Drive, NRIH, TX 76182</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/22/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Martha Wright</i> Contributor address; City; State; Zip Code <i>5644 Hensley Dr., Fort Worth, TX 76134</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/23/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Viola J. Denn</i> Contributor address; City; State; Zip Code <i>5121 Almeca Road, River Oaks, TX 76114</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/23/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Bradford Barnes</i>	7 Amount of contribution (\$) <i>1,000.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>4450 Harley Ave., Fort Worth, TX 76107</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/23/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Juana Nava</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>6417 Woodstream Trail, Fort Worth, TX 76133</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/24/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Stephanie Cardenas</i>	Amount of contribution (\$) <i>25.⁰⁰</i>
Contributor address; City; State; Zip Code <i>3712 8th Ave, Fort Worth, TX 76110</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>4/10/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Pascual Acevedo</i>	Amount of contribution (\$) <i>50.⁰⁰</i>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/11/23</i>	5 Full name of contributor out-of-state PAC (ID#: _____) <i>Accountable Government Fund</i>	7 Amount of contribution (\$) <i>5,000.⁰⁰</i>
6 Contributor address; City; State; Zip Code <i>430 Old Fitzhugh, #7 Dripping Springs, TX 78620</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>4/11/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Kenneth L. Barr</i>	Amount of contribution (\$) <i>150.⁰⁰</i>
Contributor address; City; State; Zip Code <i>3101 Avondale Ave., Fort Worth, TX 76109</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>4/17/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>FW Firefighters Committee for Responsible Gov.</i>	Amount of contribution (\$) <i>5,000.⁰⁰</i>
Contributor address; City; State; Zip Code <i>3855 Tulsa Way, Fort Worth, TX 76107</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>4/19/23</i>	Full name of contributor out-of-state PAC (ID#: _____) <i>Ileana Martinez</i>	Amount of contribution (\$) <i>200.⁰⁰</i>
Contributor address; City; State; Zip Code <i>3920 Townsend Drive, Fort Worth, TX 76110</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Jeanette Martinez</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1,956.00	
5 Date <i>4/13/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charter Schools Now PAC</i>	8 Amount of Contribution \$ <i>1,956.00</i>	9 In-kind contribution description <i>Digital Advertising</i>
7 Contributor address; City; State; Zip Code <i>3005 S Lamar Blvd, Ste. D09 #250, Austin, TX 78704</i>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Jeanette Martinez</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3/31/23</i>	5 Payee name <i>Murphy Nasica</i>	
6 Amount (\$) <i>5,149.72</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Mailer</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date <i>4/13/23</i>	Payee name <i>Murphy Nasica</i>	
Amount (\$) <i>1,000.⁰⁰</i>	Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	Description <i>April</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date <i>4/13/23</i>	Payee name <i>Murphy Nasica</i>	
Amount (\$) <i>986.89</i>	Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Text Campaign</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | 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 <i>Jeanette Martinez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>4/13/23</i>	5 Payee name <i>Murphy Nasica</i>
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6 Amount (\$) <i>484.27</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>Push Cards</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/20/23</i>	Payee name <i>Murphy Nasica</i>
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Amount (\$) <i>6,400.⁰⁰</i>	Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Canvassing</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/20/23</i>	Payee name <i>Murphy Nasica</i>
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Amount (\$) <i>2,317.81</i>	Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Text Campaign</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | 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 <i>Jeanette Martinez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>4/20/23</i>	5 Payee name <i>Murphy Nasica</i>
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6 Amount (\$) <i>398.66</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing Expense</i>	(b) Description <i>Push Card</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/24/23</i>	Payee name <i>Act Blue</i>
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Amount (\$) <i>102.51</i>	Payee address; City; State; Zip Code <i>P.O. Box 441146, Somerville, MA 02144</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Service Fee</i>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME <i>Jeanette Martinez</i>	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 19,153.70
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5 Date <i>4/17/23</i>	6 Payee name <i>Murphy Nasica</i>
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7 Amount (\$) <i>4,850.00</i>	8 Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description <i>Road Signs</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/25/23</i>	Payee name <i>Murphy Nasica</i>
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Amount (\$) <i>14,303.70</i>	Payee address; City; State; Zip Code <i>P.O. Box 1648, Austin, TX 78767</i>
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Mailers</i>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME <i>Jeanette Martinez</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>4/1/23</i>	5 Payee name <i>Daniel Sanchez</i>
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6 Amount (\$) <i>450.00</i> <small>Reimbursement from political contributions intended</small>	7 Payee address; <i>1304 Stone Creek Drive, Mansfield, TX 76063</i> <div style="text-align:right">City; State; Zip Code</div>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description <i>Canvassers</i>
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

9 <small>Complete ONLY if direct expenditure to benefit C/OH</small>	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/15/23</i>	Payee name <i>Daniel Sanchez</i>
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Amount (\$) <i>280.00</i> <small>Reimbursement from political contributions intended</small>	Payee address; <i>1304 Stone Creek Drive, Mansfield, TX 76063</i> <div style="text-align:right">City; State; Zip Code</div>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<small>Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</small>	

<small>Complete ONLY if direct expenditure to benefit C/OH</small>	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$) <small>Reimbursement from political contributions intended</small>	Payee address; <div style="text-align:right">City; State; Zip Code</div>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<small>Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense</small>	

<small>Complete ONLY if direct expenditure to benefit C/OH</small>	Candidate / Officeholder name	Office sought	Office held
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