

OFFICIAL RECORD CITY SECRETARY FT. WORTH, TEX

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

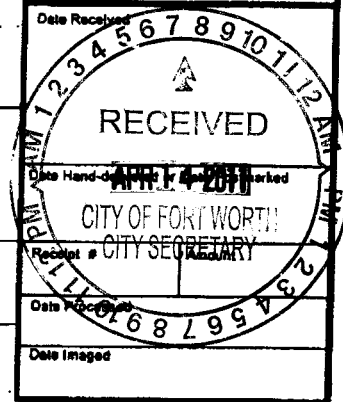
(512) 463-5800

1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filer)	2 Total pages filed: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR.	FIRST JUNGUS	MI F.
	NICKNAME JORDAN	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: 5316 STARRY COURT	APT / SUITE #: FORT WORTH, TEXAS	CITY: STATE: ZIP CODE 76123
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817)	PHONE NUMBER 343-2978	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MRS.	FIRST ELAINE	MI
	NICKNAME PETRUS	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): 3736 COUNTRY CLUB FORT WORTH, TEXAS 76109		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 924-8898	EXTENSION
9 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"/> 6th day before election <input type="checkbox"/> Exceeded \$300 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year 1 / 1 / 2011 THROUGH 4 / 4 / 2011		
11 ELECTION	ELECTION DATE Month Day Year 5 / 14 / 2011		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	12 OFFICE OFFICE HELD (if any) CITY COUNCIL DISTRICT 6, CITY OF FORT WORTH TX	13 OFFICE SOUGHT (if known) CITY COUNCIL DISTRICT 6, CITY OF FORT WORTH TEXAS	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.		
	Name Address / PO Box: Apt. / Suite #: City: State: Zip Code		



GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME JUNGUS JORDAN 16 ACCOUNT # (Ethics Commission Filer)

17 NOTICE FROM POLITICAL COMMITTEE(S)

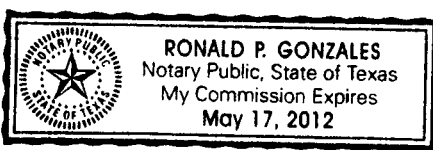
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 28,872. ⁰³
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,038. ⁸⁴
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 25,212. ⁷⁰ / ₁₀₀
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 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.

 Jungus Jordan
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said JUNGUS JORDAN, this the 14th day of APRIL, 20 11, to certify which, witness my hand and seal of office.

Ronald P. Gonzales Ronald P. Gonzales Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 13	
2 FILER NAME JUNGUS JORDAN		3 ACCOUNT # (Ethics Commission Files)	
4 Date 2-17-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (OR) MICHAEL A. COHEN	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4233 ALTA MESA BLVD FORT WORTH, TEXAS 76133-5401		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2-25-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR) ANN and MALCOLM LOUDEN	Amount of contribution (\$) 3,000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 709 ALTA DRIVE FORT WORTH, TEXAS 76107		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) TCU Administrator / WALSH HOLDINGS	
Date 2-25-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR) STACEY L. JANDRUCKO	Amount of contribution (\$) 2,500.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 7000 HOLLOW OAK TRAIL MANSFIELD, TEXAS 76063		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) WALSH HOLDINGS	
Date 2-25-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR) F. HOWARD WALSH, JR.	Amount of contribution (\$) 3,000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 500 W. 7TH, STE 1007 FORT WORTH, TEXAS 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 2-28-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (OR) JAMES D. and CHARLOTTE A. FINLEY	Amount of contribution (\$) 2,000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1308 LAKE STREET FORT WORTH, TEXAS 76102		(If travel outside of Texas, complete Schedule T)	
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.

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Revised 04/21/2010

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2 of 13	
2 FILER NAME JUNGUS JORDAN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-28-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) L. ALLEN HODGES III	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 115 WEST SEVENTH STREET, Suite 1310 FORT WORTH, TEXAS 76102		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3-3-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) ROBERT W. BEARDSLEY	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2403 L. STREET BEDFORD, IN 47421-5031		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-7-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) TREY and TINA HARRIS	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6133 WALLA AVENUE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-11-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) JOHN H. and LINDA MADDUX	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2120 RIDGMAR BLVD., SUITE 14 FORT WORTH, TEXAS 76116-2200		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-11-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) DONALD E. DOYLE	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3724 WILKIE WAY FORT WORTH, TEXAS 76133-2928		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A: 3 of 13	
2 FILER NAME JUNGUS JORDAN			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-12-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) WILSON J. and CAROL LINDSAY	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)	
6 Contributor address: City: State: Zip Code 4345 CARTAGENA FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 3-12-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) DAVID L. and ELIZABETH M. WHITE	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 7313 OLD MILL RUN FORT WORTH, TEXAS 76133-7024		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-14-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) KENNETH L. BARR	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 3101 AVONDALE AVENUE FORT WORTH, TEXAS 76109		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-13-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) WILLIAM B. and PATRICIA J. GORDON	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 5201 WINIFRED FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-13-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) JOHN E. and ARMANDA J LONG	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 3315 BELLAIRE PARK CT. FORT WORTH, TEXAS 76109-2636		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>				

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Revised 10-21-2010

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A
The instruction Guide explains how to complete this form.			1 Total pages Schedule A: 4 of 13	
2 FILER NAME JUNGUS JORDAN			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3.13.11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TIMOTHY L. and ELAINE J. PETRUS	7 Amount of contribution (\$) 1,000.⁰⁰	8 In-kind contribution description (if applicable)	
6 Contributor address: City; State; Zip Code 3736 COUNTRY CLUB CIR. FORT WORTH, TEXAS 76109		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 3.14.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMES R. DUNAWAY	Amount of contribution (\$) 500.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City; State; Zip Code 777 TAYLOR STREET, STE. 1040 FORT WORTH, TEXAS 76102-4910		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.14.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARY W. TERRY	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City; State; Zip Code 117 SHADY LAKE COURT HURST, TEXAS 76054		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.14.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BRAD HANCOCK	Amount of contribution (\$) 200.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City; State; Zip Code 3825 LANSEND ST. FORT WORTH, TEXAS 76109		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.14.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MR. and MRS. JOHN V. ROACH II	Amount of contribution (\$) 250.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City; State; Zip Code 2805 ALTON ROAD FORT WORTH, TEXAS 76109		(If travel outside of Texas, complete Schedule T)		
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.				

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 5 of 13	
2 FILER NAME JUNGUS JORDAN		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 3.14.11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) GARY FICKES	7 Amount of contribution (\$) 200.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4021 HILLTOP DRIVE SOUTH LAKE, TEXAS 76092		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3.14.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) J. Chris and Sally GAVRAS	Amount of contribution (\$) 250.⁰⁰	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2214 FRANKLIN DRIVE ARLINGTON, TEXAS 76011		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3.15.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) GLEN A. and MARGARET M. ESTES	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6909 CHURCH PARK DRIVE FORT WORTH, TEXAS 76133-6854		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3.15.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) CHARLES E. and SUZANNE H. WELLS	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5905 WALRAVEN CIRCLE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3.16.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) RICE TILLEY	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 201 MAIN STREET, STE. 2200 FORT WORTH, TEXAS 76102-3126		(If travel outside of Texas, complete Schedule T)	
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.

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A
The instruction Guide explains how to complete this form.			1 Total pages Schedule A: 6 of 13 13	
2 FILER NAME JUNGUS JORDAN			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3.16.11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) JOHN M. STEVENSON	7 Amount of contribution (\$) 350.⁰⁰	8 In-kind contribution description (if applicable)	
6 Contributor address: City: State: Zip Code 1207 HILLCREST STREET FORT WORTH, TEXAS 76107		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 3.16.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) RAYMOND and ANNEGRET SPEICHER	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 1244 BURMEISTER ROAD FORT WORTH, TEXAS 76134-3705		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.17.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) W. JAMES LYNCH	Amount of contribution (\$) 250.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 4132 DEEP VALLEY DRIVE DALLAS, TEXAS 75244		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.17.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) RANDALL C. GIDEON	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code 3812 MONTICELLO DRIVE FORT WORTH, TEXAS 76107		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3.17.11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) WILLIAM and LUCY C. CONLEY	Amount of contribution (\$) 250.⁰⁰	In-kind contribution description (if applicable)	
Contributor address: City: State: Zip Code P.O. BOX 128 BONDURANT, WY 82922-0128		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>				

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME **JUNGUS JORDAN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **3.18.11** 5 Full name of contributor out-of-state PAC (ID# _____) **PAUL E. ANDREWS, JR.** 7 Amount of contribution (\$) **500.⁰⁰** 8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code
**700 JENKINS ROAD
ALEDO, TEXAS 76008**
(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date **3.18.11** Full name of contributor out-of-state PAC (ID# _____) **R. E. "BOB" BOLEN** Amount of contribution (\$) **200.⁰⁰** In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code
**4213 CANDLEWIND LANE
FORT WORTH, TEXAS**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **3.18.11** Full name of contributor out-of-state PAC (ID# _____) **MARTHA V. LEONARD** Amount of contribution (\$) **250.⁰⁰** In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code
**1411 SHADY OAKS LANE
FORT WORTH, TEXAS 76107**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **3.18.11** Full name of contributor out-of-state PAC (ID# _____) **CHARLES W. and DIANNE R. NIXON** Amount of contribution (\$) **100.⁰⁰** In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code
**104 CRESTWOOD DRIVE
FORT WORTH, TEXAS 76107**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date **3.20.11** Full name of contributor out-of-state PAC (ID# _____) **EDITH JONES** Amount of contribution (\$) **250.⁰⁰** In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code
**4113 WILLOW WAY ROAD
FORT WORTH, TEXAS 76133**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS		SCHEDULE A	
The instruction Guide explains how to complete this form.		1 Total pages Schedule A: 8 of 13	
2 FILER NAME JUNGUS JORDAN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-17-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) VERNELL and DEBRA BROWN STURNS 6 Contributor address; City; State; Zip Code 612 HIGHWOODS TRAIL FORT WORTH, TEXAS 76112	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3-19-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) WAYLON B. and BETTY J. KIRK Contributor address; City; State; Zip Code 3520 WHARTON DRIVE FORT WORTH, TEXAS 76133	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-21-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) WILLIAM W. and PATRICIA F. MEADOWS Contributor address; City; State; Zip Code 3904 HAMILTON AVENUE FORT WORTH, TEXAS 76107	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-20-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LEWIS H. HUFF, JR and TEXANNA HUFF Contributor address; City; State; Zip Code 304 FRANCISCAN DRIVE FORT WORTH, TEXAS 76134	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3-21-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) REED PIGMAN JR. Contributor address; City; State; Zip Code 200 TEXAS WAY FORT WORTH, TEXAS 76106	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

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TX-REG-4.2 (2010)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A
The instruction Guide explains how to complete this form.			1 Total pages Schedule A: 9 of 13	
2 FILER NAME JUNGUS JORDAN		3 ACCOUNT # (Ethics Commission Filers)		
4 Date 3-22-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LINEBARGER, GOGGAN, BLAIR + SAMPSON LLP	7 Amount of contribution (\$) 1,000.⁰⁰	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code P.O. Box 17428 AUSTIN, TEXAS 78760		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions) ATTORNEYS AT LAW		10 Employer (See Instructions)		
Date 3-23-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Col. DISTEN W. and MARY E. SATZ	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4305 MISTY MEADOW DRIVE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-24-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: H. Neil and MARY B. VAN GEEM	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3708 WAYLAND DRIVE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-24-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MR. and MRS. L.O. BRIGHTBILL III	Amount of contribution (\$) 100.⁰⁰	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8908 CREST WOOD DRIVE FORT WORTH, TEXAS 76179		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 3-25-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LEE and S. KATHERINE NICOL	Amount of contribution (\$) 200.⁰⁰	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3882 SOUTH HILLS CIRCLE FORT WORTH, TX 76109		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>				

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A: **10 of 13**

2 FILER NAME **JUNGUS JORDAN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **3-24-11** 5 Full name of contributor out-of-state PAC (ID# _____) **FREESE and NICHOLS PAC**
6 Contributor address: City: State: Zip Code **4055 INTERNATIONAL PLAZA, STE 200
FORT WORTH, TEXAS 76109** 7 Amount of contribution (\$) **250.⁰⁰** 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 **3-28-11** Full name of contributor out-of-state PAC (ID# _____) **CHESAPEAKE ENERGY FOR TEXAS PAC**
Contributor address: City: State: Zip Code **815 BRAZOS ST., STE. A#106
AUSTIN, TEXAS 78701-9996** 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 **3-29-11** Full name of contributor out-of-state PAC (ID# _____) **J. Judith CARRIER**
Contributor address: City: State: Zip Code **3720 WOOTEN DRIVE
FORT WORTH, TEXAS 76133** 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 **3-29-11** Full name of contributor out-of-state PAC (ID# _____) **JAMES W. and Judy J. Schell**
Contributor address: City: State: Zip Code **901 FORT WORTH CLUB BLDG.
FORT WORTH, TEXAS 76102** 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 **3-29-11** Full name of contributor out-of-state PAC (ID# _____) **JAN E. FERSING**
Contributor address: City: State: Zip Code **3800 TRALWOOD LANE
FORT WORTH, TEXAS 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)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A: **11 of 13**

2 FILER NAME **JUNGUS JORDAN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **3-29-11** 5 Full name of contributor out-of-state PAC (OR) **CLAUDE DUFFEY and CLAIRE BROWN**
6 Contributor address; City; State; Zip Code **6149 WALLA AVENUE
FORT WORTH, TEXAS 76133** 7 Amount of contribution (\$) **100.00** 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 **3-29-11** Full name of contributor out-of-state PAC (OR) **LEE O. ROGERS**
Contributor address; City; State; Zip Code **201 PECAN STREET
FORT WORTH, TEXAS 76102** 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 **3-30-11** Full name of contributor out-of-state PAC (OR) **EDWARD P. BASS**
Contributor address; City; State; Zip Code **201 MAIN STREET, SUITE 2700
FORT WORTH, TEXAS 76102** Amount of contribution (\$) **1,500.00** In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) Employer (See instructions)

Date **3-30-11** Full name of contributor out-of-state PAC (OR) **WILL A. COURTNEY**
Contributor address; City; State; Zip Code **P.O. BOX 121488
FORT WORTH, TEXAS 76121** 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 **3-31-11** Full name of contributor out-of-state PAC (OR) **MICHAEL HAGIN**
Contributor address; City; State; Zip Code **6136 WALRAVEN CIRCLE
FORT WORTH, TEXAS 76133** 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)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME **JUNGUS JORDAN** 3 ACCOUNT # (Ethics Commission Filer)

4 Date 3-31-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) ELIZABETH MENEFFEE	7 Amount of contribution (\$) 50.⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4005 TOLEDO AVENUE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date 3-31-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) TIMOTHY FLEET	Amount of contribution (\$) 3,000.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3045 LACKLAND ROAD FORT WORTH, TEXAS 76116		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 3-31-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) CH2 M HILL PAC	Amount of contribution (\$) 250.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12377 MERRITT DRIVE 10th FLR DALLAS, TEXAS 75251-2224		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4-1-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) WINSTON and DIXIE SEAMAN	Amount of contribution (\$) 75.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7320 LEMONWOOD LANE FORT WORTH, TEXAS 76133		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4-1-11	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) MR. and MRS. ROBERT D. BROWN	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 328 CHATEAU DRIVE FORT WORTH, TEXAS 76134		(If travel outside of Texas, complete Schedule T)	

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.

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME **JUNGUS JORDAN** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **4-2-11** 5 Full name of contributor out-of-state PAC (ID#) **JAMES N. AUSTIN, JR.**
6 Contributor address; City; State; Zip Code **2017 TEAKWOOD TERRACE
FORT WORTH, TEXAS 76112** 7 Amount of contribution (\$) **50.⁰⁰** 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 **4-2-11** Full name of contributor out-of-state PAC (ID#) **MARILYN and MICHAEL BERRY**
Contributor address; City; State; Zip Code **6217 GENOA ROAD
FORT WORTH, TEXAS 76116** 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 **4-4-11** Full name of contributor out-of-state PAC (ID#) **FORT WORTH RETIRED FIREFIGHTER'S and WOODS**
Contributor address; City; State; Zip Code **COMMITTEE FOR RESPONSIBLE GOVERNMENT
1617 TIERNEY ROAD
FORT WORTH, TEXAS 76112** 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 **4-1-11** Full name of contributor out-of-state PAC (ID#) **FORT WORTH FIREFIGHTER'S COMMITTEE**
Contributor address; City; State; Zip Code **FOR RESPONSIBLE GOVERNMENT
3855 TULSA WAY
FORT WORTH, TEXAS 76107** Amount of contribution (\$) **397.⁰³** In-kind contribution description (if applicable) **LABOR**
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) Employer (See instructions)

Date Full name of contributor out-of-state PAC (ID#)
Contributor address; City; State; Zip Code
(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions) Employer (See instructions)

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES		SCHEDULE F
EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense
Consulting Expense	Food/Beverage Expense	Travel In District
Event Expense	Polling Expense	Travel Out Of District
Fees	Printing Expense	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.		
1 Total pages Schedule F: 1 of 2	2 FILER NAME JUNGUS JORDAN	3 ACCOUNT # (Ethics Commission Filers)
4 Date JAN, 19, 2011	5 Payee name DALE FISSELER RETIREMENT CELEBRATION	
6 Amount (\$) 50.00	7 Payee address: City: State; Zip Code 1000 THROCKMORTON FORT WORTH, TEXAS 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) GIFT/AWARD/MEMORIAL EXPENSE	(b) Description (if travel outside of Texas, complete Schedule T) DALE FISSELER RETIREMENT AWARDS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date FEB 14, 2011	Payee name CITY OF FORT WORTH (CASH) CITY SECRETARY	
Amount (\$) 100.00	Payee address: City: State; Zip Code 1000 THROCKMORTON FORT WORTH, TEXAS 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FEES	Description (if travel outside of Texas, complete Schedule T) FILING FEE FOR PLACE ON BALLOT
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date MAR 1, 2011	Payee name THE ELECTION GROUP, LLC	
Amount (\$) 7,500.00	Payee address: City: State; Zip Code 408 WEST 14TH STREET AUSTIN, TEXAS 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) CONSULTING EXPENSE	Description (if travel outside of Texas, complete Schedule T) PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date MAR 1, 2011	Payee name JAMIE PHILLIPS	
Amount (\$) 45.71	Payee address: City: State; Zip Code 1000 THROCKMORTON FORT WORTH, TEXAS 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) FOOD BEVERAGE EXPENSE	Description (if travel outside of Texas, complete Schedule T) Reimbursement for REPAIRMENTS ADVISORY MEETING
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 FOR BOX 8(a)

- Advertising Expense, Accounting/Banking, Consulting Expense, Event Expense, Fees, Gift/Awards/Memorials 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.

1 Total pages Schedule F: 2 of 2 2 FILER NAME JUNGUS JORDAN 3 ACCOUNT # (Ethics Commission Filers)

4 Date 3-21-11 5 Payee name THE BREAKFAST CLUB OF FORT WORTH

6 Amount (\$) 97.00 7 Payee address: City: State: Zip Code 333 THROCKMORTON ST. #808 FORT WORTH, TEXAS 76102

8 PURPOSE OF EXPENDITURE (a) Category: OTHER (b) Description: MEMBERSHIP DUES QUARTERLY

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

Date 3-30-11 Payee name THE ELECTION GROUP, LLC.

Amount (\$) 1,246.13 XX Payee address: City: State: Zip Code 408 WEST 14TH STREET AUSTIN, TEXAS 78701

PURPOSE OF EXPENDITURE Category: PRINTING EXPENSE Description: FUNDRAISING LETTER / POSTAGE

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

Date Payee name

Amount (\$) Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE Category: Description:

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

Date Payee name

Amount (\$) Payee address: City: State: Zip Code

PURPOSE OF EXPENDITURE Category: Description:

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

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