

# 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 Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Mrs.	Maria	Del Pilar
	NICKNAME	LAST	SUFFIX
	Candia		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY, STATE, ZIP CODE
	<input type="checkbox"/> change of address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Felipe	
	NICKNAME	LAST	SUFFIX
	Gutierrez		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY, STATE, ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		<input type="checkbox"/> Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day	Year
	01	15	2014
	THROUGH	Month	Day
		06	30
		Year	2014
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month	Day	Year
	11	04	14
	<input checked="" type="checkbox"/> Primary		<input type="checkbox"/> Runoff
	<input type="checkbox"/> General		<input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	N/A	Justice of the peace	

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

FILED  
2014 JUL 15 PM 1:20  
ELECTIONS ADMINISTRATION

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH  
COVER SHEET PG 2**

<b>14 C/OH NAME</b>	<b>15 ACCOUNT #</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	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  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS	FILED TARRANT COUNTY 2014 JUL 15 PM 4:20 STATE ELECTIONS ADMINISTRATOR

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1330.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14010.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 2536.43
	4. TOTAL POLITICAL EXPENDITURES	\$ 12580.11
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10195.47
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ NA

**18 AFFIDAVIT**

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



  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Maria Del Pilar, this the 15th day of July, 20 14, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath

Olliephine Anderson  
 \_\_\_\_\_  
 Printed name of officer administering oath

Notary  
 \_\_\_\_\_  
 Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 10 1 of 10	
2 FILER NAME Pilar Candia		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/03/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randy Daniels	7 Amount of contribution (\$) 20.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 4630 Collinwood Ave, Ft. Worth Tx 76107		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Self	
Date 4/24/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Ramirez	Amount of contribution (\$) 5.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3051 Schadt st, Ft Worth Tx 76106		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 5/5/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Ramirez	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3051 Schadt St, Ft. Worth Tx 76106		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 5/10/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert H. Schmidt	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1004 Cerro Azul Drive, El Paso Tx 79902		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 5/10/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Alameel	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5020 Tanbark, Dallas Tx 75229		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	

FILED  
 TARRANT COUNTY  
 2014 JUL 15 PM 1:18  
 STATE ELECTIONS DIVISION

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

# 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 10	
2 FILER NAME Pilar Candia		3 ACCOUNT # (Ethics Commission Filers)		
4 Date 5/12/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tina Maness 6 Contributor address; City; State; Zip Code 615 N. E Mcalister Burleson Tx 76028	7 Amount of contribution (\$) 60.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions) Administrative		10 Employer (See Instructions) Tx Health Hugley		
Date 5/12/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Williams Contributor address; City; State; Zip Code 8105 Mount Shasta Circle Ft Worth Tx 76137	Amount of contribution (\$) 250.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)		
Date 5/12/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Hernandez Contributor address; City; State; Zip Code 2009 N. Houston Fort Worth Tx 76164	Amount of contribution (\$) 100.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Johnson's Press		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clair Wood Contributor address; City; State; Zip Code 3428 Wharton Dr Fort Worth Tx 76133	Amount of contribution (\$) 35.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Humana		
Date 5/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armando Robles Contributor address; City; State; Zip Code 3733 South Grove Fort Worth Tx 76110	Amount of contribution (\$) 60.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Arles Company		

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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: 3 of 10	
2 FILER NAME Pilar Candia			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/15/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Cozad 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) 5.00	8 In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guillermo Escobedo Contributor address; City; State; Zip Code 3841 Childress Fort Worth Tx 76119	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorena Flores Contributor address; City; State; Zip Code 5350 Fossil Creek Blvd #1111 Ft. Worth Tx 76137	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Stay at home		Employer (See Instructions) NA		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jose Lopez Contributor address; City; State; Zip Code 365 E Pecan 173 V Hurst Tx 76053	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) NA		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eliana Martinez Contributor address; City; State; Zip Code 365 E Pecan 173 V Hurst Tx 76053	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)	
		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) NA		

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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 10

2 FILER NAME  
Pilar Candia

3 ACCOUNT # (Ethics Commission Filers)

4 Date  
5/15/14

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Felipe Gutierrez  
6 Contributor address; City; State; Zip Code  
402 Pennsylvania Kennedale Tx 76060

7 Amount of contribution (\$)  
50.00  
PY:  
(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)  
Tech

10 Employer (See Instructions)  
ATT

Date  
5/15/14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Mike Martinez  
Contributor address; City; State; Zip Code  
PO Box 100523 Fort Worth Tx 76185

Amount of contribution (\$)  
150.00  
(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)  
Gas/Oil

Employer (See Instructions)

Self Employed

Date  
5/15/14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Francisco Velazquez  
Contributor address; City; State; Zip Code  
365 Pimlico Way Saginaw Tx 76179

Amount of contribution (\$)  
10.00  
(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)  
Home Decoration

Employer (See Instructions)

Self employed

Date  
5/15/14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Juan Daniel  
Contributor address; City; State; Zip Code  
2102 Russ Ave Fort Worth Tx 76164

Amount of contribution (\$)  
20.00  
(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)  
Un-employed

Employer (See Instructions)  
NA

Date  
5/15/14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sandra Garcia  
Contributor address; City; State; Zip Code  
6200 Pershing Ave #119 Ft Worth Tx 76116

Amount of contribution (\$)  
25.00  
(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)  
Management Analysis

Employer (See Instructions)  
City of Fort Worth

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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: 5 of 10

2 FILER NAME

Pilar Candia

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/15/14

5 Full name of contributor

Ken Stanford

6 Contributor address; City; State; Zip Code

908 Overhill Bedford Tx 76022

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

10.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

CPA

10 Employer (See Instructions)

Holmes and Petrick

Date

5/15/14

Full name of contributor

Salvador Espino

Contributor address; City; State; Zip Code

1205 N. Main Street Fort Worth Tx 76164

out-of-state PAC (ID# \_\_\_\_\_)

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)

Attorney

Employer (See Instructions)

Self Employed

Date

5/15/14

Full name of contributor

Omar Robles

Contributor address; City; State; Zip Code

3733 S. Grove Fort Worth Tx 76111

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

10.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Student

Employer (See Instructions)

NA

Date

5/15/14

Full name of contributor

David Flores

Contributor address; City; State; Zip Code

6524 Ellis Rd Fort Worth Tx 76112

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Tech

Employer (See Instructions)

Aviation Alliance

Date

5/15/14

Full name of contributor

Maria Juarez

Contributor address; City; State; Zip Code

3552 Pecos Fort Worth Tx 76119

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Cook

Employer (See Instructions)

TCU

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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 10	
2 FILER NAME Pilar Candia			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/15/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Cambell	7 Amount of contribution (\$) 125.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 5932 Village Course Circle #925 Ft Worth Tx 76119		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions) Constable		10 Employer (See Instructions) Tarrant County		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DH Willis	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2300 Primrose Fort Worth Tx 76111		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Emad Salem	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8060 Park Hill Dr Euless Tx 76040		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Century 21		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sylvana Alonzo	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 528 Joel Dr Dallas Tx 75224		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jorge Rojas	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1413 Park Place #315 Fort Worth Tx 76110		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed		

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 7 of 10	
2 FILER NAME <b>Pilar Candia</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>5/15/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Judy Tesar</b> 6 Contributor address; City; State; Zip Code <b>3509 Mission Fort Worth Tx 76109</b>	7 Amount of contribution (\$) <b>5.00</b>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <b>Clerical</b>		10 Employer (See Instructions) <b>Hugley Health</b>	
5/15/14	Nathan Angiano Contributor address; City; State; Zip Code 4112 Periwinkle Fort Worth Tx 76137	10.00	
Office Assistant		Seasons of Change	
5/15/14	Caroline Dule Contributor address; City; State; Zip Code 1217 Clover In Fort Worth Tx 76107	100.00	
Retired		NA	
5/15/14	Steve Murrin Contributor address; City; State; Zip Code 1217 Clover In Fort Worth Tx 76107	300.00	
Retired		Retired	
5/15/14	Francis Macarthy Contributor address; City; State; Zip Code 1208 W. Magnolia Fort Worth Tx 76104	250.00	
Self Employed		Self	

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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 10	
2 FILER NAME Pilar Candia			3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/15/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Garcia	7 Amount of contribution (\$) 20.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 5350 Fossil Creek Blvd # 215 Ft Worth Tx 76137		(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions) Self Employed		10 Employer (See Instructions) Self Employed		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maria Guereque	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2413 Presidential drive Cleburne Tx 76111		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Taxes		Employer (See Instructions) Self Employed		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Zamora	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 805 Buffalo Ct Crowley Tx 76036		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self Employed		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alex Morales	Amount of contribution (\$) 20.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2617 Goldenrod ave Fort Worth Tx 76111		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self Employed		
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jim Austin	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2017 Teakwood Fort Worth Tx 76112		(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed		

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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 10	
2 FILER NAME <b>Pilar Candia</b>			3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>5/15/14</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jimmy Prattini</b> 6 Contributor address; City; State; Zip Code <b>265 Pimlico Way Saginaw Tx 76179</b>	7 Amount of contribution (\$) <b>5.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions) <b>Service Tech</b>		10 Employer (See Instructions) <b>City of Arlington</b>		
Date <b>5/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Beatriz Espinoza</b> Contributor address; City; State; Zip Code <b>2015 Lincoln Ave Fort Worth Tx 76164</b>	Amount of contribution (\$) <b>40.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <b>Para Legal</b>		Employer (See Instructions) <b>Reyes Law Firm</b>		
Date <b>5/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Olga Naranjo</b> Contributor address; City; State; Zip Code <b>500 Goldstone In Fort Worth Tx 76134</b>	Amount of contribution (\$) <b>100.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <b>Tax service</b>		Employer (See Instructions) <b>Self Employed</b>		
Date <b>5/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Travis Palmner</b> Contributor address; City; State; Zip Code <b>P. O Box 11517 Fort Worth Tx 76164</b>	Amount of contribution (\$) <b>40.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <b>Political Consultant</b>		Employer (See Instructions) <b>Self Employed</b>		
Date <b>5/15/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Deborah Peoples</b> Contributor address; City; State; Zip Code <b>4209 Normandy Dallas Tx 75205</b>	Amount of contribution (\$) <b>50.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) <b>Democratic Party Chair</b>		Employer (See Instructions) <b>TCDP</b>		

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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 10

2 FILER NAME  
Pilar Candia

3 ACCOUNT # (Ethics Commission Filers)

4 Date  
5/15/14

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Larry Anflin  
6 Contributor address; City; State; Zip Code  
7020 Castle Creek Ct Fort Worth Tx 76132

7 Amount of contribution (\$)  
200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Director

10 Employer (See Instructions)  
Coors Distributing

Date  
6/13/14

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Alameel Holdings  
Contributor address; City; State; Zip Code  
5310 Harvest Hill Ste 200 Dallas Tx 75230

Amount of contribution (\$)  
10000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Retired

Employer (See Instructions) Retired

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(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

Amount of contribution (\$)

In-kind contribution description (if applicable)

(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

Amount of contribution (\$)

In-kind contribution description (if applicable)

(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.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: *2*

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(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.**

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

NA

The Instruction Guide explains how to complete this form. **1** Total pages Schedule B:

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

**4** TOTAL OF UNITEMIZED PLEDGES:      \$

<b>5</b> Date	<b>6</b> Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	<b>8</b> Amount of pledge (\$)	<b>9</b> In-kind description (if applicable)
<b>7</b> Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

**10** Principal occupation / Job title (See Instructions) **11** Employer (See Instructions)

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of pledge (\$)	In-kind description (if applicable)
Pledgor address; City; State; Zip Code		(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.

ELECTORAL ADMINISTRATION  
2014 JUL 15  
14:21  
TARRANT COUNTY  
FILED

# LOANS

# SCHEDULE E

*NA*

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨

\$

5 Date of loan

7 Name of lender

out-of-state PAC (ID# \_\_\_\_\_)

9 Loan Amount (\$)

6 Is lender a financial institution?  
  
Y    N

8 Lender address;    City;    State;    Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address;    City;    State;    Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

out-of-state PAC (ID# \_\_\_\_\_)

Loan Amount (\$)

Is lender a financial institution?  
  
Y    N

Lender address;    City;    State;    Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address;    City;    State;    Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.**

FILED  
TARRANT COUNTY  
2014 JUL 15 PM 4:22  
CLERK OF COUNTY CLERK  
STATE OF TEXAS  
ELECTIONS ADMINISTRATION

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 2	<b>2</b> FILER NAME Please see attached sheets	<b>3</b> ACCOUNT # (Ethics Commission Filers)
---------------------------------------	---------------------------------------------------	-----------------------------------------------

<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code
----------------------	-----------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T)
---------------------------------	-------------------------------------------------------------------------	--------------------------------------------------------------------------

<b>9</b> 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
-------------	--------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
-------------------------------	--------------------------------------------------------------	---------------------------------------------------------------

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
-------------	--------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
-------------------------------	--------------------------------------------------------------	---------------------------------------------------------------

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
-------------	--------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
-------------------------------	--------------------------------------------------------------	---------------------------------------------------------------

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Date	Description	Address	City	State	Zip	Amount	Debit	Credit	Category	Description
6/30/14	Taco Bell	1702 N Crockrell Hill Rc	Dallas	TX	75212	-20			Food/Beverage	Meeting
6/30/14	ATM Withdrawal	2727 N Stemmons Fwy	Dallas	TX	75207	-62.5			Other	Parking fee
6/26/14	Racetrack	620 E. Berry	Fort Worth	TX	76110	-83.23			Transportation	Fuel
6/26/14	Joseph Rios	1818 Roberts Cutt off	Fort Worth	TX	76164	-1000			1081 Advertisement	Media
6/26/14	Stone Wall Democrats	P.O Box 11956	Fort Worth	TX	76110	-250			Contribution	Fundraiser
6/25/14	Michael Valdez	1103 Park St	Fort Worth	TX	76164	-1250			1082 Contract Labor	Campaign Manager
6/23/14	Quick Trip	109 E. North side Dr	Fort Worth	TX	76164	-76.61			Transportation	Fuel
6/19/14	Tarrant County Dem. Wome	PO Box 471181	Fort Worth	TX	76114	-50			999 Contribution	Donation
6/17/14	Southwest Bank Fee	2200 W 7th St	Fort Worth	TX	76107	-15			Other	Bank fee
6/16/14	Nancy Bean	2706 Meadow Hill lane	Arlington	Tx	76006	-50			1028 Contribution	Donation
6/13/14	Shell	12400 S Freeway	Fort Worth	TX	76028	-72.95			Transportation	Fuel
6/12/14	Michael Valdez	1103 Park St	Fort Worth	TX	76164	-1250			1029 Other	Contract Labor
6/12/14	Little Cesars	3869 Maurice Ave	Fort Worth	TX	76111	-38.63			Food/Beverage	Meeting
6/11/14	Tommys Hamburgers	2455 Forest Park	Fort Worth	TX	76110	-32.04			Food/Beverage	Meeting
6/6/14	Fuzzys Taco	2719 Race St	Fort Worth	TX	76111	-28.37			Food/Beverage	Meeting
6/4/14	Tarrant County Elections	2700 Premier st	Fort Worth	TX	76111	-50			1018 Office Overhead	Maps
6/2/14	All Saints CIA	214 NW 20th	Fort Worth	TX	76164	-100			1027 Contribution	Donation
5/30/14	Quick Trip	109 E. North side Dr	Fort Worth	TX	76161	-74			Transportation	Fuel
5/30/14	Los Pastores	3812 E. Rosedale	Fort Worth	TX	76105	-37.89			Food/Beverage	Meeting
5/29/14	Artspace 111	111 Hampton St	Fort Worth	TX	76102	-700			1014 Other	Venue Deposit
5/29/14	Walgreens	3809 E Belknap	Fort Worth	TX	76111	-19.6			Other	Postage Stamps
5/28/14	Verenice Bustillos	9000 Beacon Ct	Fort Worth	TX	76140	-135			1026 Food/Bev	Cake
5/23/14	Pilar Candia	PO Box 7472	Fort Worth	TX	76111	-527.4			1025 Reimbursement	Food
5/23/14	Rosa Sanchez	201 Russell st	Fort Worth	TX	76108	-40			1023 Other	Bartender
5/21/14	Staples	1660 S. University	Fort Worth	TX	76107	-34.15			1021 Other	Office Supplies
5/20/14	Mediation Dynamics	4424 Longmeadow Wa	Fort Worth	TX	76133	-800			1015 Other	Training
5/19/14	Anna Lopez	201 Russell st	Fort Worth	TX	76108	-40			1024 Other	Bartender
5/19/14	Harold Huertas	3740 Wyattte Eard Rd	Roanok	TX	76262	-250			1022 Other	Party DJ
5/19/14	Taylor's Rental	220 University Drive	Fort Worth	TX	76107	-64.95			1020 Other	Equipment Rental
5/19/14	Michael Valdez	1103 Park St	Fort Worth	TX	76164	-1250			1019 Contract Labor	Cam'
5/19/14	Quick Trip	2321 N. Beach St	Haltom City	TX	76111	-84.85			Transportation	Fuel
5/16/14	O's Spirits	2705 N. 28th St	Fort Worth	TX	76111	-19			Food/Beverage	Kick of party
5/15/14	Quick Trip	109 E. North side Dr	Fort Worth	TX	76164	-40			Transportation	Fuel

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TARRANT COUNTY  
ELECTIONS ADMINISTRATION

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TARRANT COUNTY

5/13/14	Fernando Raga	609 Kentucky Derby In	Fort Worth TX	76179	-300	1016	Food/Bev	Catering
5/12/14	Party City	435 Sherry Lane	Fort Worth TX	76114	-55.13		Other	Fund Raiser Exp
5/12/14	Dominos	3810 E. Belknap	Fort Worth TX	76111	-25.47		Food/Bev	Meeting
5/8/14	Godaddy.com	14455 N Hayden rd	Scottsdale AZ	85260	-119.88		Advertisement	Web Page
5/7/14	Quick Trip	109 E. North side Dr	Fort Worth TX	76111	-70.48		Transportation	Fuel
5/6/14	Vista Print	95 Hayden ave	Lexington Ma		-63.39		Advertisement	Business Cards
5/2/14	Sign11	2730 N Berkeley	Duluth GA	30096	-65.3		Advertisement	Signs
4/29/14	Walgreens	3809 E Belknap	Fort Worth TX	76111	-39.2		Office Supplies	Postage Stamps
4/28/14	Staples	1660 S. University	Fort Worth TX	76107	-148.35		Advertisement	Invitations
4/25/14	DRI Printing Services	290 7th St	San Francisco Ca	94103	-76.43		Advertisement	
4/24/14	Tarrant County Dem. Wome	PO Box 471181	Fort Worth TX	76147	-100	1012	Contribution	Fundraiser
4/24/14	Imprint.com	14550 Beechnut	Houston TX	77083	-158.61		Advertisement	Wrist Bands
4/23/14	Church's Chicken	300 NE 28th St	Haltom City TX	76111	-34.08		Food/Bev	Team Meeting
4/22/14	Kwik Mart	2525 E Belknap	Fort Worth TX	76111	-75.03		Transportation	Fuel
4/17/14	Michael Valdez	1103 Park St	Fort Worth TX	76164	-1250	1011	Contract Labor	Campaign Manager
4/17/14	80seven08 Design	9350 Skillman Street	Dallas Tx	75243	-100		Advertisement	Graphic Design
4/14/14	Frys Electronics	102 Interstate 20	Arlington TX	76018	-154.44		Office Supplies	Computer Equipment
4/11/14	Tarrant County Dem. Party	2806 Race St	Fort Worth Tx	76111	-20	1010	Contribution	Donation
4/7/14	Pablo Trejo	5220 Meadowland	Fort Worth	76123	-100	1009	Contribution	Donation
4/7/14	THRE	612 E Lamar Suite 300	Arlington Tx	76011	-50	1008	Contribution	Donation
4/7/14	80seven08 Design	9350 Skillman Street	Dallas Tx	75243	-100		Advertisement	
4/7/14	Mark Greene For Congress	1901 Windsor Place	Fort Worth TX	76110	-56		Contribution	Donation
2/26/14	Rally Pyrix	144 2nd Street	San Francisco CA	94105	-20		Contribution	Donation
2/25/14	Godaddy.com	14455 N Hayden rd	Scottsdale AZ	85260	-17.54		Advertisement	Web Page Registration
2/25/14	Godaddy.com	14455 N Hayden rd	Scottsdale AZ	8526	-13.17		Advertisement	Email
2/14/14	Quick Trip	2321 N. Beach St	Haltom City TX	76111	-79.01		Transportation	Fuel
2/13/14	El Taco Mexican	3155 Denton Hwy	Haltom City TX	76117	-59.9		Food/Bev	Team Meeting
2/11/14	Tarrant County Dem. Party	2806 Race St	Fort Worth TX	76111	-10	1004	Contribution	Donation
2/6/14	Tarrant County Dem. Party	2806 Race St	Fort Worth TX	76111	-500	1006	Contribution	Donation
2/6/14	Mid Cities Dem. Party	PO Box 271	Bedford Tx	76095	-20	1005	Contribution	Donation
1/24/14	Catfish and Co.	900 W. Airport Fwy	Fort Worth TX	76054	-42.13		Food/Beverage	Speaking engagement
1/23/14	Enchiladas Ole	901 N Sylvania	Fort Worth TX	76111	-60.4		Food/Beverage	Team Meeting
1/22/14	Celia Israel	PO Box 141246	Austin Tx	78714	-50	1003	Contribution	Donation

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