CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Texas Ethics Commission

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	DE explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers) 00000001	2 PAGE# 1 of 60			
3 CANDIDATE /	MS / MRS / MR FIRST	МІ	OFFICE USE ONLY			
OFFICEHOLDER NAME	Mr. J. D.		Date Received			
	NICKNAME LAST	SUFFIX				
	Johnson		B E 2			
	ADDRESS (DO DOV. ADT (OUITE #	OTAL STATE TO CODE	TARRA ZOUL JUL			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE				
MAILING			A 00 %			
ADDRESS			Date Nand-delivered or Date Postmarked			
Change of Address			2 2 E			
			73 Table 111			
			Receipt #			
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST	МІ	Date Processed			
NAME	Mr. Darrell		Date Imaged			
	NICKNAME LAST	SUFFIX				
	Johnson					
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; STATE;	ZIP CODE			
ADDRESS (Residence or business)						
(Residence of business)						
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION				
8 REPORT TYPE	January 15 30th day bef	fore election Runoff	15th day after campaign treasurer appointment (officeholder only)			
		C Sundador Contrat	Final count (Affect C/OU FR)			
	X July 15 Sth day befo	pre election Exceeded \$500 limit	Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year	Month Day	Year			
		THROUGH				
	01/01/2014	06/30/20	14			
10 ELECTION	ELECTION DATE ELEC	CTION TYPE				
	Month Day Year	Primary Runoff	General Special			
			-			
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)				
	County Commissioner Pct 4 District 4	County Commission District 4	er Pct 4			
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

SOFF CRI &	IOIALS	·	Cove	ER SHEET PG Z
13 C/OH NAME Johns	son, J. D. (Mr.)		14 ACCOUNT 00000001	
15 NOTICE FROM	I have been made with	otice of political expenditures by political committees to support the calculut the candidate's or officeholder's knowledge or consent. Candidately receive notice of such expenditures	indidate / officehold es and officeholder	er. These expenditures may s are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL GENERAL	COMMITTEE ADDRESS		TARR 2014 JUL STE
☐ additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	3,930.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	105,409.00
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	2,918.35
	4. TOTAL	POLITICAL EXPENDITURES	\$	32,401.73
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	396,395.98
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
17 AFFIDAVIT	ALICE MO	I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Code	all information re	
	NOTARY PL STATE OF T My Comm. Exp. 08	JBLIC EXAS -14-2017	Blug andidate or Office	eholder
Sworn to and subscrib	111	TDY TOWNSON	, this the	_ <i></i>
Signature of officer admi	MOORE	Print name of officer administering path	1/07	ACU

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE#			
				Schedule: 1/4	11 Report: 3/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)		
_				00000001			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Alliston, Ruby	<u>:</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	.						
	05/22/2014	6 Contributor address; City; State; Zip Code		\$200.00	ARR		
		3150 Tinsley Lane Fort Worth, TX 76179					
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
					######################################		
	Date	Full name of contributor ☐ out-of-state PAC (ID#	!	Amount of	In-kind contribution		
		Anderson, Ralph		contribution (\$)	description (If applicable)		
	05/24/2014	Contributor address; City; State; Zip Code		\$200.00	ļr		
	00/2-1/2014	4100 Coachman Lane Colleyville, TX 76034		\$255.55	! !		
		Concyvine, 177, 1880-1					
	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	· · · · · · · · · · · · · · · · · · ·	,	p.oyo. (coo	,			
_	Date	Full name of contributor ☐ out-of-state PAC (ID#	!)	Amount of	In-kind contribution		
		Augustus, Aubrie		contribution (\$)	description (if applicable)		
	00/00/0044	0			I		
	06/09/2014	Contributor address; City; State; Zip Code 3761 Red Oak Court		\$100.00	1		
		New Orleans, LA 70131			I		
_					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ☐ out-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution		
		Austin, Cody		contribution (\$)	description (if applicable) Campaign Fundraiser		
	06/00/0044	Contributor address: Cibu State: 7in Code		#05.00	Auction Item; Birdhouse		
	06/02/2014	Contributor address; City; State; Zip Code Post Office Box 161724		\$65.00	and Barn Wood Frame Picture		
		Fort Worth, TX 76161			ĺ		
					Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution		
		Austin, Robert Jr.		contribution (\$)	description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code		\$1,000.00	1		
	30,00,2017	103 Parker Ridge Road Palmer, TX 75152		\$1,000.00	i		
					_		
	Principal accura	sation / Joh title (See Instructions)	Employer (Cas I		Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	istructions)			

⊨							
_	The Instruction	N Guide explains how to complete this form.		1 PAGE# 50 Schedule 2/4	41 Report: 4/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission flers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Baker, Gary)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/05/2014	6 Contributor address; City; State; Zip Code 8200 Boat Club Road Fort Worth, TX 76179		\$300.00	WITY O		
_	Deinainal assum	office / Joh Kills (Oct Instructions)			Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Baker, Hub)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/21/2014	Contributor address; City; State; Zip Code 121 East Exchange Avenue Fort Worth, TX 76164		\$600.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
		•					
-	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of	In-kind contribution		
	Dute	Baker, Hub		contribution (\$)	description (if applicable)		
					Campaign Fundraiser		
	05/29/2014	Contributor address; City; State; Zip Code		\$60.00	Auction Item; Rodeo Tickets		
	00/20/2011	121 East Exchange Avenue					
		Fort Worth, TX 76164					
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
_	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of	In-kind contribution		
		Banks, Nita and Landon		contribution (\$)	description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code		\$650.00	[
		8624 Waterfront Court Fort Worth, TX 76179					
					· Tourne commission Balandrik Til []		
_	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
			Zimpioyot (acci iii				
	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of	In-kind contribution		
		Barnes, Bradford		contribution (\$)	description (if applicable)		
	05/22/2014	Contributor address; City; State; Zip Code		\$1,000,00	l		
	05/22/2014	4450 Harley Streer		\$1,000.00	l		
		Fort Worth, TX 76107			l		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
ı							

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 3/4	41 Report: 5/60			
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID# Barrett, Stephen	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	05/29/2014	6 Contributor address; City; State; Zip Code 9305 Dosier Cove West Fort Worth, TX 76179		\$100.00	CTIS COMPlete Schedule T			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Barton, Mike)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundament			
	05/29/2014	Contributor address; City; State; Zip Code 9500 Live Oak Lane Fort Worth, TX 76179		\$200.00	Auction Item; Gift Certificates			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Bass, Edward	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser			
	04/30/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 2700 Fort Worth, TX 76102		\$3,000.00	Auction Item; Sports Tickets			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID) Bass, Edward	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/17/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 2700 Fort Worth, TX 76102		\$1,000.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/19/2014	Contributor address; City; State; Zip Code 100 East Weatherford #303 Fort Worth, TX 76196		\$50.00	 			
L				<u> </u>	f Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	nstructions)				

⊢-					
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/4	11 Report: 6/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beavers, Charles		7 Amount of < contribution (\$)	In-kin@contribution coescription (if applicable)
	05/23/2014	6 Contributor address; City; State; Zip Code 4604 East Lancaster Avenue Fort Worth, TX 76103		\$100.00	Texas, complete Schedule T)
•	Dringing again	ation / Joh title (Con Instructions)	40 Franksias (Osa In		and of the same
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/05/2014	Contributor address; City; State; Zip Code 5705 Azteca Drive Fort Worth, TX 76112		\$200.00	i I I
1				(If travel outside of	Texas, complete Schedule T)
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See In		,
_	1 morpar occup			structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/05/2014	Contributor address; City; State; Zip Code 6217 Genoa Road Fort Worth, TX 76116		\$200.00	1
١				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Beshara, Lance)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/08/2014	Contributor address; City; State; Zip Code 6301 Paper Shell Way Fort Worth, TX 76179		\$1,050.00	1
1				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	estructions)	
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundrasier Auction Item; Gift
	06/09/2014	Contributor address; City; State; Zip Code 6301 Paper Shell Way Fort Worth, TX 76179		\$1,500.00	Certificates
				(If tunned as table -	Toyon complete Schoolile To
\vdash	Dringing com	action / Joh titla (See Instructions)	Complement (Oct.)		f Texas, complete Schedule T)
	Principal occuj	pation / Job title (See Instructions)	Employer (See Ir	ISTRUCTIONS)	

	OTTIER	THAN FLEDGES OR LOAI	43		
	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 5/4	11 Report 7/60 2 1
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beyer, Sally and David)	7 Amount of contribution (\$)	8 In-kmd contribution description (if applicable)
(06/13/2014	6 Contributor address; City; State; Zip Code 1520 Shady Oaks Lane Fort Worth, TX 76107		\$75.00	
_					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See Ins	structions)	157 O8
	Date	Full name of contributor ut-of-state PAC (ID# Boecker, Bill		Amount of contribution (\$)	In-kind contribution description (if applicable)
1	06/20/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 3100		\$200.00	
		Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Bonds, Pete)	Amount of contribution (\$)	In-kind contribution description (if applicable)
,	04/16/2014	Contributor address; City; State; Zip Code Post Office Box 79590 Saginaw, TX 76179		\$1,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See in	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/04/2014	Contributor address; City; State; Zip Code 7751 Vdali Court Fort Worth, TX 76135		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Constable Pre	ation / Job title (See Instructions) ecinct 4	Employer (See In: Tarrant County	<u> </u>	
***************************************	Date	Full name of contributor ut-of-state PAC (ID# Bransom, Dub Jr. (Hon.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/11/2014	Contributor address; City; State; Zip Code 7751 Vdali Court Fort Worth, TX 76135	•••••	\$750.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Constable Pr	ation / Job title (See Instructions) ecinct 4	Employer (See In Tarrant County	structions)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/4	41 Report: 8/60		
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4 Date 05/21/2014	5 Full name of contributor Bray, George 6 Contributor address; City; State; Zip Code 105 Coronado Trail Weatherford, TX 76087	!	7 Amount of contribution (\$) \$255.00	A Hakind contribution description (happlicable) Campaign Fundraise Auction (tem; Professional Services		
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In:				
Date	Full name of contributor ut-of-state PAC (ID# Brunson, Rick	<u>!</u>)	Amount of contribution (\$)	Inskind contribution description (if applicable)		
06/09/2014	Contributor address; City; State; Zip Code 2110 Emerald Lake Drive Arlington, TX 76013		\$500.00			
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
Date	Full name of contributor uut-of-state PAC (ID# Burdock, Bill	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/20/2014	Contributor address; City; State; Zip Code 714 South Saginaw Blvd. Saginaw, TX 76179		\$100.00			
Dringing Lagran	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)		
Рппарагоссир	auon / 300 uue (See msu ucuons)	Employer (See in	structions)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
06/06/2014	Contributor address; City; State; Zip Code 1221 I-35 East Suite 200 Carrollton, TX 75006		\$1,000.00	Auction Item; Sports Event		
Delegalization	estion / Joh 454 / Oce Instruction	Employer (Oct.)		Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/31/2014	Contributor address; City; State; Zip Code 5400 Urbanview Street Fort Worth, TX 76114		\$1,000.00	 Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In		rende, complete Schedule 1)		

The Instru	CTION GUIDE explains how to complete this form.		1 PAGE#	44 Banati 0/00		
2 FILER NAM	E Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	41 Report: 9/60 (Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (IDa Carr, Pat and Richard	!)	7 Amount of contribution (\$)	8		
06/03/201	6 Contributor address; City; State; Zip Code 5400 Urbanview Street Fort Worth, TX 76114		\$600.00	K Auction Item Topsoil		
9 Principal oc	cupation / Job title (See Instructions)	10 Employer (See In				
				and the second		
Date	Full name of contributor ut-of-state PAC (ID# Chadwell, Jim	<u> </u>	Amount of contribution (\$)	In-kind contribution description (Fapplicable)		
06/01/201	Contributor address; City; State; Zip Code 3749 North Lighthouse Hill Lane Fort Worth, TX 76179		\$30.00	[
			(if travel outside of	Texas, complete Schedule T)		
Principal oc	cupation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor ☐ out-of-state PAC (ID#)	Amount of	In-kind contribution		
	Chisholm, Sharon and Daniel		contribution (\$)	description (if applicable)		
				1		
06/09/201	Contributor address; City; State; Zip Code 4324 Diaz Avenue		\$55.00	1		
	Fort Worth, TX 76107			l		
			(If travel outside of	Texas, complete Schedule T)		
Principal oc	cupation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor ut-of-state PAC (ID#	<u>#</u>)	Amount of	In-kind contribution		
	Christie, Lee		contribution (\$)	description (if applicable)		
05/21/201	500 West 7th Street		\$1,000.00] 		
	Suite 600 Fort Worth, TX 76102			1		
			(If travel outside of	Texas, complete Schedule T)		
Principal oc	cupation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution		
	Christie, Linda		contribution (\$)	description (if applicable)		
06/00/201	4 Contributor address; City; State; Zip Code		\$500.00			
06/09/201	1129 Picasso Drive Fort Worth, TX 76107		\$500.00			
				' . .		
Drinainal aa	ounstion / Joh title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)		
Principal oc	cupation / Job title (See Instructions)	Employer (See In	isa ucaons)			

The Instruction Guide explains how to co	mplete this form.		1 PAGE# Schedule: 8/4	11 Report: 10/60		
2 FILER NAME Johnson, J. D. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)		
4 Date 5 Full name of contributor Cistola, David	out-of-state PAC (ID)	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/02/2014 6 Contributor address; 4117 South Hulen Street 3521 Fort Worth, TX 76109	City; State; Zip Code		\$100.00	TARRANDE STATE OF THE COMPLETE STATE OF THE		
9 Principal occupation / Job title (See Instruction	ons)	10 Employer (See In		300		
Date Full name of contributor Cole, Johnny and Virgini		#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item; Stained Glass		
708 Bridle Trail Saginaw, TX 76179				i _		
				Texas, complete Schedule T)		
Principal occupation / Job title (See Instructi	ons)	Employer (See In	structions)			
Date Full name of contributor Collier, Rick and LaVeni	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
06/03/2014 Contributor address; 7220 Confederate Parkway Fort Worth, TX 76108	City; State; Zip Code		\$300.00	Auction Item; Art		
		F1		Texas, complete Schedule T)		
Principal occupation / Job title (See Instructi	ons)	Employer (See In	structions)			
1	out-of-state PAC (IDafety FW Police Officers		Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/30/2014 Contributor address; 904 Collier Streer Fort Worth, TX 76102	City; State; Zip Code		\$1,000.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructi	ions)	Employer (See In	structions)			
Date Full name of contributor Conway, Tommy	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item; Hand		
05/19/2014 Contributor address; 747 Veal Station Weatherford, TX 76085	City; State; Zip Code		\$450.00	Tooled Leather Item		
			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructi	ions)	Employer (See In	nstructions)			

_					
	The Instruction	אס Guide explains how to complete this form.		1 PAGE#	41 Report: 11/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date 05/02/2014	5 Full name of contributor Copeland, Rick 6 Contributor address; City; State; Zip Code 9508 Side Saddle Trail Fort Worth, TX 76131	!	contribution (\$)	8 rnin-kind contribution (escription (fr applicable) Campaign Fundraiser Auction Item Professional Services
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	a maga	# F
	Date	Full name of contributor ut-of-state PAC (ID# Corley, Linda and Don	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/05/2014	Contributor address; City; State; Zip Code 1421 Virginia Place Fort Worth, TX 76107		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Cornell, Lee)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/14/2014	Contributor address; City; State; Zip Code 100 East 15th Street Suite 640 Fort Worth, TX 76102		\$1,000.00	
	Principal occup	ation / Job title (See Instructions)	Employer (See In		ionas, complete concurs i, 🗀
		·	. , .	·	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; City; State; Zip Code 100 East 15th Street Suite 640 Fort Worth, TX 76102		\$1,000.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID≴ Cosby, John	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item;
	06/06/2014	Contributor address; City; State; Zip Code 4200 Airport Freeway Suite 200 Fort Worth, TX 76117		\$75.00	Household Garden Item Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N GUIDE explains how to comp	plete this form.		1 PAGE# Schedule: 10	/41 Report: 12/60	
2	FILER NAME	Johnson, J. D. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor Cozart, Anne and Gene	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/07/2014	6 Contributor address; (Post Office Box 4051 Fort Worth, TX 76164	City; State; Zip Code		\$500.00	TARRAH JUL SIEV Schedule T	
						Texas, complete ouredule 1)	
9	Principal occup	ation / Job title (See Instructions	s)	10 Employer (See In:	structions)		
	Date	Full name of contributor Cummings, Marcie	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/11/2014	Contributor address; (3924 Stoneshire Court Fort Worth, TX 76179	City; State; Zip Code		\$300.00		
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In:	<u> L</u>		
	т ппораг осоар		,	Zimpioyor (GGG III.	ou double)		
	Date	Full name of contributor Curry, Jan	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/19/2014	Contributor address; 6125 Plum Valley Place Fort Worth, TX 76116	City; State; Zip Code		\$200.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In	structions)		
	Date	Full name of contributor Dean, Linda	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	04/22/2014	Contributor address; 130 East Exchange Fort Worth, TX 76106	City; State; Zip Code		\$50.00	Auction Item; Gift Certificate	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In	structions)		
	Date	Full name of contributor Dean, Randal	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/19/2014	Contributor address; 201 Main Street Suite 800 Fort Worth, TX 76102	City; State; Zip Code		\$100.00	l 	
					(If travel outside of	Texas, complete Schedule T)	
-	Principal occur	l pation / Job title (See Instructions	g)	Employer (See In	1.	,	
	Principal occup	auon / Job uue (Jee msuucuon	·	Employer (See III	oudellono)		

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 11	/41 Report: 13/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID: Dildy, Charles	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/30/2014	6 Contributor address; City; State; Zip Code 361 Buckhom Lane Azle, TX 76020		\$750.00	Texas, complete Schedule 1	
_					- Control of the cont	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	HANNEL HANNEL	
	Date	Full name of contributor ut-of-state PAC (ID: Doke, Timothy	*)	Amount of contribution (\$)	in-kind contribution description (frapplicable)	
	05/20/2014	Contributor address; City; State; Zip Code 500 Throckmorton Street Fort Worth, TX 76102		\$250.00	I; 	
				·	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
_						
	Date	Full name of contributor ut-of-state PAC (ID: Doyle, Clay	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/20/2014	Contributor address; City; State; Zip Code 120 Don Propp Road Azle, TX 76020		\$25.00	 	
İ				//64	Towns committee Sabadata To	
Ц.				L	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID: Earley, Robert	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/09/2014	Contributor address; City; State; Zip Code 4805 Washburn Avenue Fort Worth, TX 76107	· · · · · · · · · · · · · · · · · · ·	\$1,050.00	I I I	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	05/19/2014	Contributor address; City; State; Zip Code 8985 Boat Club Road Fort Worth, TX 76179		\$300.00	Auction Item; Rodeo Tickets	
				(If travel outside of	Texas, complete Schedule T)	
<u> </u>	Principal occur	ation / Job title (See Instructions)	Employer (See In		. That, complete constant 1/	
	Principal occup	auon / von uue (oee manuonom)	Employer (See III	iau uolioria)		

	The Instruction	N GUIDE explains how to complete this	form.		1 PAGE# Schedule: 12	43 Report: 14/60
2	FILER NAME	Johnson, J. D. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-o Fairchild, Thomas	f-state PAC (ID#_		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/16/2014	6 Contributor address; City; Sta 6725 Medinah Drive Fort Worth, TX 76132	ate; Zip Code		\$100.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See Ins	<u> </u>	<u> </u>
	Date	Full name of contributor	f-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/22/2014	Contributor address; City; Sta 1408 Washington Terrace Fort Worth, TX 76107	ate; Zip Code		\$75.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	
	Date	Full name of contributor	f-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2014	Contributor address; City; Sta Post Office Box 93419 Southlake, TX 76092	ate; Zip Code		\$250.00 	
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) nissioner Precinct 3		Employer (See Ins Tarrant County	structions)	
	Date	Full name of contributor	f-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/12/2014	Contributor address; City; Sta 9424 Boat Club Road Fort Worth, TX 76179	ate; Zip Code		\$750.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	
	Date	Full name of contributor	f-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	05/21/2014	Contributor address; City; Sta 9424 Boat Club Road Fort Worth, TX 76179	ate; Zip Code		\$595.00	Auction Item; Clothing
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/41 Report: 15/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Flippo, Yvonne and Bill	‡)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/18/2014	6 Contributor address; City; State; Zip Code 601 East Bailey Boswell Road Saginaw, TX 76131		\$190.00	TARRANT DIL JUL 10		
_	Delegate al accura				Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Franklin, Wilson	<u>:</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
	05/23/2014	Contributor address; City; State; Zip Code 2455 North Main Fort Worth, TX 76164		\$400.00	Auction Item; Clothing		
					Texas, complete Schedule T)		
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)			
	Date	Full name of contributor uut-of-state PAC (ID# Freeman, Boyd	<u>!</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	01/13/2014	Contributor address; City; State; Zip Code Post Office Box 79488 Saginaw, TX 76179		\$1,000.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Freeman, Boyd	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/14/2014	Contributor address; City; State; Zip Code Post Office Box 79488 Saginaw, TX 76179		\$1,000.00	 		
			·	(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Freeman, Michael	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/13/2014	Contributor address; City; State; Zip Code 1301 Lawson Road Fort Worth, TX 76131		\$10,000.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 14/	/41 Report: 16/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Frisbie, Ken	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/23/2014	6 Contributor address; City; State; Zip Code 4014 Wingren Drive Irving, TX 75062		\$200.00	Texas, complete Schedule T	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Fulbright & Jaworski L.L.P. Texas Committee)	Amount of contribution (\$)	In-kind contribution description (If applicable)	
	05/01/2014	Contributor address; City; State; Zip Code 1301 McKinney Suite 5100		\$1,000.00		
		Houston, TX 77010		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/30/2014	Contributor address; City; State; Zip Code 8136 Camp Bowie West Fort Worth, TX 76116		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete scriedule 1/	
				,		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/29/2014	Contributor address; City; State; Zip Code 3100 West 7th Street Suite 200		\$200.00] 	
		Fort Worth, TX 76107		(If troval outpide of	Texas, complete Schedule T)	
-	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete schedule 1/	
	County Clerk		Tarrant County			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	06/04/2014	Contributor address; City; State; Zip Code 8455 Boat Club Road Fort Worth, TX 76179		\$100.00	Auction Item; Gift Certificates	
				(If travel outside of	Texas, complete Schedule T)	
一	Principal occup	nation / Job title (See Instructions)	Employer (See In	nstructions)		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	5/41 Report: 17/60	
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4 Date	5 Full name of contributor ut-of-state PAC (IDa Geren, Charlie (Rep.)	#)	7 Amount of contribution (\$)	8	
06/02/2014	6 Contributor address; City; State; Zip Code 1011 Roberts Cut Off Fort Worth, TX 76114	• • • • • • • • • • • • • • • • • • • •	\$475.00	Auction Item; Gift and Gift Certificates	
2. Principal accur				Texas, complete Sthedule 1)	
9 Principal occup State Repres	pation / Job title (See Instructions) entative District 99		structions) House of Repeser	ntatives 2	
Date	Full name of contributor out-of-state PAC (ID# Gillespie, Danny	‡)	Amount of contribution (\$)	In-kind contribution description (If applicable)	
04/14/2014	Contributor address; City; State; Zip Code 708 Rockledge Drive Saginaw, TX 76179		\$300.00	90 : H	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
Date	Full name of contributor uut-of-state PAC (ID# Glover, Toni Rhodes	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
06/06/2014	Contributor address; City; State; Zip Code 5965 Featherwind Way Fort Worth, TX 76135		\$90.00	Auction Item; Jewerly Sets	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		10A00, 00mpioo 1	
Date	Full name of contributor	<u>*</u>)	Amount of	In-kind contribution	
	Glover, Toni Rhodes		contribution (\$)	description (if applicable)	
06/13/2014	Contributor address; City; State; Zip Code 5965 Featherwind Way Fort Worth, TX 76135		\$180.00		
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See Ins			
Date	Full name of contributor ut-of-state PAC (ID# Godbey, Arvella	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/09/2014	Contributor address; City; State; Zip Code 568 Willowview Drive Saginaw, TX 76179		\$200.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	Dation / Job title (See Instructions)	Employer (See In:	<u> </u>		
			·		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 16	/41 Report: 18/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Grammer, Elmer	<u>#</u>)	7 Amount of contribution (\$)	8 in-kind contribution description (F applicable)	
	06/17/2014	6 Contributor address; City; State; Zip Code 1216 Gabriel Lane Fort Worth, TX 76116	• • • • • • • • • • • • • • • • • • • •	\$125.00	A BANGS AND SELECTION OF THE SELECTION O	
					Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	79	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/01/2014	Contributor address; City; State; Zip Code 9201 Dickson RoAD Fort Worth, TX 76179		\$200.00		
				L	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/02/2014	Contributor address; City; State; Zip Code 6324 Skylark Circle Fort Worth, TX 76180		\$100.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID: Gunter, Jim	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/18/2014	Contributor address; City; State; Zip Code 4906 Camp Bowie Blvd. Fort Worth, TX 76107		\$100.00 		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/20/2014	Contributor address; City; State; Zip Code 6204 Dodson Terrace Fort Worth, TX 76135		\$150.00		
				(If travel outside of	Texas, complete Schedule T)	
-	Principal occur	ation / Job title (See Instructions)	Employer (See in	L.:	, ,, had	
	,			-		

_							
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	/41 Report: 19/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hardy, Michael	<u>:</u>)	7 Amount of contribution (\$)	8 A-kind contribution description (Happlicable)		
	05/05/2014	6 Contributor address; City; State; Zip Code Post Office Box 79187 Fort Worth, TX 76179		\$150.00	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	L <u>`</u>	S C		
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/26/2014	Contributor address; City; State; Zip Code 13764 Ranch Horse Run Fort Worth, TX 76052		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code 734 Harpole Road E Argyle, TX 76226		\$330.00	 		
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	`			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/16/2014	Contributor address; City; State; Zip Code 3863 Candlelite Lane Fort Worth, TX 76109		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor □ out-of-state PAC (ID≇ Hill, Billy and Gail	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item; Clothing		
	05/21/2014	Contributor address; City; State; Zip Code 100 East Exchange Avenue Fort Worth, TX 76106		\$224.00	I item		
				L .	Texas, complete Schedule T)		
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 18	/41 Report: 20/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hodnett, Camille)	7 Amount of contribution (\$)	8 In kind contribution description (if applicable)
	05/30/2014	6 Contributor address; City; State; Zip Code 403 North Sylvania Avenue #2		\$100.00	
		Fort Worth, TX 76111		(If travel outside of	Texas, complete Schedyle T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:		
	Date	Full name of contributor ut-of-state PAC (ID# Hollenstein, A. G.		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/22/2014	Contributor address; City; State; Zip Code 4022 Shorefront Drive Fort Worth, TX 76135		\$600.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Hollenstein, A. G.		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 4022 Shorefront Drive Fort Worth, TX 76135		\$325.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Hotchkin, Tim and Thela	}	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; City; State; Zip Code 4008 Lost Creek Blvd. Aledo, TX 76008		\$750.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Hudson, W. A. II)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/28/2014	Contributor address; City; State; Zip Code 616 Texas Street Fort Worth, TX 76102		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

P.O.Box 12070

	The Instruction	אס Guide explains how to complete this form.		1 PAGE#	/41 Report: 21/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jacobsen, Joan)	7 Amount of contribution (\$)	description (Fapplicable)	
	03/15/2014	6 Contributor address; City; State; Zip Code Post Office Box 530 Coppell, TX 75019		\$100.00		
_					Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	08	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/15/2014	Contributor address; City; State; Zip Code 1301 Throckmorton Street Apt. 1802 Fort Worth, TX 76102		\$100.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:			
		,		,		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	06/02/2014	Contributor address; City; State; Zip Code 4004 Hartwood Drive Fort Worth, TX 76109		\$600.00	Auction Item; Sporting Event	
				064		
	Dringing) aggun	ation / Job title (See Instructions)	Employer (Cap In		Texas, complete Schedule T)	
	Fincipal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor 🔲 out-of-state PAC (ID#		Amount of	In-kind contribution	
		Jensen, Daniel		contribution (\$)	description (if applicable)	
	06/09/2014	Contributor address; City; State; Zip Code 4004 Hartwood Drive Fort Worth, TX 76109		\$250.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution	
		Jernigan, Gene and Margaret		contribution (\$)	description (if applicable)	
	06/09/2014	Contributor address; City; State; Zip Code 8429 County Road 1128 Godley, TX 76044		\$185.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	0/41 Report: 22/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Johndroe, S. G. III	!	7 Amount of contribution	In-kipdcontribution description (if applicable)	
	05/25/2014	6 Contributor address; City; State; Zip Code 600 West 6th Street Suite 300 Fort Worth, TX 76102		\$100.00	Texas, complete Schedule 11	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Johnson, Dennis Sr.	<u> </u>	Amount of contribution (\$)	Inskind contribution description (if applicable)	
	05/19/2014	Contributor address; City; State; Zip Code 2301 Carson Street Fort Worth, TX 76117		\$100.00	 	
				(if travel outside of	f Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Jones, James	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/19/2014	Contributor address; City; State; Zip Code 1605 Trafalgar Road Fort Worth, TX 76116		\$50.00	 	
	D. C. C.	Sing () by Killy (October 1997)	Franks as (Os. 1)		f Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	istructions)		
	Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/16/2014	Contributor address; City; State; Zip Code 201 Main Street Suite 2500 Fort Worth, TX 76102		\$1,000.00	1 1 1	
					f Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/30/2014	Contributor address; City; State; Zip Code 1664 Pauls Court Fort Worth, TX 76179		\$200.00	 	
_				<u> </u>	f Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 21	/41 Report: 23/60	
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Larson, Edwin Jr.	#)	7 Amount বৰ্ণ contribution (\$)	In-kind contribution description (if applicable)	
06/09/2014	6 Contributor address; City; State; Zip Code 809 Oak Court Saginaw, TX 76179		\$335.00	Textas, complete Schedule T)	
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	# 1 A B B B B B B B B B B B B B B B B B B	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/15/2014	Contributor address; City; State; Zip Code 5040 Windhill Court W Fort Worth, TX 76179		\$225.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor ut-of-state PAC (ID: Leggett, Patti	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/13/2014	Contributor address; City; State; Zip Code 6816 Camp Bowie Suite 118 Fort Worth, TX 76116		\$3,740.00	 - 	
Principal occur	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)	
r mopar occup			su deuoris)	***************************************	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/01/2014	Contributor address; City; State; Zip Code 2300 Race Street Fort Worth, TX 76111		\$100.00	! 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/28/2014	Contributor address; City; State; Zip Code P. O. Box 17428 Austin, TX 78760		\$2,000.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 22	/41 Report: 24/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 0000001	#Ethics Commission filers)	
4	Date	5 Full name of contributor	o#_C00303024_)	7 Amount of contribution (\$)	8 In kind contribution description (if applicable)	
	06/23/2014	6 Contributor address; City; State; Zip Code 1550 Crystal Drive Arlington, VA 22202		\$1,000.00	WE WILL DON'T	
					Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	S O	
	Date	Full name of contributor ut-of-state PAC (II Loftin, Stacy	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/22/2014	Contributor address; City; State; Zip Code 3950 State Hwy 360 Grapevine, TX 76051	·	\$333.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (II Long, Ronnie	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/09/2014	Contributor address; City; State; Zip Code 6004 Airport Freeway Fort Worth, TX 76117		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal accum	ation / Job title (See Instructions)	Employer (See In	L <u>i</u>		
	Рппсграг оссир	ation / Job title (See Instructions)	Employer (See in	structions)		
	Date	Full name of contributor ut-of-state PAC (II Louden, G. Malcolm	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
		Louden, G. Malcolli		(4)],]	
	04/25/2014	Contributor address; City; State; Zip Code 500 West 7th Streer Unit #27 Suite 1007	•	\$1,000.00	 	
		Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In			
				T		
	Date	Full name of contributor	O#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	05/23/2014	Contributor address; City; State; Zip Code 2601 North Main Fort Worth, TX 76106		\$40.00	Auction Item; Clothing Item 	
				(If travel outside of	Texas, complete Schedule T)	
	Dringing and	ention / Joh title (See Instructions)	Employer (Car In		- Chias, complete constants 1,	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	isti uctions)		

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 23/	41 Report: 25/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lynch, John IV		7 Amount of contribution (\$)	8 In kind contribution description (if applicable)
	04/22/2014	6 Contributor address; City; State; Zip Code 5301 Miramar Lane Colleyville, TX 76034		\$333.00	Texas, complete Schedule 7)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	80 : TY
	Date	Full name of contributor ut-of-state PAC (ID# Maddox, Keith		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	05/23/2014	Contributor address; City; State; Zip Code 2739 North Main Street Fort Worth, TX 76106		\$100.00	Auction Item; Clothing Item
				(If travel outside of	Texas, complete Schedule T)
	Driverie et exerce	offen / Joh fills (Oss Jackwellers)	Empleyer (Occ. In	<u></u>	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/22/2014	Contributor address; City; State; Zip Code 4011 Benbrook Hwy Suite B Fort Worth, TX 76116		\$600.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; City; State; Zip Code 929 Hampton Meadows Drive Crowley, TX 76036		\$150.00 _[
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; City; State; Zip Code 2233 Farrington Lane Hurst, TX 76054		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
_	Dringinal accur	eation / Joh title /See Instructions	Employer (See In	L <u>`</u>	· · · · · · · · ·
	ennapai occup	ation / Job title (See Instructions)	Employer (See II)	iau dolloria <i>j</i>	

	OTHER	THAN PLEDG	ES OR LOAI	49 		P E 20 1
	The Instruction	N GUIDE explains how to con	nplete this form.		1 PAGE#	/41 Report: 26/56
2	FILER NAME	Johnson, J. D. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Mills, Richard	☐ out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/17/2014	6 Contributor address; 7612 Jean Ann Drive Fort Worth, TX 76180	City; State; Zip Code		\$25.00	09
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See Ins	structions)	
wie-						
	Date	Full name of contributor Minick, Billy and Pam	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	06/02/2014	Contributor address; 2520 Rodeo Plaza Fort Worth, TX 76106	City; State; Zip Code		\$160.00	Auction Item; Concert Tickets
					(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In:		TOXAG, COMPLETE CONTRACTOR 1/
	· mopar occap			Zimpioyor (eee iiii		
	Date	Full name of contributor Mitchell, T. J.	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/23/2014	Contributor address; 6676 Corporation Pkwy Fort worth, TX 76126	City; State; Zip Code		\$90.00	I I I
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor	☐ out-of-state PAC (ID#	: \	Amount of	In-kind contribution
	Date	Moayedi, Merhdad	Unit-oi-state FAC (ID#	·	contribution (\$)	description (if applicable)
	04/15/2014	Contributor address; 1221 IH 35E Suite 200	City; State; Zip Code		\$1,000.00	!
		Carrollton, TX 75066			(If traval outside of	Texas, complete Schedule T)
_	Principal occur	ation / Job title (See Instruction	ns)	Employer (See In		Texas, complete constitute 1)
	т ппорагосоар	anon 7 505 and (See mondens)		Zimpioyoi (GGG iii	0.1.00.01.07	
	Date	Full name of contributor Moorman, Mark	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/15/2014	Contributor address; 405 West Lee Avenue Weatherford, TX 76086	City; State; Zip Code		\$100.00	
	District	-Rand Jah Billa (October 1911)		Empleyer (Oct. In		Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructio	ns)	Employer (See In	structions)	

The Instruct	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 25	741 Report: 27/60	
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
05/21/2014	6 Contributor address; City; State; Zip Code 4312 Bellaire Drive South Apt 222 Fort Worth, TX 76109		\$150.00		
			<u> </u>	Texas, complete Schedule T)	
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)		
Date	Full name of contributor ut-of-state PAC (ID) Naismith, Deborah	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/08/2014	Contributor address; City; State; Zip Code 13510 Willow Springs Road Haslet, TX 76052		\$750.00	 	
· · · ·				Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor ☐ out-of-state PAC (ID≇ Needham, Judy	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/16/2014	Contributor address; City; State; Zip Code 7579 Surfside Drive Fort Worth, TX 76135		\$500.00	 	
			/If traval outside of	Texas, complete Schedule T)	
Principal occur	Loation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete schedule 1)	
i iliopai occu	sation 7 dob title (Occ marketions)	Employer (See iii	ati detiona)		
Date	Full name of contributor □ out-of-state PAC (ID# Nelson, Jane (Sen.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
05/19/2014	Contributor address; City; State; Zip Code 1235 South Main Street Suite 280 Grapevine, TX 76051		\$100.00	Auction Item; Sports Equipment	
			(If travel outside of	Texas, complete Schedule T)	
Principal occu Senator	pation / Job title (See Instructions)	Employer (See In: Texas State Se			
Date	Full name of contributor ut-of-state PAC (ID#	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/09/2014	Contributor address; City; State; Zip Code 221 South Hampshire Street Saginaw, TX 76179	•	\$655.00		
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 26/	41 Regort: 28/60
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT #3	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Nguyen, Andy (Hon.)		- 45	8 In-kind contribution description (if applicable)
06/09/2014	6 Contributor address; City; State; Zip Code Post Office Box 151272 Arlington, TX 76015		\$150.00	PH III DO
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) missioner Precinct 2	10 Employer (See In Tarrant County	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Nordan, Brent)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/14/2014	Contributor address; City; State; Zip Code 933 Ranch Road Saginaw, TX 76179		\$1,000.00	
			(If traval autaida of	Texas, complete Schedule T)
				Texas, complete schedule 1)
Principal occu	pation / Job title (See Instructions)	Employer (See in	structions)	-
Date	Full name of contributor ut-of-state PAC (ID# Oliver, Jim	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/05/2014	Contributor address; City; State; Zip Code 2600 West 7th Streer #2508		\$100.00	
	Fort Worth, TX 76107	Facilities (October	<u> </u>	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/20/2014	Contributor address; City; State; Zip Code 675 North Henderson Street Fort Worth, ID 76107		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
1 Timopar oco				
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/06/2014	Contributor address; City; State; Zip Code 9374 Old Decatur Road Fort Worth, TX 76179		\$100.00	1
			(If travel outside of	Texas, complete Schedule T)
		Emple of the	<u> </u>	ievas, combiete schedule i)
Principal occi	upation / Job title (See Instructions)	Employer (See Ir	nstructions)	

_						
	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 27	741 Report: 29/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission files)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Overcash, Clif Jr.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	05/29/2014	6 Contributor address; City; State; Zip Code 1701 River Run Suite 504 Fort Worth, TX 76107		\$250.00		
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor uut-of-state PAC (ID# Padgett, Crystal)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/06/2014	Contributor address; City; State; Zip Code 633 West Division Street Arlington, TX 76011		\$200.00	 	
İ				(If travel outside of	Texas, complete Schedule T)	
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>		
		,				
	Date	Full name of contributor □ out-of-state PAC (ID# Parker, Charles	<u>!</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/05/2014	Contributor address; City; State; Zip Code 3842 East Hwy 114 Rhome, TX 76078		\$1,000.00	! 	
				//f traval autoids of	Toyan complete Schodule T	
	Principal cours	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)	
	Рипсіраї оссор	auon 7 Job due (See msauchons)	Employer (See III			
	Date	Full name of contributor □ out-of-state PAC (ID# Pattillo, Rusty	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	05/19/2014	Contributor address; City; State; Zip Code 5209 Arbor Mill Drive Fort Worth, TX 76135		\$500.00	Auction Item; Sports Tickets	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	estructions)		
	Date	Full name of contributor ut-of-state PAC (ID: Peerwani, Nizam	<u>!</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	05/19/2014	Contributor address; City; State; Zip Code Post Office Box 206 Fort Worth, TX 76101		\$586.00	Auction Item; Electronic Equipment	
				(if travel outside of	Texas, complete Schedule T)	
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See Ir	<u> </u>		
	r micipai occu	nation, our time foce institutions.	Employer (occ II	ion action to		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 28	/41 Report: 30/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Pelle, Tracy	<u>:</u>)	7 Amount of contribution (\$)	8 In kind contribution description (if applicable)	
	06/02/2014	6 Contributor address; City; State; Zip Code 1508 Quail Springs Road Fort Worth, TX 76177		\$50.00	TO PH	
q	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	<u> </u>	Texas, complete Schedule T)	
_			70 Zimpioyar (coo iii	ou donorro)		
	Date	Full name of contributor ut-of-state PAC (ID# Peska, Don)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/28/2014	Contributor address; City; State; Zip Code 5017 Ranch View Road Fort Worth, TX 76109		\$100.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/29/2014	Contributor address; City; State; Zip Code 5433 Blue Water Lake Drive Fort Worth, TX 76137		\$750.00	 	
				<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Phillips, David	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/21/2014	Contributor address; City; State; Zip Code 9311 Dosier Cove East Fort Worth, TX 76179		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item;	
	05/12/2014	Contributor address; City; State; Zip Code 6174 Park Road Fort Worth, TX 76135		\$100.00	Professional Services	
				(If travel outside of	Texas, complete Schedule T)	
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)		

L						
	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 29	9/41 Report: 31/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (II Pigman, Reed Jr.	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (If applicable)	
	05/16/2014	6 Contributor address; City; State; Zip Code 200 Texas Way Fort Worth, TX 76106	· · · · · · · · · · · · · · · · · · ·	\$200.00	Texas, complete Schedule 1	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In		Texas, complete scriedule ()	
•	T Thiopai occup			·	F 69	
	Date	Full name of contributor ut-of-state PAC (II Pipes, Kasey	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/22/2014	Contributor address; City; State; Zip Code 3700 Country Club Circle Fort Worth, TX 76109		\$1,000.00	! !	
		101010101, 1270100			_	
L	Discioni	allow (lab 695 (October 1995)	F	<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (If Price, Betsy (Hon.)	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/19/2014	Contributor address; City; State; Zip Code Post Office Box 100066 Fort Worth, TX 76185	;	\$750.00	! !	
				(If travel outside of	f Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (I	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/17/2014	Contributor address; City; State; Zip Code 6004 Airport Freeway Haltom City, TX 76117	• • • • • • • • • • • • • • • • • • • •	\$200.00	 	
	-			(If travel outside of	f Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/21/2014	Contributor address; City; State; Zip Code 6221 Indian Creek Drive Fort Worth, TX 76107	•	\$500.00	 	
				(If travel outside of	f Texas, complete Schedule T)	
\vdash	Principal occur	Dation / Job title (See Instructions)	Employer (See In			

	The Instruction	N GUIDE explains how to complete this form.			/41 Report: 32/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT #	(Ethles Commission filers)	
4	Date 06/02/2014	5 Full name of contributor Rains, Raymond 6 Contributor address; 8092 Eagle Mountain Drive Fort Worth, TX 76135		7 Amount of contribution (\$) \$95.00	8 In-kind contribution description (Happlicable) Campaign Fundraiser Auction Item; Att	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#Ramsey, Brett	<u>!</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/09/2014	Contributor address; City; State; Zip Code 8624 Crooswind Drive Fort Worth, TX 76179		\$250.00	1	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Ray, William	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/22/2014	Contributor address; City; State; Zip Code 512 Main Street Suite 308 Fort Worth, TX 76102		\$150.00	 	
\vdash	Principal occup	nation / Job title (See Instructions)	Employer (See In	<u> </u>	, _	
	Date	Full name of contributor ☐ out-of-state PAC (ID≱ Reed, Ruby	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/01/2014	Contributor address; City; State; Zip Code 404 South Hampshire Street Saginaw, TX 76179		\$200.00	 	
				L`	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See in	nstructions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	Iri-kind contribution description (if applicable)	
	04/16/2014	Contributor address; City; State; Zip Code Post Office Box 370 Euless, TX 76039		\$1,000.00	 	
_	Deineinel	potion / Joh title /Con Instructions)	Employer (Sec. la	<u> </u>	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	isu ucuoris)		

Austin, Texas 78711-2070 (512)463-5800

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE ₩ The INSTRUCTION GUIDE explains how to complete this form. Schedule: 31/41 Report: 33/60 3 ACCOUNT# (Ethics Commission filers) 2 FILER NAME Johnson, J. D. (Mr.) 00000001 0 Date 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Reynolds, Gary Campaign Fundraiser Auction Item; Electronic Equipment 😸 6 Contributor address; City; State; Zip Code \$535.00 06/02/2014 Post Office Box 370 Euless, TX 76039 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of Date description (if applicable) contribution (\$) Richards, Jim Campaign Fundrasier Auction Item; Sports \$200.00 Tickets 05/21/2014 Contributor address; City; State; Zip Code 2024 Williams Place Fort Worth, TX 76111 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution Date description (if applicable) contribution (\$) Richter, Marty Campaign Fundraiser Auction Item; Livestock \$1,500.00 05/02/2014 Contributor address; City; State; Zip Code 7225 McNay Road Fort Worth, TX 76135 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Full name of contributor ut-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) Richter, Marty City; State; Zip Code Contributor address; \$325.00 06/16/2014 7225 McNay Road Fort Worth, TX 76135 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of description (if applicable) contribution (\$) Riscky, Jim Campaign Fundraiser Auction Item; Gift 06/03/2014 Contributor address; City; State; Zip Code \$150.00 | Certificates 2314 Azle Avenue Fort Worth, TX 76106 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions)

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 32	/41 Report: 34/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#Roach, John II)	7 Amount of contribution (\$)	8 In-kind confribution description (if-applicable)
	05/20/2014	6 Contributor address; City; State; Zip Code 2805 Alton Road Fort Worth, TX 76109		\$200.00	
					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	i.
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 3980 Boat Club Road Suite 119		\$4,560.00	
		Fort Worth, TX 76135		(If travel outside of	Texas, complete Schedule T)
	Principal cocum	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Tokas, complete conceans 1,
	Ринсіраї оссор	auon / 300 uue (See msuucions)	Employer (See in	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Robbins, Frankie and Jon Ed)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	06/03/2014	Contributor address; City; State; Zip Code 212 Copperwood Lakeside, TX 76108		\$310.00	Auction Item; Household Items
				//ftmvol outside of	Texas, complete Schedule T)
	Principal accum	otion / Job title (Coe Instructions)	Employer (Coo. In		Texas, complete ochedule 1/
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Robbins, Lynn)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/15/2014	Contributor address; City; State; Zip Code 8211 Mountain Lake Court Fort Worth, TX 76179		\$750.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	nation / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor ☐ out-of-state PAC (ID≉	£)	Amount of	In-kind contribution
		Robbins, Lynn		contribution (\$)	description (if applicable)
	06/09/2014	Contributor address; City; State; Zip Code 8211 Mountain Lake Court Fort Worth, TX 76179		\$1,075.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

L						
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 33	6/41 Report: 35/60	
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	Æthics Commission filers)	
4	Date 05/07/2014	5 Full name of contributor ☐ out-of-state PAC (ID: Russell, Kenny and Teresa 6 Contributor address; City; State; Zip Code 5810 Jacksboro Highway Fort Worth, TX 76114)	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable) Campaign Fundraiser Auction Items; Gift Certificates Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In			
	Date	Full name of contributor ut-of-state PAC (ID# Sands, Mike)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/18/2014	Contributor address; City; State; Zip Code 4740 Dexter Avenue Fort Worth, TX 76107		\$100.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		
	Date	Full name of contributor uut-of-state PAC (ID# Sayers, Deborah		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/27/2014	Contributor address; City; State; Zip Code 7613 Royal Troon Drive Fort Worth, TX 79179		\$200.00		
	Orinainal assur	otion / Joh title (Coe Instructions)	Employer (See In	,	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor uut-of-state PAC (ID# Scott, Jim	<u>:</u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	06/03/2014	Contributor address; City; State; Zip Code 8148 West Freeway Fort Worth, TX 76108		\$400.00	Auction Item; Air Compressors and a wench	
	5				Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Date 06/06/2014	Full name of contributor out-of-state PAC (ID# Shipp, Adam Contributor address; City; State; Zip Code 12721 Business Hwy 287 North Saginaw, TX 76179		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser Auction Item; Gift Certificates	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 34	/41 Report: 36/60
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT#	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Siegel, Jennifer		7 Amount of contribution (\$)	8 fn-kind contribution description (If applicable) Campaign Fundraiser
	05/12/2014	6 Contributor address; City; State; Zip Code 1720 Gendy Street Fort Worth, TX 76107		\$100.00	Auction Item; One year Membership to National Cowgirt Museum
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	69
	Date	Full name of contributor ut-of-state PAC (ID# Snyder, Shelley		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	06/04/2014	Contributor address; City; State; Zip Code 5313 Boat Club Road Fort wORTH, TX 76135		\$600.00	Auction Item; One Year Membership to Northwest YMCA
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Southard, Glennis		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser
	06/06/2014	Contributor address; City; State; Zip Code 2115 Portwood Way Fort Worth, TX 76179		\$30.00	Auction Item; Household Item
		,		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
		Sprinkle, Vince and Susan		CONTRIBUTION (\$)	description (ii applicable)
	05/23/2014	Contributor address; City; State; Zip Code 9117 South Water Tower Road Fort Worth, TX 76179		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See Instructions)			structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Stavron, Sam)	Amount of contribution (\$)	In-kind contribution description (If applicable)
	06/09/2014	Contributor address; City; State; Zip Code 100 Rivercrest Drive Fort Worth, TX 76107		\$180.00	
				(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 35	/41 Report: 37/60		
2	FILER NAME	Johnson, J. D. (Mr.)			(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≴ Stevens, Jack	!)	7 Amount of contribution (\$)	8 In kind conflibution description (if applicable)		
	06/10/2014	6 Contributor address; City; State; Zip Code 116 North Broadway Road Azle, TX 76020	•••••	\$250.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	73		
-	Date	Full name of contributor uut-of-state PAC (ID# Strinko, Steve)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
	04/30/2014	Contributor address; City; State; Zip Code 2909 Lackland Road Fort Worth, TX 76107		\$4,040.00	Auction Item; Professional Services		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	L	., .		
		(
	Date	Full name of contributor ut-of-state PAC (ID# Summers, Pamela		Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
	06/02/2014	Contributor address; City; State; Zip Code 8092 Eagle Mountain Drive Fort Worth, TX 76135		\$95.00	Auction Item; Art		
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Teague, Jim	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2014	Contributor address; City; State; Zip Code Post Office Box 471451 Fort Worth, TX 76147		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In				
	Dets	Full name of contributes T and of state DAG (ID)		A	la landa e e e e e		
	Date	Full name of contributor ut-of-state PAC (ID# Teague, Richard)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/30/2014	Contributor address; City; State; Zip Code 3140 Edgehill Fort Worth, TX 76116		\$1,000.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	,	,	. , , , , , , , , , , , , , , , , , , ,	,			

	The Instruction	พ Guide explains how to com	plete this form.		1 PAGE# Schedule: 36/41 Report: 38/60		
2	FILER NAME	Johnson, J. D. (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor Terry, Gary	out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/14/2014	6 Contributor address; 117 Shady Lake Court Hurst, TX 76054	City; State; Zip Code		\$100.00	Texas, complete Schedule Th.	
						Texas, complete schedule 1).	
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	1 69	
	Date	Full name of contributor Terry, Gene	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/03/2014	Contributor address; 8822 Chalk Knoll Drive Austin, TX 78735	City; State; Zip Code		\$1,000.00		
					(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	16)	Employer (See In		really complete contents if	
	r ilicipal occup	auony sob aue (see mandenor			au douons/		
	Date	Full name of contributor Thompson, Charlie	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/17/2014	Contributor address; Post Office Box 469 Springtown, TX 76082	City; State; Zip Code		\$3,100.00		
		opinig.om, 17. 10002			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
	Date	Full name of contributor	ut-of-state PAC (ID#)	Amount of	In-kind contribution	
		Tidwell, Scott and Nancy	·		contribution (\$)	description (if applicable) Campaign Fundraiser	
	05/30/2014	Contributor address; Post Office Box 1591 Azle, TX 76098	City; State; Zip Code		\$530.00	Auction Item; Electronic Equipment 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
	Date	Full name of contributor Torrez, Andrew	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser	
	05/19/2014	Contributor address; 6055 Lake Worth Blvd Lake Worth, TX 76135	City; State; Zip Code		\$288.00	Auction Item; Gift Certificates	
					(If travel outside of	Texas, complete Schedule T)	
-	Principal accur	pation / Job title (See Instruction	ne)	Employer (See In	<u> </u>		
	Principal occup	auon 7 Job aue (See msaucao)	19)	Employer (See in	ion dollorio)		

F								
	The Instruction	ON GUIDE explains how to complete this	s form.		1 PAGE#			
2	FILER NAME	Johnson, J. D. (Mr.)			3 ACCOUNT#	7/41 Report: 39/60 (Ethics Commission filers)		
L					00000001	(_billion commission incre)		
4	Date	5 Full name of contributor ☐ out-out-out-out-out-out-out-out-out-out-		#	7 Amount of contribution (\$)	8 In-kind contribution description ((**ppplicable) Campaign Fundraiser* Auction Item; Hunting		
	05/21/2014	6 Contributor address; City; Sta Post Office Box 211961 Bedford, TX 76095	ate; Zip Code		\$200.00	and Sports Equipment		
9	Principal occur	ation / Job title (See Instructions)		42.5		Texas, complete Schedule T)		
Ľ	1 Tillopar occup	,		10 Employer (See Ins	structions)			
	Date	Full name of contributor ut-o out-o out-o	f-state PAC (ID#	ŧ	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/03/2014	Contributor address; City; Sta 2505 Capri Drive Fort Worth, TX 76114	ate; Zip Code		\$100.00	· ·		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)			
	Date	Full name of contributor ut-o	f-state PAC (ID#	<u>!</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/21/2014	Contributor address; City; Sta 524 Willow View Drive Saginaw, TX 76179	ate; Zip Code		\$1,000.00	·		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)			
	Date	Full name of contributor ut-o out-o Troxell, Janice and Tracy	f-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/09/2014	Contributor address; City; Sta 524 Willow View Drive Saginaw, TX 76179	ate; Zip Code		\$1,200.00			
						Texas, complete Schedule T)		
	Principal occupation / Job title (See Instructions)			Employer (See Ins	structions)			
	Date	Full name of contributor ut-o	f-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Fundraiser		
	05/23/2014	Contributor address; City; Sta 8401 Boat Club Road Fort Worth, TX 76179	ate; Zip Code		\$100.00	Auction Item; Gift Certificates		
						Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)			

_								
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 38/	41 Report: 40/60			
2	FILER NAME	Johnson, J. D. (Mr.)	****	3 ACCOUNT # 3 00000001	Ethice Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Vititow, Bob	<u> </u>	7 Amount of contribution (\$)	8 In-Kind contribution description (iLapplicable)			
	05/15/2014	6 Contributor address; City; State; Zip Code 1226 Woodland Park Drive Hurst, TX 76053		\$200.00 	PW HO ON THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OUT OF THE OUT OF THE OUT OF THE OUT OUT OF THE OUT OUT OUT OUT OUT OUT OUT OUT OUT OUT			
				(If travel outside of 1	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (IDa Wade, Rick	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/19/2014	Contributor address; City; State; Zip Code 633 West Division Street Arlington, TX 76011		\$200.00 				
				(If travel outside of 1	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/04/2014	Contributor address; City; State; Zip Code Post Office Box 26743 Benbrook, TX 76126		\$200.00 				
				(If travel outside of]	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	, <u> </u>			
		,	. , .	,				
	Date	Full name of contributor ut-of-state PAC (ID: Wersal, Eric	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/09/2014	Contributor address; City; State; Zip Code 119 Acom Lane Aledo, TX 76008		\$150.00 				
				(If travel outside of 1	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID: Wershay, Robert	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/24/2014	Contributor address; City; State; Zip Code Post Office Box 11725 Fort Worth, TX 76110		\$150.00 				
				/lf traval outside of 3	Texas, complete Schedule T)			
┡	Dringing age	pation / Job title (See Instructions)	Employer (See In	'	rexae, complete schedule i)			
	Principal occup	auon 7 300 uue (366 mauuduus)	Employer (See III	isu delleris)				

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE#			
_		Ishana I.D. (Mr.)			/41 Report: 41/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Data	5 Full name of contributes			1 0 In kind annual at an		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wheeless, Skipper		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
					Campaign Fundraiser Auction Hems Art		
	05/29/2014	6 Contributor address; City; State; Zip Code Post Office Box 134		\$260.00	85 = 33		
		Ballinger, TX 76821			1 25 0 5m		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)	Control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the contro		
					204		
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		viniunali, N. vviillaili		22200011 (4)	i		
	06/09/2014	Contributor address; City; State; Zip Code		\$250.00			
		4325 Ridglea Country Club Drive Fort Worth, TX 76126					
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In		.,, Д		
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution		
		Wilder, Thomas (Hon.)		contribution (\$)	description (if applicable) Campaign Fundrasier		
	05/29/2014	Contributor address; City; State; Zip Code		\$50.00	Auction Item; Art		
	•	209 West Second Street Fort Worth, TX 76102			 		
				(If travel aut-id	Toyon nomplete Cabadata m		
-	Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	District Clerk		Tarrant County	·			
	Date	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution		
		Wilder, Thomas (Hon.)		contribution (\$)	description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code		\$100.00			
		209 West Second Street Fort Worth, TX 76102		,] [
				(16 Amy and a set of a	Tours complete Oaker to m. [7]		
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	District Clerk		Tarrant County				
Г	Date	Full name of contributor ut-of-state PAC (ID:	#	Amount of	In-kind contribution		
		Williams, J. R.		contribution (\$)	description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code		\$500.00	1		
		2621 Museum Way Fort Worth, TX 76107			1		
				064	·		
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In		f Texas, complete Schedule T)		
		,					

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 40	/41 Report: 42/60		
2	FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Williams, James		7 Amount of contribution (\$)	(8 Ekind contribution description (frapplicable) Campaign Fundraiser Auction tem: Gift		
	05/29/2014	6 Contributor address; City; State; Zip Code 2918 West Pioneer Pkwy Avenue Arlington, TX 76013		\$100.00	Certificates Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	09		
	Date	Full name of contributor ut-of-state PAC (ID# Williams, Michael)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/19/2014	Contributor address; City; State; Zip Code 3737 Hamilton Avenue Fort Worth, TX 76107		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Wright, Jacquelyn (Hon.)		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/23/2014	Contributor address; City; State; Zip Code Post Office Box 136444 Fort Worth, TX 76136		\$150.00	 		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Total Somplete Somewhale 17		
	Date	Full name of contributor ut-of-state PAC (ID#Yorio, Thomas	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/20/2014	Contributor address; City; State; Zip Code 208 Briar Haven Court Burleson, TX 76028		\$250.00	 		
L				<u> </u>	Texas, complete Schedule T)		
	Principal occur	pation / Job title (See Instructions)	Employer (See In	nstructions)			
	Date	Full name of contributor ut-of-state PAC (ID# Young, L. Everett (Hon.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code 7108 Bettis Drive Fort Worth, TX 76133		\$25.00	 		
L		<u> </u>			f Texas, complete Schedule T)		
	Principal occu	pation / Job title (See Instructions)	Employer (See In	nstructions)			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 41/41 Report: 43/60					
2 FILER NAME	Johnson, J. D. (Mr.)		3 ACCOUNT# 00000001					
4 Date	5 Full name of contributor ut-of-state PAC (ID: Youngblood, Edwin	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
06/09/2014	6 Contributor address; City; State; Zip Code 100 Throckmorton Street Suite 540 Fort Worth, TX 76102		\$200.00	TAR TAR				
9 Principal occup	I pation / Job title (See Instructions)	10 Employer (See In		Texas, complete Schedule 1)				
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind commution description (if-applicable)				
06/09/2014	Contributor address; City; State; Zip Code 9500A Live Oak Lane Fort Worth, TX 76179		\$90.00	17 17 17 17 17 17 17 17 17 17 17 17 17 1				
			(If travel outside of	Texas, complete Schedule T)				
Principal occup	Leation / Job title (See Instructions)	Employer (See In:		Texas, complete schedule 1)				

1701 S. Cherry Lane Fort Worth, TX 76108

Candidate / Officeholder name

Event Expense

Category (See Categories listed at the top of this schedule)

\$40.01

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

P.O.Box 12070

SCHEDULE F

Advertising Exper Accounting/Banki Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Coning Legal Services Solicitation/Fundraisi Travel In District Polling Expense Printing Expense Printing Expense The Instruction Guide explains how to	Solicitation/Fundraising Expense Transportatio				
1 PAGE# Schedule: 1/17 R	eport: 44/60 2 FILER NAME Johnson, J. D. (Mr.)		3 ACCOUNT # (TEC filers) 00000001			
4 Date 06/27/2014	5 Payee name 1st Place Signs					
\$ Amount (\$) \$348.57	7 Payee address City; State; Zip Code 12621 North Saginaw Blvd #109 Fort Worth, TX 76179	ao	Z2			
B PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside Signs for Golf Tournamen	of Texas, complete Schedule T)			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name		The same			
04/30/2014	Above Par Promotions		20			
Amount (\$)	Payee address City; State; Zip Code		£ 0			
\$501.82	2222 West Spring Creek Parkway Plano, TX 75023		1			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside Hole in One Prizes for Go	of Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name					
05/09/2014	Academy Sports & Outdoors					
Amount (\$) \$79.92	Payee address City; State; Zip Code 1701 S. Cherry Lane Fort Worth, TX 76108					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Supplies for Golf Tournam				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:			
Date	Payee name					
05/19/2014	Academy Sports & Outdoors					
Amount (\$)	Payee address City; State; Zip Code					

Description

Office sought:

(If travel outside of Texas, complete Schedule T)

Office held:

Supplies for Golf Tournament Fundraiser

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
sinse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Johnson, J. D. (Mr.) Schedule: 2/17 Report: 45/60 0000001 4 Date 5 Payee name Ann's Donuts 06/02/2014 6 Amount (\$) Payee address City; State; Zip Code \$207.90 4450 Boat Club Road Fort Worth, TX 76135 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Breakfast for Golf Tournament Fundraiser OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office helds direct expenditure to benefit C/OH Date Payee name Awesome Blossoms 01/07/2014 Amount (\$) Payee address City; State; Zip Code 100 S. Hampshire Street \$20.00 Saginaw, TX 76179 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Sympathy Arrangement from Commissioners Court OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Awesome Blossoms 02/10/2014 Amount (\$) Payee address City; State; Zip Code 100 S. Hampshire Street \$534.84 Saginaw, TX 76179 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Various Flowers for Constituents EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 02/20/2014 Awesome Blossoms Amount (\$) Payee address City; State; Zip Code 100 S. Hampshire Street \$20.00 Saginaw, TX 76179 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Gifts/Awards/Memorials Expense Funeral Arrangement for Commissioners Court OF **EXPENDITURE** Candidate / Officeholder name Office held: Complete ONLY if Office sought:

SCHEDULE F

EXPENDI.	TI IDE	^ A TE/	SODIES
EXPEND	IURE	- 4 1 - 1	-URIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Politing Expense Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Johnson, J. D. (Mr.) Schedule: 3/17 Report: 46/60 00000001 Date 5 Payee name Awesome Blossoms 03/03/2014 6 Amount (\$) Payee address City; State; Zip Code \$269.75 100 S. Hampshire Street Saginaw, TX 76179 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Various Flowers for Constituents **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Awesome Biossoms 04/11/2014 Amount (\$) Payee address City: State: Zip Code 100 S. Hampshire Street \$65.08 Saginaw, TX 76179 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Gifts/Awards/Memorials Expense Arrangement for Constituent OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name Awesome Blossoms 05/05/2014 Amount (\$) Payee address City; State; Zip Code 100 S. Hampshire Street \$376.38 Saginaw, TX 76179 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Various Flowers for Constituents OF **EXPENDITURE** Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Awesome Blossoms 06/02/2014 Amount (\$) Payee address City; State; Zip Code 100 S. Hampshire Street \$20.00 Saginaw, TX 76179 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Arrangement from Commissioners Court Gifts/Awards/Memorials Expense EXPENDITURE Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure

SCHEDULE F

Advertising Expense	Gifts/Awards/Me
Accounting/Banking	Legal Services
Consulting Expense	Food/Beverage
Frank France	Delline Frances

emorial Expense Expense

Candidate / Officeholder name

Price, Betsy (Hon.)

Complete ONLY if direct expenditure

to benefit C/OH

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 2 FILER NAME PAGE# 3 ACCOUNT # (TEC filers) Johnson, J. D. (Mr.) Schedule: 4/17 Report: 47/60 00000001 5 Payee name Date Awesome Blossoms 06/04/2014 6 Amount (\$) City; State; Zip Code Payee address 100 S. Hampshire Street \$157.08 Saginaw, TX 76179 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Gifts/Awards/Memorials Expense Various Flowers for Constituents Ď 0.50 EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **Azle News** 04/14/2014 City: State: 633 Amount (\$) Pavee address Zip Code 321 West Main \$26.00 Azle, TX 76020 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Ad OF **EXPENDITURE** Office held: Candidate / Officeholder name Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Benchmark Graphics 05/15/2014 City; State; Zip Code Amount (\$) Payee address 12775 Business 287 North \$3,583.08 Fort Worth, TX 76179 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense **Printing** OF **EXPENDITURE** Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Betsy Price Campaign 01/23/2014 Amount (\$) Payee address City; State; Zip Code Post Office Box 10066 \$100.00 Fort Worth, TX 76185 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee **EXPENDITURE** Office held:

City of Fort Worth Mayor

Office sought:

City of Fort Worth Mayor

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out Of Dis Printing Expense Office Overhead/ The Instruction Guide explains hor	Rental Expense OTHER (ente	Officeholder/Political Committee r a category not listed above)
1 PAGE#	2 FILER NAME	·	3 ACCOUNT # (TEC filers)
Schedule: 5/17 R	eport: 48/60 Johnson, J. D. (Mr.)		0000001
4 Date	5 Payee name	***	
02/13/2014	Boswell Baseball Booster Club		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$50.00	500 Cherry Tree Court		% EE 23 -
·	Saginaw, TX 76179		7011 70111
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	1	of Texas, complete Schedule T)
OF	Advertising Expense	Ad in 2014 Boswell Base	
EXPENDITURE		·	
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure		3.1.3.3 GOOG. N.	And the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second o
to benefit C/OH			and the same
Date	Payee name	To the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th	Comp.
05/14/2014	Boswell Booster Club		
Amount (\$)	Payee address City; State; Zip Code	ı	ŧ
\$100.00	5805 West Bailey Boswell Road Fort Worth, TX 76179		
	Tott vvoidi, TX 70179		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Contribution	sor rexas, complete constant ()
OF	Candidate/Officeholder/Political Committee	Contribution	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
	Davis nems		
Date 05/05/2014	Payee name Boswell Quaterback Club		
Amount (\$)	Payee address City; State; Zip Code		
` ′	5432 Thornbush Drive		
\$150.00	Fort Worth, TX 76179		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Ad Football Program	_
OF EXPENDITURE			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
05/21/2014	Brookshires		
Amount (\$)	Payee address City; State; Zip Code		
\$1,644.53	6708 Lake Worth		
7.,5100	Lake Worth, TX 76135		
DUBBOOF	Category (See Categories listed at the top of this schedule)	· · ·	e of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	Beverages for Golf Tourr	nament Fundraiser
EXPENDITURE			
Complete ONLY 2	Candidate / Officeholder name	Office sought:	Office held:
Complete ONLY if direct expenditure	Candidate / Officeriolder flattle	Onice sought.	Onico riciu.
to benefit C/OH	I		

SCHEDULE F

EVDE	MOIT	IDE	~ 4 7	ARIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense DE explains how to complete

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 EXPIRITIS HO	w to complete this form.
1 PAGE#	2 FILER NAME Poort: 49/60 Johnson, J. D. (Mr.)	3 ACCOUNT# (TEC filers)
Schedule: 6/17 F	Sport: 10/00	0000001
4 Date	5 Payee name	
06/13/2014	C. D. Hartnett	P#1
6 Amount (\$)	7 Payee address City; State; Zip Code	X: E
\$437.93	4151 Blue Mound Road	ECTION THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE O
	Fort Worth, TX 76106	
		6. 2 m
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas complete Schedule I)
OF	Food/Beverage Expense	Food for Golf Tournament Fundraiser
EXPENDITURE		
		(0.0)
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		# 5 ~
Date	Payee name	
05/28/2014	Cactus Cap Company	
		7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Amount (\$)	Payee address City; State; Zip Code	
\$9,342.00	486 PR 2393 Alvord, TX 76225	
	Alvoid, IX 10220	
	0-4	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Event Expense	Shirts and Caps for Golf Tournament Fundraiser
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office coughts Office holds
Complete ONLY if direct expenditure	Candidate / Officenoider name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
06/19/2014	Cactus Cap Company	
Amount (\$)	Payee address City; State; Zip Code	
\$609.00	486 PR 2393	
Ψ003.00	Alvord, TX 76225	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Event Expense	Shirts for Golf Tournament Fundraiser
OF EXPENDITURE		
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		•
to benefit C/OH		
Date	Payee name	
03/12/2014	Core 24, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$150.00	4207 Herschel Ave	
	Dallas, TX 75219	
DUBBOOS	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Event Expense	Two Tickets to Fort Worth Admin Awards Luncheon
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above) Office Overhead/Rental Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Johnson, J. D. (Mr.) Schedule: 7/17 Report: 50/60 0000001 Date Payee name Department of the Treasury 02/28/2014 Payee address City; State; Zip Code 6 Amount (\$) LECTIV Internal Revenue Service \$301.00 3 Austin, TX 76601 7 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** OTHER - Taxes Taxes OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Dynamic Brands 04/11/2014 Pavee address City: State: Zip Code Amount (\$) 2701 Emerywood Pkwy \$1,080.00 Suite #101 Richmond, VA 23294 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE Event Expense** Golf Tournament Fundraiser Expense OF **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date Elks Fort Worth #124 02/13/2014 Amount (\$) Payee address City; State; Zip Code 3233 White Settlement Road \$129.50 Fort Worth, TX 76107 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OTHER - Membership Dues Membership Dues OF EXPENDITURE Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 01/23/2014 Fort Worth Cops For Kids City; State; Zip Code Amount (\$) Payee address 904 Collier Street \$500.00 Fort Worth, TX 76102 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Bronze Sponsorship **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Printing Expense Travel Out of Die Office Overhead, The Instruction Guide explains hor	Rental Expense OTHER (enter	Officeholder/Political Committee r a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 8/17 F	Report: 51/60 Johnson, J. D. (Mr.)		00000001 (TEC filers)
4 Date	5 Payee name		1 00000001
03/06/2014	Fort Worth Hispanic Chamber of Commerce		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$175.00		্র	
\$170.00	Fort Worth, TX 76164	3	TAR 2014.
		1	3. 3
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Texas, complete Schedule T)
PURPOSE OF	OTHER - Membership Dues	Membership Dues	
EXPENDITURE			
			1 == 2 20
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		0 0
04/17/2014	Fort Worth Hispanic Chamber of Commerce		9
Amount (\$)	Payee address City; State; Zip Code		b
\$250.00	1327 North Main Street		
\$250.00	Fort Worth, TX 76164		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	OTHER - Membership Dues	Membership Dues	
OF EXPENDITURE	·	·	
EXI ENDITORE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
	Payeo namo		
Date 04/11/2014	Payee name Girls Inc.		
Amount (\$)	Payee address City; State; Zip Code		
,	2100 North Main Street		
\$100.00	Suite #214		
	Fort Worth, TX 76164		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Donation	.,,,
OF EXPENDITURE	Candidate/Officeholder/Political Committee		
ZXI ZITOITORE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
06/30/2014	Green Machine Booster Club		
Amount (\$)	Payee address City; State; Zip Code		
1 '''	Post Office Box 136112		
\$150.00	Fort Worth, TX 76136		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Ad Fall Athletic Program	
OF EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Johnson, J. D. (Mr.) Schedule: 9/17 Report: 52/60 00000001 Date 5 Payee name 06/18/2014 Ice Express ... ∀: 6 Amount (\$) Payee address State; Zip Code City; TARR 6387 B Camp Bowie Box #257 \$156.95 Fort Worth, TX 76116 (b) Description (If travel outside of Texas, complete (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE Event Expense** Ice for Golf Tournament Fundraiset OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 02/14/2014 Kay Granger Campaign Amount (\$) Payee address City: State: Zip Code 715 Jones Street \$200.00 Suite #101 Fort Worth, TX 76102 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Contributions/Donations Made By Host Sponsor for Annual Fundraiser OF Candidate/Officeholder/Political Committee **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Granger, Kay (Hon.) U. S.Congresswoman District 12 U.S. Congresswoman District 12 Date Payee name Lone Star Banners & Flags 04/28/2014 Amount (\$) Payee address City; State; Zip Code 212 South Main Street \$166.71 Fort Worth, TX 76104 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense Bunting for Golf Tournament Fundraiser** OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Moslah Shrine Temple 05/14/2014 Amount (\$) Payee address City; State; Zip Code Post Office Box 1320 \$160.00 Fort Worth, TX 76101 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Program Ad Advertising Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political

Fees		Expense Off	ice Overhead/Rental Expense explains how to complete	OTHER (enter	a category not listed above)
1 PAGE#	7	2 FILER NAME	Apianio noti to completo	1.110 101111.	3 ACCOUNT# (TEC filers)
Schedule: 10/17	Report: 53/60	Johnson, J. D. (Mr.)			00000001 (TEC IIIers)
4 Date	5 Payee name		*****		1 00000001
01/23/2014	l -	hamber of Commerce			
6 Amount (\$)	7 Payee addres	s City; State; Zip (Code		
\$225.00	l * *		5040	· · · · · · · · · · · · · · · · · · ·	8 5 3
Ψ223.00	Fort Worth,	TX 76135		· ·	TO E ST
				€ 6 4	52 - 37
8	1	e Categories listed at the top of this s	' ' ' '		of Texas, complete Schedule T)
PURPOSE		s/Donations Made By Officeholder/Political Committe	Award	ds Banquet Bronze S	Sponsorship 😁
EXPENDITURE	Candidate/C	micenoider/Political Committe	•		
O Complete ONLY 8	Condidate / C	Afficabalder name		for cought:	
9 Complete ONLY if direct expenditure	Candidate / C	officeholder name	Off	fice sought:	Office held:
to benefit C/OH					1 3
Date	Payee name				
02/28/2014	Northwest C	hamber of Commerce			
Amount (\$)	Payee addres	s City; State; Zip (Code		
\$85.00	3918 Teleph	none Road			
	Fort Worth,	IX /6135			
	_				
PURPOSE	• • • •	e Categories listed at the top of this s	,		of Texas, complete Schedule T)
OF		s/Donations Made By officeholder/Political Committe		ibution	
EXPENDITURE	Oandidate/C	Miceriolden Gillical Committe			
Complete ONLY if	Candidate / C	Officeholder name	I	fice sought:	Office held:
direct expenditure	Candidate / C	miceriolder name	Oil	noe sought.	Office field.
to benefit C/OH					
Date	Payee name				
05/29/2014	Northwest C	chamber of Commerce	***		
Amount (\$)	Payee addres	ss City; State; Zip (Code		
\$120.00	3918 Teleph				
	Fort Worth,	IX /6135			
	0-1	A		-41	
PURPOSE		e Categories listed at the top of this se embership Dues		•	of Texas, complete Schedule T)
OF	OTHER-IN	embership Dues	Memb	ership Dues	
EXPENDITURE					
Complete ONLY if	Candidate / C	officeholder name	IOff	fice sought:	Office held:
direct expenditure to benefit C/OH		- · · · · ·	•		
	<u> </u>				
Date	Payee name	7ACA			
02/13/2014	Northwest Y				
Amount (\$)	Payee addres	• • • •	Doge		
\$150.00	5315 Boat C Fort Worth,				
	l or vvoidi,	17, 10100			
	Category (Se	e Categories listed at the top of this s	chedule) Descri	ntion (If travel outside	of Texas, complete Schedule T)
PURPOSE		e categories listed at the top of this s is/Donations Made By	· •	for Youth Sponsor	
OF		Officeholder/Political Committe	e '''''		
EXPENDITURE			j		
Complete ONLY if	Candidate / C	Officeholder name	Off	fice sought:	Office held:
direct expenditure to benefit C/OH					

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expel Event Expense Fees	ing Legal Services . Solicitation/Fundrais	ntract Labor Loan Rep sing Expense Transport Contribution ct Candid ental Expense OTHER (e	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee enter a category not listed above)
1 PAGE # Schedule: 11/17	Report: 54/60 2 FILER NAME Johnson, J. D. (Mr.)		3 ACCOUNT# (TEC filers) 00000001
4 Date	5 Payee name Plaque World		
04/28/2014 6 Amount (\$) \$606.20	7 Payee address City; State; Zip Code 611 University Drive Fort Worth, TX 76107		TARRIT
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		tside of Texas, complete Schedule T) E olf Tournament Fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 04/30/2014	Payee name Relay for Life Northwest		
Amount (\$)	Payee address City; State; Zip Code		3
\$500.00	3301 West Freeway Fort Worth, TX 76107		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel ou Bronze Sponsor Even	tside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/05/2014	Sagiinaw High School Athletic Booster Club Payee address City; State; Zip Code	<u> </u>	
Amount (\$) \$220.00	11052 Fernbury Drive Fort Worth, TX 76179		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel ou Ad Fall Sports Prograt	tside of Texas, complete Schedule T) M
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 01/23/2014	Payee name Saginaw Area Chamber of Commerce		
Amount (\$)	Payee address City; State; Zip Code		
\$400.00			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel ou Awards Banquet Silve	tside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

direct expenditure to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Travel Out Of District Office Overhead/Rental Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Johnson, J. D. (Mr.) Schedule: 12/17 Report: 55/60 0000001 4 Date 5 Payee name 02/12/2014 Saginaw Lions Club 6 Amount (\$) Payee address City; State; Zip Code \$500.00 Post Office Box 79099 Saginaw, TX 76179 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas. complete Schedule **PURPOSE** Contributions/Donations Made By Health Fair Sponsor OF 5 Candidate/Officeholder/Political Committee EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 0 Sam's Wholesale Club 03/05/2014 Amount (\$) Payee address City; State; Zip Code 6760 Westworth Blvd. \$244.53 Fort Worth, TX 76114 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Memorial for Constituent OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name Sam's Wholesale Club 05/09/2014 Amount (\$) Payee address City; State; Zip Code 6760 Westworth Blvd. \$649.46 Fort Worth, TX 76114 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Event Expense Supplies for Golf Tournament Fundraiser OF **EXPENDITURE** Candidate / Officeholder name Office sought: Complete ONLY if Office held: direct expenditure to benefit C/OH Date Pavee name Sam's Wholesale Club 06/13/2014 Payee address City; State; Zip Code Amount (\$) 6760 Westworth Blvd. \$954.44 Fort Worth, TX 76114 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Food/Beverage Expense Supplies for Golf Tournament Fundraiser OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category political Committee)

	The Instruction Guide explains hor	w to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 13/17	Report: 56/60 Johnson, J. D. (Mr.)	0000001
4 Date	5 Payee name	
06/30/2014	Sam's Wholesale Club	
6 Amount (\$)	7 Payee address City; State; Zip Code	æ <u>m</u> 2
\$211.40	6760 Westworth Blvd. Fort Worth, TX 76114	ELEC: TAI
	Folt Worth, 12 76114	TARA OH JU
	(a) Catagory (2)	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Lvent Expense	Supplies for Golf Tournament Fundraiser
EXPENDITURE		And the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:-
direct expenditure to benefit C/OH		
		The second
Date	Payee name	
01/13/2014	Staples	1
Amount (\$)	Payee address City; State; Zip Code	
\$4.42	6313 Lake Worth Blvd Lake Worth, TX 76135	
	Lake Worth, 12 70133	
	Cotomoni (Oca Cotomonia linta de Martin antidada)	Description (ff.)
PURPOSE	Category (See Categories listed at the top of this schedule) OTHER - Campaign Supplies	Description (If travel outside of Texas, complete Schedule T) Campaign Supplies
OF	OTTIER - Campaign Supplies	Campaign Supplies
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		, and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second
Date	Payee name	
01/22/2014	Staples Staples	
Amount (\$)	Payee address City; State; Zip Code	
\$168.90	6313 Lake Worth Blvd Lake Worth, TX 76135	
	Edito Fieldi, 170 Feb.	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Event Expense	Supplies for Golf Tournament Fundraiser
OF EXPENDITURE		Cappino ioi con roumamonti ancicio.
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	Daves name	
Date 03/13/2014	Payee name Staples	
Amount (\$)	Payee address City; State; Zip Code	
` ,	, , , , , , , , , , , , , , , , , , ,	
\$234.53	Lake Worth, TX 76135	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Campaign Supplies	Campaign Supplies
OF EXPENDITURE]	
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Polling 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)

1 665	The Instruction Guide explains how	
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 14/17	Report: 57/60 Johnson, J. D. (Mr.)	0000001
4 Date	5 Payee name	
04/30/2014	Staples	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$328.59	6313 Lake Worth Blvd	TE ZI
	Lake Worth, TX 76135	ELECT.
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule-T)
PURPOSE	Event Expense	Supplies for Golf Tournament Fundrasier
OF EXPENDITURE		1 5 5 5 Tm
EXI ENDITORE		
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held
to benefit C/OH		
Date	Payee name	5 0
05/09/2014	Staples	5 0
Amount (\$)	Payee address City; State; Zip Code	
\$34.38	6313 Lake Worth Blvd	
	Lake Worth, TX 76135	
PURPOSE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Supplies for Golf Tournament Fundraiser
OF	Event Expense	Supplies for Soil Tournament Fundraise
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
06/06/2014	Staples	
Amount (\$)	Payee address City; State; Zip Code	
\$32.02	6313 Lake Worth Blvd	
	Lake Worth, TX 76135	
	0.0	I Bereitier Western II
PURPOSE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) Supplies for Golf Tournagment Fundraiser
OF	Event Expense	Supplies for Son Yournaymone Fundament
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
02/10/2014	Star Telegram	
Amount (\$)	Payee address City; State; Zip Code	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
\$275.08	Post Office Box 901030	
,	Fort Worth, TX 76101	
		D. dati
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	OTHER - Newspaper Subscription	Newspaper Subscription
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Politing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/ The Instruction Guide explains how	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	
Schedule: 15/17	1 ⁻	3 ACCOUNT# (TEC filers)
4 Date	5 Payee name	00000001
05/23/2014	Suburban Newspapers	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$192.00	7820 Wyatt Drive	
,	Fort Worth, TX 76108	
		a F 78 - 1
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Advertising Expense	Ads TS E ST
EXPENDITURE		G - man
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
05/09/2014	The Golf Club at The Resort	
Amount (\$)	Payee address City; State; Zip Code	
\$79.80		1
\$10.00	Fort Worth, TX 76179	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Event Expense	Golf Tournament Fundraiser Expense
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
06/11/2014	The Golf Club at The Resort	
Amount (\$)	Payee address City; State; Zip Code	
\$223.27	5700 The Resort Blvd.	
•	Fort Worth, TX 76179	
		Description (Manual autida of Taura annulus Cabadada 7)
PURPOSE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T)
OF	Event Expense	1 of Con Tournament and also
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
02/19/2014	Tidwell, Scooter	
Amount (\$)	Payee address City; State; Zip Code	
\$150.00	Post Office Box 1591	
	Azle, TX 76098	
	Cotogony (See Cotogogica listed at the top of this cot of the	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Rodeo Sponsor
OF EXPENDITURE	Candidate/Officeholder/Political Committee	
EAFERDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	The Instruction Guide explains how	w to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filers)
Schedule: 16/17	Report: 59/60 Johnson, J. D. (Mr.)	0000001
4 Date	5 Payee name	
02/19/2014	Tidwell, Scott III	
6 Amount (\$)	7 Payee address City; State; Zip Code	. 2
\$100.00	Post Office Box 1591	#Y: 178
	Azle, TX 76098	TARRAN 2014 JUL ELECTIO EY:
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule 7)
OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Contribution to Anite Allen Benefit
EXPENDITURE		를 고 있 ^다
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Garagate / Cincerbider Harrie	Office adugnit.
to benefit C/OH		
Date	Payee name	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
04/10/2014	U.S. Postmaster	. \
Amount (\$)	Payee address City; State; Zip Code	
\$490.00	3930 Telephone Road	
	Fort Worth, TX 76135	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	OTHER - Postage	Postage
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
05/05/2014	U.S. Postmaster	
Amount (\$)	Payee address City; State; Zip Code	
\$1.47	3930 Telephone Road Fort Worth, TX 76135	
	Polit World, 12 70133	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Postage	Postage
OF	O THERE'S Obtage	1 001490
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		•
Date	Payee name U.S. Postmaster	
05/21/2014		
Amount (\$)	Payee address City; State; Zip Code	
\$47.83	3930 Telephone Road Fort Worth, TX 76135	
	Toleriolal, terroros	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Postage	Postage
OF EXPENDITURE	3	
EXPENDITORE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense Foes Advertising Expense Consulting Expense Consulting Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense Food/Beverage Ex			sportation Equipment & Related Expense tributions/Donations Made By
	The Instruction Guide explains how to	complete this form.	
1 PAGE#	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 17/17			0000001
4 Date 05/23/2014	5 Payee name U.S. Postmaster		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$17.99	3930 Telephone Road Fort Worth, TX 76135		20 T
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If trav	el outside of Texas, complete Schedule II)
PURPOSE OF EXPENDITURE	OTHER - Postage	Postage	15 TE TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/30/2014	U.S. Postmaster		
Amount (\$)	Payee address City; State; Zip Code		
\$14.60	3930 Telephone Road Fort Worth, TX 76135		Į
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Postage	Description (If trav Postage	el 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		
06/16/2014	U.S. Postmaster		
Amount (\$) \$19.42	Payee address City; State; Zip Code 3930 Telephone Road		
V10.12	Fort Worth, TX 76135		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Postage	Description (If trav Postage	el outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
·			