

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed:

19

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR Mr FIRST Clifford MI M  
NICKNAME LAST SUFFIX  
Matt Hayes

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

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

change of address

5 CANDIDATE / OFFICEHOLDER PHONE

6 CAMPAIGN TREASURER NAME

MS / MRS / MR Ms FIRST Lac MI  
NICKNAME LAST SUFFIX  
Ha

OFFICE USE ONLY

Date Received: 2014 FEB 24  
Date Hand-delivered or Postmarked:  
Receipt #: Amount  
Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (residence or business)

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

8 CAMPAIGN TREASURER PHONE

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)  
July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year 01 / 24 / 2014 THROUGH Month Day Year 02 / 22 / 2014

11 ELECTION

ELECTION DATE: Month Day Year 03 / 04 / 2014  
ELECTION TYPE: Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)  
Justice of the Peace Precinct 7, Tarrant County

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

*Matt Hayes*

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

*D&W Conservative Voters PAC*

COMMITTEE ADDRESS

*P.O. Box 173065  
Arlington, TX 76003*

COMMITTEE CAMPAIGN TREASURER NAME

*Stuart Lane*

COMMITTEE CAMPAIGN TREASURER ADDRESS

*Unknown*

FILED  
TARRANT COUNTY  
2014 FEB 24 AM 10:59  
STEVE DALTON  
ELECTIONS ADMINISTRATOR

additional pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ *597<sup>00</sup>*

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ *19,087<sup>83</sup>*

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ *99<sup>03</sup>*

4. TOTAL POLITICAL EXPENDITURES

\$ *1666<sup>57</sup>*

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

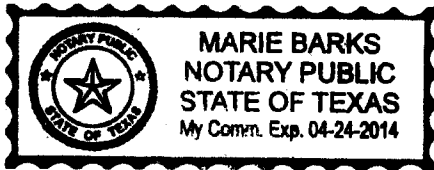
\$ *7876<sup>84</sup>*

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ *5000<sup>00</sup>*

18 AFFIDAVIT



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

*Matt Hayes*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Matt Hayes*, this the *24th* day of *February*, 20 *14*, to certify which, witness my hand and seal of office.

*Marie Barks*

*Marie Barks*

*Constable Clerk*

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1 of 14</i>	
2 FILER NAME <i>Matt Hayes</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/29/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bill Zedler</i>	7 Amount of contribution (\$) <i>100</i>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <i>5502 Hidden Trails Dr Arlington, TX 76017</i>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kimberly Fitzpatrick &amp; Ryan Gruber</i>	Amount of contribution (\$) <i>3233.89</i>	In-kind contribution description (if applicable) <i>food, drinks, valets, decorative dj list</i>
	Contributor address; City; State; Zip Code <i>2806 Katherine Ct Arlington TX 76016</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/29/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gregory Ritchie</i>	Amount of contribution (\$) <i>150</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>2202 Woodmont Ct Arlington TX 76017</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rosie Berdeja</i>	Amount of contribution (\$) <i>100</i>	In-kind contribution description (if applicable) <i>DJ</i>
	Contributor address; City; State; Zip Code <i>3245 Winding Ridge Cir Mansfield TX 76063</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/30/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Monty Goddard</i>	Amount of contribution (\$) <i>100</i>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <i>1301 Fairfax Mansfield TX 76063</i>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

FILED  
 TARRANT COUNTY  
 2014 FEB 24 AM 10:33  
 ELECTIONS ADMINISTRATION

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **2 of 14**

2 FILER NAME

**Matt Hayes**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**1/31/14**

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

**David Cook**

6 Contributor address; City; State; Zip Code

**709 E Abram  
Arlington TX 76010**

7 Amount of contribution (\$)

**\$305<sup>99</sup>**

8 In-kind contribution description (if applicable)

**Postage**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**1/31/14**

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

**Bush, Rudnicki, Shelton PC**

Contributor address; City; State; Zip Code

**4025 Woodlark Park Blvd  
Ste 190  
Arlington, TX 76013**

Amount of contribution (\$)

**\$100<sup>00</sup>**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**1/31/14**

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

**Constance Hall**

Contributor address; City; State; Zip Code

Amount of contribution (\$)

**\$120<sup>00</sup>**

In-kind contribution description (if applicable)

**Breakfast basket**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**1/31/14**

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

**TRE PAC**

Contributor address; City; State; Zip Code

**PO Box 2246  
Austin TX 78768**

Amount of contribution (\$)

**\$500<sup>00</sup>**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**1/31/14**

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

**Sarah Chrystie**

Contributor address; City; State; Zip Code

Amount of contribution (\$)

**\$50<sup>00</sup>**

In-kind contribution description (if applicable)

**Scented basket**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **3 of 14**

2 FILER NAME

*Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

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

*Rickie Merritt*

7 Amount of contribution (\$)

*\$200<sup>00</sup>*

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

*3009 Iron Stone Ct  
Arlington 76006*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

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

*Samantha Baxley*

Amount of contribution (\$)

*\$185<sup>00</sup>*

In-kind contribution description (if applicable)

*Nerium Basket*

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Don Klick*

Amount of contribution (\$)

*\$100<sup>00</sup>*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*8450 Trace Ridge Pkwy  
Ft Worth, TX 76137*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Kevin Walker*

Amount of contribution (\$)

*\$150<sup>00</sup>*

In-kind contribution description (if applicable)

*Craft Beer basket*

Contributor address; City; State; Zip Code

*2000 E. Lamar Blvd  
Arlington, TX 76006*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Larry Kaufman*

Amount of contribution (\$)

*\$120<sup>00</sup>*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*4405 Marwick Dr  
Arlington TX 76016*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

FILED  
 WARRANT COUNTY  
 FEB 24 AM 10:39  
 STEVE A. HORN  
 CLERK  
 COMMISSIONERS AND ADMINISTRATORS

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>4 of 14</i>	
2 FILER NAME <i>Matt Hayes</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/31/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jennifer Medina</i>	7 Amount of contribution (\$) <i>\$370<sup>00</sup></i>	8 In-kind contribution description (if applicable) <i>Body Wrap &amp; Wellness basket</i>
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charles Crook</i>	Amount of contribution (\$) <i>\$250<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7716 Gibson Cemetery Rd Mansfield TX 76063</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Karen Schroeder</i>	Amount of contribution (\$) <i>\$500<sup>00</sup></i>	In-kind contribution description (if applicable) <i>Wine Package</i>
Contributor address; City; State; Zip Code <i>309 E Broad St #201 Mansfield TX 76063</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Erica Ramsey Brown</i>	Amount of contribution (\$) <i>\$300<sup>00</sup></i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1213 Greenbriar Ln Arlington TX 76013</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rosie Berjeda</i>	Amount of contribution (\$) <i>150<sup>00</sup></i>	In-kind contribution description (if applicable) <i>Liquor basket</i>
Contributor address; City; State; Zip Code <i>3245 Winding Ridge Cir Mansfield TX 76063</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

FILED  
 FEB 21 11:00 AM  
 STEVE RAYSON  
 CLERK  
 ETHICS COMMISSION  
 1100 N. BRANTFORD  
 AUSTIN, TEXAS 78701

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>5 of 14</i>	
2 FILER NAME <i>Matt Hayes</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/31/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mireya Torres</i>	7 Amount of contribution (\$) <i>\$600.00</i>	8 In-kind contribution description (if applicable) <i>FILED 2014 FEB 24 ELECTIONS ADMINISTRATION</i>
6 Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephanie &amp; Clint / Texas Fit</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) <i>Gym Membership &amp; Hair Salon Service</i>
Contributor address; City; State; Zip Code <i>1523 S Bowen Rd Pantego TX 76013</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Raul Gonzalez</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2211 Woodmontet Arlington TX 76017</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Thornton</i>	Amount of contribution (\$) <i>\$240.00</i>	In-kind contribution description (if applicable) <i>Botox Treatment</i>
Contributor address; City; State; Zip Code <i>550 N Walnut Creek, Ste 120 Mansfield TX 76063</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andy Nguyen</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 151272 Arlington TX 76015</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A  
 ELECTIONS  
 FEBRUARY 15, 2014  
 STATE OF TEXAS  
 ETHICS COMMISSION

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>6 of 154</b>	
2 FILER NAME <i>Matt Hayes</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/31/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Irving Chiropractic &amp; Wellness</i>	7 Amount of contribution (\$) <i>\$200.00</i>	8 In-kind contribution description (if applicable) <i>Massages</i>
6 Contributor address; City; State; Zip Code <i>850 W John Carpenter Hwy Irving, TX 75039</i>		(If travel outside of Texas, complete Schedule T)	

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

Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chander Fozard</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1808 Spice wood Tr Ft Worth TX 76134</i>		(If travel outside of Texas, complete Schedule T)	

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

Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dianna &amp; James Sellers</i>	Amount of contribution (\$) <i>\$120.00</i>	In-kind contribution description (if applicable) <i>spotting scope kit</i>
Contributor address; City; State; Zip Code <i>2201 Heritage Pkwy Mansfield TX 76063</i>		(If travel outside of Texas, complete Schedule T)	

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

Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>J Austin</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>714 E. Division St Arlington TX 76011</i>		(If travel outside of Texas, complete Schedule T)	

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

Date <i>1/31/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Cook</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) <i>Bonnells Gift Card</i>
Contributor address; City; State; Zip Code <i>709 E Abram Arlington TX 76010</i>		(If travel outside of Texas, complete Schedule T)	

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

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



**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY

**SCHEDULE A**

2014 FEB 24 AM 10:40

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **7 of 14**

2 FILER NAME

*Matt Hayes*

STEVE MADON  
ELECTIONS ADMINISTRATOR  
3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

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

*Jennifer Cellmer*

7 Amount of contribution (\$)

*\$500.00*

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
*1506 Meadowcrest  
Mansfield TX 76063*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

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

*Mark Angerbauer*

Amount of contribution (\$)

*\$800.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
*6451 Brentwood stair Rd  
Ft Worth, TX 76112*

*His & Hers  
X-rays, Exams  
Whitening Kit*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Warren Norred*

Amount of contribution (\$)

*\$150.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
*2707 Yorkfield Ct  
Arlington TX 76001*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Rosey Cipolla*

Amount of contribution (\$)

*\$300.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
*3529 Bilglade  
Ft Worth TX 76133*

*Dog Gift  
basket*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Texas Walk-in & Urgent Care*

Amount of contribution (\$)

*\$250.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
*6407 S. Cooper St  
#117  
Arlington TX 76001*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY  
2014 FEB 24 AM 10:40

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **8 of 14**

2 FILER NAME

*Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

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

*Banji Arslanovski*

6 Contributor address; City; State; Zip Code

*915 W. Debbie Ln  
Mansfield TX 76063*

7 Amount of contribution (\$)

*\$4000*

8 In-kind contribution description (if applicable)

*Our Place Gift Cards*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

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

*Rosie Cipolla*

Contributor address; City; State; Zip Code

*3529 Bilglade  
Ft Worth TX 76133*

Amount of contribution (\$)

*\$10000*

In-kind contribution description (if applicable)

*BB/Pellet Gun & Ammo*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Mark Henning*

Contributor address; City; State; Zip Code

*2620 W Fray  
Ft Worth, TX 76102*

Amount of contribution (\$)

*\$8500*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Lisa Randol*

Contributor address; City; State; Zip Code

*1219 E Debbie Ln #115  
Mansfield TX 76063*

Amount of contribution (\$)

*5000*

In-kind contribution description (if applicable)

*Lashes Mani/Pedi*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Vicki Perdue*

Contributor address; City; State; Zip Code

*420 Country Meadow  
Mansfield TX 76063*

Amount of contribution (\$)

*7000*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY SCHEDULE A

2014 FEB 24 AM 10:40

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: *9 of 14*

2 FILER NAME

*Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

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

*Clint Burgess*

6 Contributor address; City; State; Zip Code  
*1100 E Broad St #201  
Mansfield TX 76063*

7 Amount of contribution (\$)

*\$500.00*

8 In-kind contribution description (if applicable)

*Helicopter Ride*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

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

*Atziri Cardoza-Hernandez*

Contributor address; City; State; Zip Code

Amount of contribution (\$)

*\$1000*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Kelly Carnatt*

Contributor address; City; State; Zip Code  
*505 S Fielder  
Arlington TX 76013*

Amount of contribution (\$)

*\$500*

In-kind contribution description (if applicable)

*Car Place  
Gift Cards*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Joshua Stoval*

Contributor address; City; State; Zip Code

Amount of contribution (\$)

*\$2100*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

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

*Rosie Berdeja*

Contributor address; City; State; Zip Code  
*3245 Winding Ridge Ln  
Mansfield TX 76063*

Amount of contribution (\$)

*\$200*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY

**SCHEDULE A**

2014 FEB 24 AM 10:40

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

10 of 14

2 FILER NAME

*Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

5 Full name of contributor  out-of-state PAC (ID#:

*Clint Burgess*

7 Amount of contribution (\$)

*\$260<sup>00</sup>*

8 In-kind contribution description (if applicable)

*4 Rangers Tickets*

6 Contributor address; City; State; Zip Code

*1100 E Broad St #201  
Mansfield TX 76063*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

Full name of contributor  out-of-state PAC (ID#:

*Kelly Carnatt*

Amount of contribution (\$)

*\$750<sup>00</sup>*

In-kind contribution description (if applicable)

*Helicopter Ride for 4*

Contributor address; City; State; Zip Code

*505 S. Fielder  
Arlington TX 76013*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

Full name of contributor  out-of-state PAC (ID#:

*Adlai Pennington*

Amount of contribution (\$)

*\$400<sup>00</sup>*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*1375 Gilman Rd  
Ft Worth TX 76140*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/31/14*

Full name of contributor  out-of-state PAC (ID#:

*Karen Schroeder*

Amount of contribution (\$)

*\$75<sup>00</sup>*

In-kind contribution description (if applicable)

*Chips and salsa Tray*

Contributor address; City; State; Zip Code

*309 E Broad St, #201  
Mansfield TX 76063*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/1/14*

Full name of contributor  out-of-state PAC (ID#:

*Andrew Piel*

Amount of contribution (\$)

*\$100<sup>00</sup>*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*2707 Park Run  
Arlington TX 76016*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

FILED  
TARRANT COUNTY

## SCHEDULE A

2014 FEB 24 AM 10:41

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

11 of 14

2 FILER NAME

Steve Rarson  
ELECTIONS ADMINISTRATOR  
BY: *Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*1/31/14*

5 Full name of contributor

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

*Clint Burgess*

6 Contributor address; City; State; Zip Code

*1100 E Broad St #201  
Mansfield TX 76063*

7 Amount of contribution (\$)

*\$500.00*

8 In-kind contribution description (if applicable)

*Limo service & concert at Billy Bob's for 4*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*1/31/14*

Full name of contributor

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

*Kelly Curran*

Contributor address; City; State; Zip Code

*505 S Fielder  
Arlington TX 76063*

Amount of contribution (\$)

*\$400.00*

In-kind contribution description (if applicable)

*Two Personal Training Certificates*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/1/14*

Full name of contributor

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

*Colt Ables*

Contributor address; City; State; Zip Code

*327 Whirlaway St  
Gladewater, TX 75647*

Amount of contribution (\$)

*\$100.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*1/3/14*

Full name of contributor

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

*Donna Sellers*

Contributor address; City; State; Zip Code

*324 W Kennedale Pkwy  
Kennedale TX 76060*

Amount of contribution (\$)

*\$150.00*

In-kind contribution description (if applicable)

*Dessert Trays*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/1/14*

Full name of contributor

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

*Don Feare*

Contributor address; City; State; Zip Code

*721 W Division  
Arlington TX 76012*

Amount of contribution (\$)

*\$100.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY  
**SCHEDULE A**

2014 FEB 24 AM 10:41

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **12 of 14**

2 FILER NAME

*Steve Rarobn*  
*BY: Matt Hayes*

ELECTIONS ACCOUNT # YEAR  
3 ACCOUNT # YEAR (For Ethics Commission Filers)

4 Date

*1/31/14*

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

*Jeff Alsabrook*

6 Contributor address; City; State; Zip Code

*1509 Monte Carlo  
Mansfield TX 76003*

7 Amount of contribution (\$)

*2500.00*

8 In-kind contribution description (if applicable)

*shooting simulator*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*2/5/14*

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

*Kelly Carnutt*

Contributor address; City; State; Zip Code

*505 S Fielder  
Arlington TX 76013*

Amount of contribution (\$)

*\$690.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/3/14*

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

*Chandler Fozard*

Contributor address; City; State; Zip Code

*1808 Spice wood Tr  
Ft Worth TX 76134*

Amount of contribution (\$)

*\$550.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/3/14*

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

*Karen Schroeder*

Contributor address; City; State; Zip Code

*PO Box 170053  
Arlington TX 76003*

Amount of contribution (\$)

*200.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/8/14*

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

*Rodney Joe*

Contributor address; City; State; Zip Code

*1212 Old Oak Ct  
Frisco TX 75034*

Amount of contribution (\$)

*\$500.00*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

FILED  
TARRANT COUNTY

**SCHEDULE A**

2014 FEB 24 AM 10:41

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

13 of 14

2 FILER NAME

*Steve Ragon*  
*LECTIONS ADMINIS*  
*BY:*  
*Steve Ragon*  
*Matt Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*2/3/14*

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

*Jeff Alsbrook*

6 Contributor address; City; State; Zip Code

*1509 Monte Carlo  
Mansfield TX 76063*

7 Amount of contribution (\$)

*\$400<sup>00</sup>*

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*2/11/14*

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

*Andrew Seibert*

Contributor address; City; State; Zip Code

*6001 W 1-20, Ste 205  
Arlington TX 76063*

Amount of contribution (\$)

*\$100<sup>00</sup>*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/13/14*

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

*Lamarlys Doering*

Contributor address; City; State; Zip Code

*370 Cagle Crow Rd  
Mansfield TX 76063*

Amount of contribution (\$)

*\$100<sup>00</sup>*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/17/14*

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

*Tom Ritter*

Contributor address; City; State; Zip Code

*1703 Fountainview Dr  
Mansfield TX 76063*

Amount of contribution (\$)

*\$100<sup>00</sup>*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/19/14*

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

*Roy Kurban*

Contributor address; City; State; Zip Code

*101 Hideaway, #5  
Strawn, TX 76475*

Amount of contribution (\$)

*\$250<sup>00</sup>*

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

FILED  
TARRANT COUNTY

## SCHEDULE A

The Instruction Guide explains how to complete this form.

2014 FEB 24 AM 10:14

Total pages Schedule A:

14 of 14

2 FILER NAME

Steve Raburn  
ELECTIONS ADMINISTRATOR  
*Mat Hayes*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*2/21/14*

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

*Toby Goodman*

6 Contributor address; City; State; Zip Code

*5001 S. Cooper St  
Suite 212  
Arlington TX 76017*

7 Amount of contribution (\$)

*\$500<sup>00</sup>*

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: <b>1 of 1</b>	
2 FILER NAME <b>Matt Hayes</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES:      ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$			
5 Date <b>2/22/14</b>	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bill Zedler</b>	8 Amount of pledge (\$) <b>\$500<sup>00</sup></b>	9 In-kind description (if applicable)
7 Pledgor address;      City;   State;   Zip Code <b>5502 Hidden Trails Dr Arlington TX 76017</b>		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Pledgor address;      City;   State;   Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Pledgor address;      City;   State;   Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Pledgor address;      City;   State;   Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Pledgor address;      City;   State;   Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

FILED  
 TARRANT COUNTY  
 2014 FEB 24 AM 10:41  
 ELECTIONS ADMINISTRATOR

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>1 of 2</i>		2 FILER NAME <i>Matt Hayes</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>1/30/14</i>		5 Payee name <i>Precision Press</i>			
6 Amount (\$) <i>\$73<sup>26</sup></i>		7 Payee address; City; State; Zip Code <i>3115 S. Cooper # 300 Arlington TX 76015</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Adv. Exp</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Postcard</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>1/30/14</i>		Payee name <i>Precision Press</i>			
Amount (\$) <i>\$178<sup>30</sup></i>		Payee address; City; State; Zip Code <i>3115 S Cooper # 300 Arlington TX 76015</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Adv. Exp</i>		Description (If travel outside of Texas, complete Schedule T) <i>Postcards</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>2/5/14</i>		Payee name <i>Political Marketing Int'l, Inc</i>			
Amount (\$) <i>115<sup>48</sup></i>		Payee address; City; State; Zip Code <i>PO Box 698 Marianna FL 32447</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Adv. Exp</i>		Description (If travel outside of Texas, complete Schedule T) <i>Phone dialed</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>2/11/14</i>		Payee name <i>Saigon Dallas Media LLC</i>			
Amount (\$) <i>\$1000<sup>00</sup></i>		Payee address; City; State; Zip Code <i>10935 Estate Ln, Suite 5180 Dallas TX 75238</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Adv Exp</i>		Description (If travel outside of Texas, complete Schedule T) <i>Radio Spots</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <i>2 of 2</i>	<b>2</b> FILER NAME <i>Matt Hayes</i>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
---------------------------------------------------	------------------------------------------	-----------------------------------------------

<b>4</b> Date <i>2/13/14</i>	<b>5</b> Payee name <i>TC-TGM Corp.</i>
---------------------------------	--------------------------------------------

<b>6</b> Amount (\$) <i>\$200<sup>00</sup></i>	<b>7</b> Payee address; City; State; Zip Code <i>1700 Chip N Dale Dr Arlington TX 76012</i>
---------------------------------------------------	----------------------------------------------------------------------------------------------------

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

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

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

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

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

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

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

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

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FILED  
 TARRANT COUNTY  
 2014 FEB 24  
 10:11 AM  
 STEVE RAYBURN  
 ELECTIONS ADMINISTRATOR