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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

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

		OFFICEHOLDER				FORM COVER SHE	C/OH EET PG 1
Th	e C/OH Instruction Guid	e explains how to complete thi	s form.	1 ACCOUNT # (Ethics Commission 00000001	n filers)	2 PAGE # 1 of 16	
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIR Mr. J.D.	ST		MI	OFFICE U	SE ONLY
-	NAME	NICKNAME LAX			SUFFIX		TA 2011
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE	:#; CIT	Y; STATE;	ZIP CODE	Date Hand-delivered	or Date Postmarked
	Change of Address					Receipt #	Amount
5	CAMPAIGN	MS/MRS/MR FIF	RST		Mi	Date Processed	6 - 4
	TREASURER NAME	Mr. Dar	rell			Date Imaged	
		NICKNAME LA Joh	 sт n son		SUFFIX		: :
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEA	SE); APT / SUITI	E#; CITY;	STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU	MBER	EXTENSIO	ИС		
8	REPORT TYPE	X January 15 30	h day before electi	on 🔲 Runoff		15th day after c appointment (of	ampaign treasurer ficeholder only)
		July 15 Sth	day before electio	n Exceed	ed \$500 limit	Final report (Att	ach C/OH - FR)
9	PERIOD COVERED	Month Day Year		Mor	nth Day	Year	
		07/01/2013	THROU	JGH	12/31/20	13	
10	ELECTION	ELECTION DATE Month Day Year 03/04/2014	ELECTION TYP			General	Special
1	OFFICE	OFFICE HELD (if any) County Commissioner Pct District 4	4		SOUGHT (if known 7 Commissior 4		
			GO TO F	PAGE 2			

Texas Ethics Commission

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P.O. Box 12070 Austin, Texas 78711-2070

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

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Johns	son, J.D. (Mr.)		14 ACCOUNT # (Ethi 00000001	cs Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca out the candidate's or officeholder's knowledge or consent. Candidat y receive notice of such expenditures	Indidate / officeholder. These tes and officeholders are req	e expenditures may uired to report this
POLITICAL COMMITTEE(S)		COMMITTEE NAME	BY:	
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	TRAIOR	
16 CONTRIBUTION TOTALS	1. TOTAL F PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	20.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	25,095.00
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	^{ED} \$	3,723.52
	4. TOTAL	POLITICAL EXPENDITURES	\$	18,958.03
CONTRIBUTION BALANCE	5. TOTAL F LAST D/	\$	345,575.44	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00
17 AFFIDAVIT	/	VBLIC TEXAS 5-14-2017 /E The The The The The The The The The The	all information required t	
Signature of officer adm	INDORCE	Print name of officer administering oath	Title of officer administr	ezhg oath

Texas Ethics Commission P.O.Box 12070

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TDD 1-800-735-2989

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3	
2 FILER NAME	Johnson, J.D. (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Abdo, Kamran)	7 Amount of contribution (\$)	8 In-kind contribution description (if-applicable)
08/06/2013	6 Contributor address; City; State; Zip Code 10120 W. Flamingo Road #4-12 Las Vegas, NV 89147		\$2,000.00 	uroa 16
			(If travel outside of "	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Austin, Robert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2013	Contributor address; City; State; Zip Code 103 Parker Ridge Road Palmer, TX 75152	••••••••••••••••••••••••••••••••••••••	 \$475.00 	
			(If travel outside of '	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Bass, Edward P.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/01/2013	Contributor address; City; State; Zip Code 201 Main Street Suite 2700 Fort Worth, TX 76102		\$5,000.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Elkins, Dick and Hedi)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/22/2013	Contributor address; City; State; Zip Code 8985 Boat Club Road Fort Worth, TX 76179		\$6,300.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	:
Date	Full name of contributor Dout-of-state PAC (ID# Good Government Fund		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/13/2013	Contributor address; City; State; Zip Code 201 Main Street Fort Worth, TX 76102		\$1,500.00	
				Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	

Texas Ethics Con	nmission P.O.Box 12070 Austin,	Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
		J JUNTY NS PM 1: 46		SCHEDULE A
The Instruction	DN GUIDE explains how to complete this form VE RAT	()국권	1 PAGE # Schedule: 2/3	B Report: 4/16
2 FILER NAME	Johnson, J.D. (Mr.) BY:		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID Griffin, Mike and Susan	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/08/2013	6 Contributor address; City; State; Zip Code 800 Arcadia Street Saginaw, TX 76179		\$200.00 	
			(If travel outside of	Texas, complete Schedule T) 🗌
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	· · · · · · · · · · · · · · · · · · ·
Date	Full name of contributor Dout-of-state PAC (ID: Haynes, Jay and Bonny	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/29/2013	Contributor address; City; State; Zip Code 734 Harpole Road E Argyle, TX 76226		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	Dation / Job title (See Instructions)	Employer (See Ins	structions)	
	· ·			
Date	Full name of contributor Dout-of-state PAC (ID: Linebarger,Goggan Blair & Sampsom, LLP	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2013	Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760		\$1,000.00 	
			(if travel outside of	Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor 🛛 out-of-state PAC (ID: Lockheed Martin EPAC	#_C00303024_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/25/2013	Contributor address; City; State; Zip Code 1550 Crystal Drive Crystal Square Two, Suite 300 Arlington, VA 22202		\$750.00	
Principal occuj	pation / Job title (See Instructions)	Employer (See Ins	•	Texas, complete Schedule T)
				-
Date	Full name of contributor D out-of-state PAC (ID) Marion, Anne W.	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/26/2013	Contributor address; City; State; Zip Code Bumett Plaza-Suite 1500 801 Cherry Street-Unit 9		\$5,000.00	
	Fort Worth, TX 76102-6881		(If travel outside of	Texas, complete Schedule T)
Principal occu	I pation / Job title (See Instructions)	Employer (See Ins	· ·	,
		1		Electronic Filing Version 3.4.

POLITI		7, Texas 78711-2070 FIL TARRANT		TDD 1-800-735-2 SCHEDULE A
OTHER	R THAN PLEDGES OR LOA	NS 2014 JAN 1 L	PM 1:46	SCHEDULE A
	ON GUIDE explains how to complete this form.	STEVE R ELECTIONS ADD	1 PAGE#	Bonort: 5/16
FILER NAME	Johnson, J.D. (Mr.)	BY:	3 ACCOUNT #	3 Report: 5/16 (Ethics Commission filers)
Date	5 Full name of contributor D out-of-state PAC (ID Mayer, C. David	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable
09/20/2013	6 Contributor address; City; State; Zip Code 245 West Hill Drive Aledo, TX 76008		\$1,000.00	
Dringing				Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID PSEL Pac	#)	Amount of contribution (\$)	In-kind contribution description (if applicable
09/13/2013	Contributor address; City; State; Zip Code 201 Main Street Suite 2500		\$1,500.00	
	Fort Worth, TX 76102		(If travel outside of	Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID Ray, William	#)	Amount of contribution (\$)	In-kind contribution description (if applicable
07/01/2013	Contributor address; City; State; Zip Code 512 Main Street Suite 308 Fort Worth, TX 76102	•••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
		•		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

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POLITIC	AL EXPENDITURES		SCHEDULE F
		·	
Advertising Exper Accounting/Banki Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Sala ng Legal Services Soli se Food/Beverage Expense Trav Polling Expense Trav Printing Expense Offic	RE CATEGORIES ines/Wages/Contract Labor itation/Fundraising Expense el In District el Out Of District e Overhead/Rental Expense cplains how to complete this fo	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE # Schedule: 1/11 R	eport: 6/16 2 FILER NAME Johnson, J.D. (Mr.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name		
10/03/2013 6 Amount (\$)	Academy Sports & Outdoors 7 Payee address City; State; Zip C	ode	
\$79.92	1701 S. Cherry Lane Fort Worth, TX 76108		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sc Food/Beverage Expense		(If travel outside of Texas, complete Schedule T) ed Way Fish Fry Fundraiser
9 Complete ONLY if	Candidate / Officeholder name	Office sou	aht: Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
12/05/2013	Academy Sports & Outdoors Payee address City; State; Zip C	ada	
Amount (\$) \$725.00	1701 S. Cherry Lane Fort Worth, TX 76108		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Gifts/Awards/Memorials Expense	hedule) Description Staff Apprec	(If travel outside of Texas, complete Schedule T) [] iation Gifts
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ight: Office held:
Date	Payee name		· · · · · · · · · · · · · · · · · · ·
07/10/2013	Arizola's Restaurant & Cantina		
Amount (\$) \$1,306.50	Payee address City; State; Zip C 6055 Jacksboro Highway Lake Worth, TX 76135	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Food/Beverage Expense	,	(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ight: Office held:
Date	Payee name		
07/05/2013 Amount (\$)	Awesome Blossoms Payee address City; State; Zip C	Code	
\$358.61	100 S. Hampshire Street Saginaw, TX 76179		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Gifts/Awards/Memorials Expense		(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	ight: Office held:

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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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POLITICAL EXPENDITURES

Accounting/Banl Consulting Expe Event Expense Fees	nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dist Printing Expense Office Overhead/F The Instruction Guide explains how	Rental Expense OTHER (enter a category not listed above) v to complete this form.
1 PAGE # Schedule: 2/11 F	2 FILER NAME Johnson, J.D. (Mr.)	3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name	0000001
08/05/2013	Awesome Biossoms	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$329.67	100 S. Hampshire Street Saginaw, TX 76179	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Gifts/Awards/Memorials Expense	Various Flowers for Constituents
EXPENDITURE		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name Awesome Blossoms	
08/16/2013 Amount (\$)	Payee address City; State; Zip Code	
\$23.84	100 S. Hampshire Street Saginaw, TX 76179	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Gifts/Awards/Memorials Expense	Sympathy Arrangement for Constituent
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	en e
09/11/2013	Awesome Blossoms	
Amount (\$)	Payee address City; State; Zip Code	Y:
\$396.59	100 S. Hampshire Street Saginaw, TX 76179	STEWS
PURPOSE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) 1 Various Sympathy Arrangements for Constituents
EXPERIMENTE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	1
10/17/2013	Awesome Blossoms	
Amount (\$)	Payee address City; State; Zip Code	
\$224.30	100 S. Hampshire Street Saginaw, TX 76179	
DUDDOGE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Gifts/Awards/Memorials Expense	Various Sympathy Arrangements for Constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: Electronic Filing Version 3.4.

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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fr ise Food/Beverage Expense Travel In Dist Polling Expense Travel Out Of	es/Contract Labor undraising Expense rict Contributions/Donations Made By Candidate/Officeholder/Political Committee bad/Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 3/11 R	eport: 8/16 2 FILER NAME Johnson, J.D. (Mr.)	3 ACCOUNT # (TEC filers 00000001
4 Date	5 Payee name	
11/07/2013 6 Amount (\$) \$138.00	Awesome Blossoms 7 Payee address City; State; Zip Code 100 S. Hampshire Street Saginaw, TX 76179	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description (If travel outside of Texas, complete Schedule T) Various Flowers for Constituents
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/03/2013	Awesome Blossoms	
Amount (\$) \$68.97	Payee address City; State; Zip Code 100 S. Hampshire Street Saginaw, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T) [Various Sympathy Arrangements for Constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/04/2013	Awesome Blossoms	·
Amount (\$) \$248.23	Payee address City; State; Zip Code 100 S. Hampshire Street Saginaw, TX 76179	TARRA 2014 JAN ELECTION BY
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule II) Various Sympathy Arrangements for Constituents
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held.
Date 12/26/2013	Payee name Benchmark Graphics	
Amount (\$) \$1,818.60	Payee address City; State; Zip Code 12775 Business 287 North Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Printing Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: Electronic Filing Version 3

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 Texas Ethics Commission
 P.O.Box 12070
 Austin, Texas 78711-2070
 (512)463-5800 TDD 1-800-735-2989

POLITIC	AL EXPENDITURES	SCHEDULE F					
EXPENDITURE CATEGORIES							
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/C ing Legal Services Solicitation/Fundra	Contract Labor Loan Repayment/Reimbursement aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)					
1 PAGE # Schedule: 4/11 F	eport: 9/16 2 FILER NAME Johnson, J.D. (Mr.)	3 ACCOUNT # (TEC filers) 00000001					
4 Date 07/11/2013	5 Payee name Boswell Quarterback Club						
6 Amount (\$) \$150.00	7 Payee address City; State; Zip Code 8551 Boat Club Road Suite 121, Box 164 Fort Worth, TX 76179						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign Ad in Football Program					
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:					
Date	Payee name Boswell Saginaw Chisholm Trail FFA						
12/19/2013 Amount (\$)	Payee address City; State; Zip Code	<u></u>					
\$1,189.00	5805 Bailey Boswell Road Saginaw, TX 76179						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) Contribution To Ag Fundraiser					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:					
Date 08/30/2013	Payee name Castleberry Athletic Booster Club	ELE ZOI					
Amount (\$) \$150.00	Payee address City; State; Zip Code Post Office Box 10063 Fort Worth, TX 76114	TARRANT 2014 JAN 14 STEVE ELECTIONS A					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Ad in Athletic Program					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:					
Date 08/16/2013	Payee name Chisholm Trail High School Sports Club						
Amount (\$) \$125.00	Payee address City; State; Zip Code 116 Blue Wood Drive Saginaw, TX 76179						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Ad in Chisholm Trail High School Sports Program					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: Electronic Filing Version 3.4.					

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POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ting Legal Services Solicitation/Func nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di Printing Expense Office Overhead The INSTRUCTION GUIDE explains ho	Contract Labor Loan Repa Iraising Expense Transporta Strict Candida /Rental Expense OTHER (e)	iyment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee nter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT# (TEC filers)
Schedule: 5/11 F			0000001
4 Date	5 Payee name		
07/18/2013	Eagle Mountain Saginaw Rotary		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$150.00	Post Office Box 79631 Saginaw, TX 76179		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Campaign Ad in Rotary	Pageant Program
EXPENDITURE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name Fort Worth Stock Show and Rodeo		
11/25/2013			
Amount (\$)	Payee address City; State; Zip Code		:
\$600.00	Post Office Box 150 Fort Worth, TX 76101-0150		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE	Event Expense	Livestock Appreciation	Day Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
08/19/2013	Fort Worth Stock Show Syndicate		
Amount (\$)	Payee address City; State; Zip Code		
\$400.00	P. O. Box 17005		
φ+00.00	Fort Worth, TX 76102		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE	OTHER - Membership Dues	Membership Dues	
			TA 2014 ELEC
Complete ONLY if	Candidate / Officeholder name	Office sought:	
direct expenditure to benefit C/OH			
	-		
Date	Payee name		
07/05/2013	Friends of Senator Jane Nelson		
Amount (\$)	Payee address City; State; Zip Code		
\$250.00	Post Office Box 608 Grapevine, TX 76099		NTY I:46 Trator
		Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Contribution	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH	Nelson, Jane (Hon.)	State Senator District 12	State Senator District 12

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POLITIC	CAL EXPENDITURES		SCHEDULE F
	EXPENDITURE CATEG	ORIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wages/C king Legal Services Solicitation/Euroda	Contract Labor Loan Repaym raising Expense Transportation Contributions/ trict Candidate/(Rental Expense OTHER (enter	ent/Reimbursement h Equipment & Related Expense Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 6/11 F	2 FILER NAME		3 ACCOUNT# (TEC filers) 00000001
4 Date 09/23/2013	5 Payee name Friends of Senator Jane Nelson		
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code Post Office Box 608 Grapevine, TX 76099		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside Contribution	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Nelson, Jane (Sen.)	Office sought: State Senator District 12	Office held: State Senator District 12
Date 07/11/2013	Payee name Green Machine Booster Club	<u></u>	
Amount (\$)	Payee address City; State; Zip Code		
\$150.00	Post Office Box 136112 Fort Worth, TX 76136		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Fall Athletic Program	of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/05/2013	Payee name Kohls		
Amount (\$) \$350.00	Payee address City; State; Zip Code 6054 Azle Avenue Fort Worth, TX 76135		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	Description (If travel outside Staff Appreciation Gifts	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	
Date 12/03/2013	Payee name Liq-O-Rama		
Amount (\$) \$139.04	Payee address City; State; Zip Code 6738 Lake Worth Blvd Fort Worth, TX 76135		ED COUNT PK I: MINISTRA
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside Volunteer Appreciation E	of Texas, completer Schedüle T) 🔲 vent 👓
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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

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P	OLITICAL	EXP		URES	5

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundr nse Food/Beverage Expense Travel in District Polling Expense Travel Out of Dis Printing Expense Office Overhead/ The INSTRUCTION GUIDE explains how	Contract Labor aising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category part listed obsurp)
1 PAGE # Schedule: 7/11 F	2 FILER NAME Johnson, J.D. (Mr.)	3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name	0000001
10/14/2013	Mary Louise Garcia Campaign	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$250.00	Post Office Box 123362 Fort Worth, TX 76121	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (If travel outside of Texas, complete Schedule T) Contribution
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	Garcia, Mary Louise (Hon.)	County Clerk County Clerk
Date 07/29/2013	Payee name Moslah Shrine Temple	
Amount (\$)	Payee address City; State; Zip Code	
\$160.00	Post Office Box 1320 Fort Worth, TX 76101	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Campaign Ad in Program
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 07/25/2013	Payee name River Oaks Lions Club	
Amount (\$)	Payee address City; State; Zip Code	
\$45.00	P. O. Box 10177	
\$ 4 5.00	Fort Worth, TX 76114	TA ELE
PURPOSE	Category (See Categories listed at the top of this schedule) OTHER - Membership Dues	Description (If travel outside of Texas, complete Schedille T)
OF		Membership Dues
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:
Date	Payee name	
10/03/2013	River Oaks Lions Club	
Amount (\$)	Payee address City; State; Zip Code) 50
\$25.00	P. O. Box 10177 Fort Worth, TX 76114	l
DUPDOES	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Advertising Expense	Campaign Ad in Newsletter
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
		Electronic Filing Version 3.4.5

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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salariv ing Legal Services Solicit ise Food/Beverage Expense Travel Polling Expense Travel Printing Expense Office	ation/Fundraising Expense Tran In District Cont Out Of District C	n Repayment/Reimbursement sportation Equipment & Related Expense tributions/Donations Made By andidate/Officeholder/Political Committee ER (enter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 8/11 F	eport: 13/16 Johnson, J.D. (Mr.)		0000001
4 Date	5 Payee name		
11/07/2013	River Oaks Lions Club		·
6 Amount (\$) \$45.00	7 Payee address City; State; Zip Cor P. O. Box 10177 Fort Worth, TX 76114	Je	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche OTHER - Membership Dues	dule) (b) Description (if trav Membership Dues	rel outside 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		
08/07/2013	Saginaw Area Chamber of Commerce		
Amount (\$)	Payee address City; State; Zip Co	de	
\$125.00	301 South Saginaw Blvd Saginaw, TX 76179		
PURPOSE	Category (See Categories listed at the top of this sche OTHER - Membership Dues	edule) Description (If trav Membership Dues	rel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/30/2013	Sam's Wholesale Club	· · · · · · · · · · · · · · · · · · ·	·
Amount (\$) \$108.87	Payee address City; State; Zip Co 6760 Westworth Blvd. Fort Worth, TX 76114	de	
PURPOSE	Category (See Categories listed at the top of this sche Food/Beverage Expense		vel outside of Texas, complete Schedule T) oody Bags EMISD, LWASD
EXPENDITURE			JA RR
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	
Date	Payee name		MA NOR
10/14/2013	Sam's Wholesale Club	da	and * 5
Amount (\$) \$64.44	Payee address City; State; Zip Co 6760 Westworth Blvd. Fort Worth, TX 76114	ue	TY :47
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche Food/Beverage Expense		vel outside of Texas, complete Schedule T) 🔲 ay Fish Fry Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Texas Ethics Commission

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fund	Contract Labor Loan Repay raising Expense Transportat Contribution trict Candida Rental Expense OTHER (er	yment/Reimbursement ion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee tter a category not listed above)
1 PAGE # Schedule: 9/11 R	eport: 14/16 2 FILER NAME Johnson, J.D. (Mr.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 12/31/2013	5 Payee name Sam's Wholesale Club		1
6 Amount (\$) \$286.20	7 Payee address City; State; Zip Code 6760 Westworth Blvd. Fort Worth, TX 76114		· · · · · · · · · · · · · · · · · · ·
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description (If travel outs Staff Appreciation Gifts	side 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		
07/09/2013	Southwestern Exposition & Livestock Show		
Amount (\$) \$500.00	Payee address City; State; Zip Code P. O. Box 150 Fort Worth, TX 76101	-	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Calf Scramble Sponsor	Description (If travel out Calf Scramble Sponsor	side of Texas, confide Schequle T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	
Date	Payee name		
07/30/2013	Staples		
Amount (\$) \$349.63	Payee address City; State; Zip Code 6313 Lake Worth Blvd Lake Worth, TX 76135	second second	1477 1007
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		side of Texas, complete Schedule T) 🔲 olf Tournament Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/17/2013	Tarrant County Republican Party		
Amount (\$) \$250.00	Payee address City; State; Zip Code 2405 Gravel Drive Fort Worth, TX 76118		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outs Donation	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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POLITICAL EXPENDITURES	

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Consulting Expense Event Expense Food/Beverage Expense Travel In District Contributions/Donations Made By Fees Printing Expense Office Overhead/Rental Expense Office Overhead/Rental Expense The INSTRUCTION Guide explains how to complete this form.				
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)	
Schedule: 10/11	Report: 15/16 Johnson, J.D. (Mr.)		0000001	
4 Date	5 Payee name		· · · · · · · · · · · · · · · · · · ·	
11/09/2013	Tarrant County Republican Party			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$1,250.00	2405 Gravel Drive Fort Worth, TX 76118			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel ou	tside of Texas, complete Schedule T)	
PURPOSE OF	Fees	Filing Fee for Primary	Election	
EXPENDITURE				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	
Date	Payee name			
10/28/2013	TCGOP-Lincoln Council			
Amount (\$)	Payee address City; State; Zip Code			
\$1,000.00	2405 Gravel Drive			
φ1,000.00	Fort Worth, TX 76118		TA TA 2014 ELEC	
	Category (See Categories listed at the top of this schedule)	Description (If travel out	tside of Texas, complete Schedule T)	
PURPOSE	OTHER - Membership	Membership	in the second se	
OF		Memberenip		
EXPENDITURE				
Complete ONLY if	Candidate / Officeholder name	Office sought:	≥_Office bel d: ◯ ◯	
direct expenditure		childe bodght.		
to benefit C/OH				
Date	Payee name		Y 47	
07/10/2013	The Golf Club at The Resort		OR -	
Amount (\$)	Payee address City; State; Zip Code		1	
\$65.16	5700 The Resort Bivd.			
φ05.10	Fort Worth, TX 76179			
	Category (See Categories listed at the top of this schedule)	Description (If travel ou	tside of Texas, complete Schedule T)	
PURPOSE	Food/Beverage Expense	Volunteer Appreciation		
OF				
EXPENDITURE				
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:	
direct expenditure				
to benefit C/OH				
Date	Payee name			
12/03/2013	The Golf Club at The Resort			
Amount (\$)	Payee address City; State; Zip Code			
\$396.94	5700 The Resort Blvd.			
÷000.04	Fort Worth, TX 76179			
	Category (See Categories listed at the top of this schedule)	Description (If travel ou	tside of Texas, complete Schedule T)	
PURPOSE	Event Expense	Volunteer Appreciation		
OF				
EXPENDITURE				
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:	
direct expenditure		5		
to benefit C/OH			: .	
			Electronic Filing Version 3.4.5	

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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES

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Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Salaries/Wages/Cor	ntract Labor Loan Repayr sing Expense Transportatio Contributions ct Candidate offal Expense OTHER	nent/Reimbursement In Equipment & Related Expense /Donations Made By /Officeholder/Political Committee er a category not listed above)	
1 PAGE #	2 FILER NAME			
Schedule: 11/11 4 Date			3 ACCOUNT # (TEC filers) 00000001	
10/14/2013	5 Payee name U. S. Postmaster			
6 Amount (\$)				
\$78.00	7 Payee address City; State; Zip Code 3930 Telephone Road Fort Worth, TX 76135			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	e of Texas, complete Schedule T)	
PURPOSE OF EXPENDITURE	OTHER - Campaign Post Office Box Fee	Campaign Post Office Bo	x Fee	
A				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	
Date	Payee name			
12/11/2013	U. S. Postmaster			
Amount (\$)	Payee address City; State; Zip Code	IJ	60	
\$414.00	3930 Telephone Road	Yr:	TAI 2014	
÷+1+.00	Fort Worth, TX 76135		JA R	
PURPOSE	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T	
OF	OTHER - Postage	Campaign Postage	LED L COL	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:		
Date	Payee name		20	
09/27/2013	YWCA	ţ		
Amount (\$)	Payee address City; State; Zip Code			
\$200.00	512 West 7th Street Fort Worth, TX 76102			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside Contribution	of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	