

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Mr. Kenneth D. Sanders			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Mr. Marvin Sutton			
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year
	10	18	2013
THROUGH		Month	Day
		12	31
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month	Day	Year
03 / 2014		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	N/A	Tarrant County Commissioner, Precinct Two	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Sanders, Kenneth D (Mr.)

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

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

FILED
TARRANT COUNTY
JAN 15 PM 1:00
STEVIE LABORN
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

\$ 0.00

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

\$ 2,382.78

EXPENDITURE TOTALS

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

\$ 157.78

4. TOTAL POLITICAL EXPENDITURES

\$ 2,057.78

CONTRIBUTION BALANCE

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

\$ 325.00

OUTSTANDING LOAN TOTALS

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

\$ 1,250.00

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.

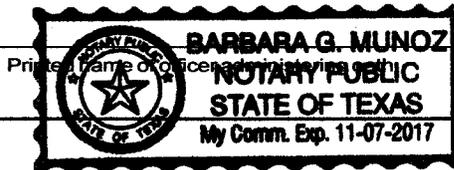
Kenneth Sanders

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said KENNETH SANDERS, this the 15 day of January 20 14, to certify which, witness my hand and seal of office.

Barbara G. Munoz
Signature of officer administering oath



Administrative Assistant
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: 1	
2 FILER NAME Sanders, Kenneth D (Mr.)		3 ACCOUNT # Ethics Commission Filers	
4 Date 11/11/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonnell, Linda	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5956 Tiger Trail Fort Worth, TX 76126		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Cindy	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5816 Wedgeworth Rd. Fort Worth, TX 76133		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/6/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnny Self	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 616 Hasten Ct Fort Worth, TX 76120		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Emma	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4701 Foxfire Way Fort Worth, TX 76133		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/10/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Sandra	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6201 Vista Wood Dr. Arlington, TX 76017		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

FILED
 TARRANT COUNTY
 11/15/13 11:1:00
 CLERK OF COUNTY CLERK
 ETHICS COMMISSION

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

LOANS

SCHEDULE E

<p>The instruction Guide explains how to complete this form.</p>	<p>1 Total pages Schedule E: 1</p>
<p>2 FILER NAME Sanders, Kenneth D (Mr.)</p>	<p>3 ACCOUNT # (Ethics Commission Filers)</p>

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

<p>5 Date of loan 12/9/2013</p>	<p>7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth D. Sanders</p>	<p>9 Loan Amount (\$) \$1,250.00</p>
<p>6 Is lender a financial institution? Y (N)</p>	<p>8 Lender address; City; State; Zip Code P.O. Box 183504 Arlington, TX 76096</p>	<p>10 Interest rate 3.0</p>
		<p>11 Maturity date 12/31/2014</p>

<p>12 Principal occupation / Job title (See Instructions) Operations/Manufacturing</p>	<p>13 Employer (See Instructions)</p>
<p>14 Description of Collateral <input checked="" type="checkbox"/> none</p>	<p>15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/></p>

<p>16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable</p>	<p>17 Name of guarantor 18 Guarantor address; City; State; Zip Code</p>	<p>19 Amount Guaranteed (\$) \$1,625.00</p>
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<p>20 Principal Occupation (See Instructions)</p>	<p>21 Employer (See Instructions)</p>
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<p>Date of loan</p>	<p>Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)</p>	<p>Loan Amount (\$)</p>
<p>Is lender a financial institution? Y N</p>	<p>Lender address; City; State; Zip Code</p>	<p>Interest rate</p>
		<p>Maturity date</p>
<p>Principal occupation / Job title (See Instructions)</p>	<p>Employer (See Instructions)</p>	
<p>Description of Collateral <input type="checkbox"/> none</p>	<p>Check if personal funds were deposited into political account <input type="checkbox"/></p>	
<p>GUARANTOR INFORMATION <input type="checkbox"/> not applicable</p>	<p>Name of guarantor Guarantor address; City; State; Zip Code</p>	<p>Amount Guaranteed (\$)</p>
<p>Principal Occupation (See Instructions)</p>	<p>Employer (See Instructions)</p>	

FILED
 TARRANT COUNTY
 2013 JAN 5 PM 1:00
 STEPHEN R. ARBORE
 CLERK
 ELECTIONS ADMINISTRATION

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

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:		2 FILER NAME Sanders, Kenneth D (Mr.)		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/18/2013		5 Payee name Big Bang Media			
6 Amount (\$) \$71.00		7 Payee address; City; State; Zip Code 2351 W. NW Hwy Dallas, TX 75220			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) Logo Design	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/30/2013		Payee name Big Bang Media			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 2351 W. NW Hwy Dallas, TX 75220			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Stationary	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/23/2013		Payee name GoDaddy.com			
Amount (\$) \$86.78		Payee address; City; State; Zip Code 14455 N. Hayden Rd. Scottsdale, AZ 85260			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Website	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/31/2013		Payee name The Pivot Group			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1720 1 Street, NW Suite 550 Washington, DC 20006			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		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	

FILED
 TARRANT COUNTY
 JAN 15 PM 00
 STEVE RAOBRIA
 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 2	2 FILER NAME Sanders, Kenneth D (Mr.)	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12/9/2013	5 Payee name Tarrant County Democratic Party	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 2806 Race Street Fort Worth, TX 76111	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T)
9 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	
PURPOSE OF EXPENDITURE	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	
PURPOSE OF EXPENDITURE	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	
PURPOSE OF EXPENDITURE	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

RY:
 ELECTICIS ADMINISTRATOR
 2014 JAN 15 PM 1:00
 TARRANT COUNTY
 FILED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED