JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

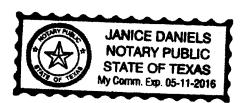
FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction G	UIDE explains how to complete this	form. (E	CCOUNT # thics Commission filers)	2 PAGE# 1 of 12			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Mr. CHARL		0000001	OFFICE USE ONLY			
NAME	NICKNAME LAST CHUCK VANOV		SUFFIX	Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE; ZIP CODE	Date Hand-delivered or Date Postmerked			
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST		· MI	Date Processed			
NAME	STACIE NICKNAME LAST VANOV		SUFFIX	Date Imaged 20 C			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY; STATE;	ZIP CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	R	EXTENSION				
8 REPORT TYPE		y before election before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year 01/24/2014	THROUGH	Month Day 02/22/20	Year 014			
10 ELECTION	ELECTION DATE Month Day Year 03/04/2014	ELECTION TYPE X Primary	Runoff	General Special			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known Tarrant County Crir				
		GO TO PAG	E 2				

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

13 C/OH NAME VANO	OVER, CHARLES (I	Mr.)	14 ACCOUNT 0000000			
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				
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME DFW Conservative Voters PAC				
	☐ GENERAL	COMMITTEE ADDRESS PO Box 173065 Arlington, TX 76003	я у :	ZOUNF		
additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Lane, Stuart	\$	NS AN		
		COMMUTEE CAMPAIGN FREASURER ADDRESS Arlington, TX 76003			5	
16 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	ラ B く 50.00	0	
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,600.00	0	
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	63.20	6	
	4. TOTAL F	POLITICAL EXPENDITURES	\$	47,976.1	2	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LY OF THE REPORTING PERIOD	\$	16,416.1	4	
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 24,000				
17 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.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said	Charles	L. Vanover	, this the	24th day
of February 20 14 , to certify which	າ, witness my hand	and seal of office.		

Print name of officer administering oath

			-			
The Instruction	ON GUIDE explains how to complete this form.	12.323000	1 PAGE # Schedule: 1/3	7 Report 3/12		
2 FILER NAME	VANOVER, CHARLES (Mr.)			(Ethics Commission filers)		
	· · · · · · · · · · · · · · · · · · ·			10 C 27		
4 Date	le en		00000001	2 2 2		
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 thekind contribution description (if applicable)		
	Taylor, Frances		(•)	38 3 3		
01/30/2014	6 Contributor address; City; State; Zip Code		\$100.00			
	925 Doral Drive Ft Worth, TX 76112			, , , , , , , , , , , , , , , , , , ,		
			L	f Texas, complete Schedule T)		
9 Contributor's p	principal occupation	10 Contributor's job	title			
11 Contributor's e	popular or Havi firm	42 Law from a facult				
Continuitor's e	employer / law inm	12 Law firm of contr	ributor's spouse (ir a	iny)		
13 If contributor is a child, law firm of parent(s) (if any)						
			· · · · · · · · · · · · · · · · · · ·			
Date	Full name of contributor	<u> </u>	Amount of	In-kind contribution		
	.Taylor, Kirk		contribution (\$)	description (if applicable)		
				Ì		
01/30/2014	Contributor address; City; State; Zip Code		\$200.00	1		
	3837 Drexmore Rd			1		
	Keller, TX 76244			I		
			(If travel outside of	f Texas, complete Schedule T)		
Contributor's p	principal occupation	Contributor's job	title			
Contributor's e	employer / law firm	Law firm of contr	tributor's spouse (if any)			
If a substant substant			·····			
if contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	,	Amount of	In-kind contribution		
Date	Adler, Frank	,	contribution (\$)	description (if applicable)		
	Adier, Frank					
02/05/2014			\$250.00			
	Contributor address; City; State; Zip Code PO Box 2511		V			
	Keller, TX 76244					
			(If travel outside of	Texas, complete Schedule T)		
Cantuibutada		O4-:b4:b:b-	<u> </u>	Texas, complete contended 17		
Contributor's p	rincipal occupation	Contributor's job	title			
Contributor's e	employer / law firm	Law firm of contr	ributor's spouse (if a	inv)		
				• (
If contributor is	s a child, law firm of parent(s) (if any)					

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/7	Report: 4/12
2 FILER NAME	VANOVER, CHARLES (Mr.)	-		Ethics Commission filers)
			00000001	
4 Date	5 Full name of contributor out-of-state PAC (ID# Bailey, Mona	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
02/01/2014	6 Contributor address; City; State; Zip Code 6200 Lake Way North Richland Hills, TX 78180	· · · · · · · · · · · · · · · · · · ·	\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Contributor's p	principal occupation	10 Contributor's jo	b title	TARR 2011 FE LLECTIO
11 Contributor's e	employer / law firm	12 Law firm of con	tributor's spouse (if ar	B 24 B 74 F 75 F 75 F 75 F 75 F 75 F 75 F 75 F 75
13 If contributor is	s a child, law firm of parent(s) (if any)			SHORE STATE
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Beasly, Bruce		σοπισμαίου (ψ)	i description (ii applicable)
02/20/2014	Contributor address; City; State; Zip Code		\$100.00	
	Ste 600 Fort Worth, TX 76102			·
	and the second s		(if travel outside of	Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's jo	b title	
Contributor's e	employer / law firm	Law firm of con	tributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
02/10/2014	Contributor address; City; State; Zip Code 3217 Sapphire St Bedford, TX 76021		\$100.00	
	Bedioid, 17/10021		(If travel outside of	Texas, complete Schedule T)
Cantaltentarile	I principal acquination	Contributor's jo		
Contributors	principal occupation	Contributor's jo		
Contributor's e	employer / law firm	Law firm of cor	ntributor's spouse (if a	ny)
If contributor is	s a child, law firm of parent(s) (if any)	,		

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

The Instruction	ON GUIDE explains how to complete this form.		- 11-	1 PAGE # Schedule: 3/7	1 PAGE # Schedule: 3/7 Report: 5/12		
2 FILER NAME	VANOVER, CHARLES (Mr.)			3 ACCOUNT#			s)
	•			00000001			,
4 Date	5 Full name of contributor	<u> </u>)	7 Amount of contribution (\$)	8 In-kind description	contribut n (if appl	
02/07/2014	6 Contributor address; City; State; Zip Code 8208Woodvale			\$250.00	1		
	Ft Worth, TX 76135			(If travel outside of	Texas, complete	Schedu	<u> </u>
9 Contributor's p	principal occupation	10 Contributor	r's job	title	37 37	EB 24	37
11 Contributor's e	employer / law firm	12 Law firm of	contr	ributor's spouse (if a	ny)	3	
13 If contributor is	s a child, law firm of parent(s) (if any)				ATOR	: 20	-<
Date	Full name of contributor	#	_)	Amount of contribution (\$)	In-kind description	contribut n (if appl	
02/18/2014	Contributor address; City; State; Zip Code			\$100.00	 		
-	Colleyville, TX 76034			(16.4		. Cabadul	
C4-ib-di-		Caratibuta	de iek	(If travel outside of	l exas, complete	Schedu	le I)
Contributor's p	principal occupation	Contributor	s job	title			
Contributor's e	employer / law firm	Law firm of	contr	ributor's spouse (if a	iny)		
If contributor is	s a child, law firm of parent(s) (if any)						
Date	Full name of contributor	#	_)	Amount of contribution (\$)	In-kind description	contribut n (if appl	
02/18/2014	Contributor address; City; State; Zip Code 4324 Diaz Ave	,		\$100.00			
	Ft Worth, TX 76107						
				(If travel outside of	Texas, complete	Schedu	le T)
Contributor's p	principal occupation	Contributor	r's job	title			
Contributor's e	employer / law firm	Law firm of	contr	ributor's spouse (if a	iny)		
If contributor is	s a child, law firm of parent(s) (if any)						

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE #				
2 51155 114145	VANOVED CHARLES (M.)			Schedule: 4/7 Report: 6/12			
2 FILER NAME	VANOVER, CHARLES (Mr.)			Ethics Commission filers)			
			00000001				
4 Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
02/05/2014	6 Contributor address; City; State; Zip Code 325 Springbrook Grapevine, TX 76051		\$100.00	APRANTILI			
				texas, complete scriedule 1)			
9 Contributor's p	rincipal occupation	10 Contributor's job	title				
11 Contributor's e	mployer / law firm	12 Law firm of contr	ributor's spouse (if ar	20 N			
13 If contributor is	a child, law firm of parent(s) (if any)						
Date	Full name of contributor)	Amount of	In-kind contribution			
	Driskell, Craig		contribution (\$)	description (if applicable)			
02/01/2014	Contributor address; City; State; Zip Code 2903 Burlwood Dr		\$200.00	 			
	Dalworthington Gardens, TX 76016						
			(If travel outside of	Texas, complete Schedule T)			
Contributor's p	rincipal occupation	Contributor's job	title				
Contributor's e	mployer / law firm	Law firm of contr	ributor's spouse (if ar	ny)			
If contributor is	s a child, law firm of parent(s) (if any)						
Date	Full name of contributor	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
02/04/2014	Contributor address; City; State; Zip Code PO Box 93419 Southlake, TX 76092		\$200.00	 			
			(If travel outside of	Texas, complete Schedule T)			
O a maribusta da m		Contributoria iah		Texas, complete content in			
Contributor's p	rincipal occupation	Contributor's job	title				
Contributor's e	mployer / law firm	Law firm of contr	ributor's spouse (if ar	ny)			
If contributor is	s a child, law firm of parent(s) (if any)	y programme and the					

Texas Ethics Commission

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

The Instruction	ON GUIDE explains how to complete this form.			1 PAGE # Schedule: 5/7	7 Report: 7/12
2 FILER NAME	VANOVER, CHARLES (Mr.)			1	(Ethics Commission filers)
- 1122111111112	(IIII)			00000001	Land Commission more)
4 Date	5 Full name of contributor out-of-state PAC (ID:	#)	7 Amount of	8 In-kind contribution
- Build	J. Don Carter & Associates		/	contribution (\$)	description (if applicable)
02/12/2014	6 Contributor address; City; State; Zip Code			\$200.00	三章 田 第
	3663 Airport Freeway			,	詞 8 37
	Ft Worth, TX 76111				7
				(If travel outside of	Texas, complete Schedule T)
9 Contributor's	principal occupation	10	Contributor's job	title	Total San San
					and the same
		_			1 2 3
11 Contributor's	employer / law firm	12	Law firm of conti	ributor's spouse (if a	ny)
					· masser**
13 If contributor is	s a child, law firm of parent(s) (if any)	L			
			······		
Date	Full name of contributor out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Johnson, Dennis			Commodition (4)	(ii applicable)
01/30/2014				\$100.00	
01/30/2014	Contributor address; City; State; Zip Code			\$100.00	
	2301 Carson St Ft Worth, TX 76117				1
	,			(if travel outside of	Texas, complete Schedule T)
Contributor's p	rincipal occupation		Contributor's job	title	
,			,		
Contributor's	employer / law firm	Law firm of contributor's spouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)	l			
ii communici	or a sima, lett illini er parent(e) (il any)				
	A.444				
Date	Full name of contributor	¥)	Amount of	In-kind contribution
	Lee, Jonathan			contribution (\$)	description (if applicable)
04/05/0044	· · · · · · · · · · · · · · · · · · ·			#400.00	l ·
01/25/2014	Contributor address; City; State; Zip Code			\$100.00	1
	2300 FM 1434 Cleburne, TX 76033				[
	Cloballo, 1270000		•		
0 1:1 1			0 11 1 1 1	<u> </u>	Texas, complete Schedule T)
Contributor's p	principal occupation		Contributor's job	title	
Contributor's	employer / law firm		Law firm of contr	ributor's spouse (if ar	ny)
If contributor is	s a child, law firm of parent(s) (if any)				
ii contributor ii	a sing, an inition parojulo) (ii arry)				

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/7 Report: 8/12
2 FILER NAME	VANOVER, CHARLES (Mr.)		3 ACCOUNT # (Ethics Commission filers)
4 Date	Full name of contributor	‡)	7 Amount of contribution (\$) 8 In-kind contribution (description (if applicable)
02/19/2014	6 Contributor address; City; State; Zip Code 1215 Boardwalk St Arlington, TX 76011		\$50.00 (If travel outside of Texas, complete Schedule 7)
9 Contributor's p	orincipal occupation	10 Contributor's join	o title
11 Contributor's	employer / law firm	12 Law firm of con	tributor's spouse (if any)
13 If contributor is	s a child, law firm of parent(s) (if any)		: 20 : 20
Date	Full name of contributor	#)	Amount of In-kind contribution contribution (\$) description (if applicable)
02/12/2014	Contributor address; City; State; Zip Code 909 Findlay Dr Arlington, TX 76012		\$100.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's jo	b title
Contributor's e	employer / law firm	Law firm of con	tributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	<u> </u>	Amount of In-kind contribution contribution (\$) description (if applicable)
01/25/2014	Contributor address; City; State; Zip Code PO Box 160398 Austin, TX 78716		\$50.00
			(If travel outside of Texas, complete Schedule T)
Contributor's p	principal occupation	Contributor's jo	b title
Contributor's e	employer / law firm	Law firm of con	tributor's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/7	1 PAGE # Schedule: 7/7 Report: 9/12		
2 FILER NAME	VANOVER, CHARLES (Mr.)		1	Ethics Commission filers)		
			00000001			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Shuman, Niall	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
01/28/2014	6 Contributor address; City; State; Zip Code 217 Marseille Dr		\$50.00			
	Hurst, TX 76054		3	TAR PLEC		
			(If travel outside of	Texas, complete Schedule Ty		
9 Contributor's p	principal occupation	10 Contributor's job	title	B 24		
11 Contributor's e	employer / law firm	12 Law firm of contr	ributor's spouse (if an			
13 If contributor is	s a child, law firm of parent(s) (if any)			20		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
02/03/2014	Contributor address; City; State; Zip Code 5612 Coventy Ct		\$100.00			
	Colleyville, ŤX 76034		(If travel outside of	Texas, complete Schedule T)		
Cantributorio	principal accuration	Contributor's job	L `	Texas, complete schedule 1/		
Contributor's p	orincipal occupation	Contributor's job	tille			
Contributor's e	employer / law firm	Law firm of conti	ributor's spouse (if an	ny)		
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
01/30/2014	Contributor address; City; State; Zip Code PO Box 451 Keller, TX 76244		\$50.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Contributor's p	Drincipal occupation	Contributor's job	title			
Contributor's e	employer / law firm	Law firm of conti	ributor's spouse (if ar	uy)		
If contributor is	s a child, law firm of parent(s) (if any)					

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

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

Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.

1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) VANOVER, CHARLES (Mr.) Schedule: 1/2 Report: 10/12 00000001 4 Date 5 Payee name 01/28/2014 Stampede Consulting Payee address Amount (\$) City; State; Zip Code P.O. Box \$3,584.88 91235 Austin, TX 78709 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas complete Se **PURPOSE** Advertising Expense Campaign Advertising and Consulting OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 3 Stampede Consulting 01/28/2014 Amount (\$) Payee address City; State; Zip Code P.O. Box \$2,590.82 91235 Austin, TX 78709 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Campaign Advertising and Consulting Advertising Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Stampede Consulting 02/10/2014 Amount (\$) Payee address City; State; Zip Code P.O. Box \$17,851.01 91235 Austin, TX 78709 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Campaign Advertising and Consulting Advertising Expense OF EXPENDITURE Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name 02/10/2014 Stampede Consulting Amount (\$) Payee address City; State; Zip Code \$17,851.01 P.O. Box 91235 Austin, TX 78709 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Campaign Advertising and Consulting Advertising Expense OF **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

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

, 505	The Instruction Guide explains ho		iter a category not listed above)
1 PAGE#	2 FILER NAME	All the state of t	3 ACCOUNT # (TEC filers)
Schedule: 2/2 Re	eport: 11/12 VANOVER, CHARLES (Mr.)		0000001
4 Date 02/10/2014	5 Payee name Stampede Consulting		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$4,552.19	P.O. Box 91235 Austin, TX 78 7 09		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outsi Campaign Advertising a	de 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		
02/12/2014	Stampede Consulting		
Amount (\$) \$482.95	Payee address City; State; Zip Code P.O. Box 91235 Austin, TX 78709		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outsi Campaign Advertising a	de of Texas, complete Schedule T) and Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
			TARRANT COUNTY 2014 FEB 24 PM 4: 20 STEYCRABORN ELECTIONS ADMINISTRATOR

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

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

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

rees	Finding	The Instruction	N Guide explains how t		nici a category not	iisted above)
1 PAGE#	1	2 FILER NAME	· · · · · · · · · · · · · · · · · · ·	. ,	3 ACCOU	NT # (TEC filers)
Schedule: 1/1 Re	eport: 12/12	VANOVER, CHA	ARLES (Mr.)		00000	001
4 Date	5 Payee name					
02/05/2014	Fenandez, Da					
6 Amount (\$)	7 Payee address		ite; Zip Code			
\$1,000.00 Reimbursement from political contributions intended	2823 Quail La Arlington, TX	ane (76016				
8 PURPOSE		Categories listed at the t	op of this schedule)	(b) Description (If travel outs Sign Installation	side of Texas, com	plete Schedule T)
OF EXPENDITURE						
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