CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 4		
3 CANDIDATE /	MS / MRS / MR FIRST	Mi	OFFICE USE ONLY		
OFFICEHOLDER NAME	Mr. Jacinto		Date Received		
17,117,12	NICKNAME LAST	SUFFIX			
	Cinto Ramos	Jr.	RECEIVED		
			WH 4 E 2020		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	JUL 15 2020		
OFFICEHOLDER MAILING		Board of Education			
ADDRESS	1817 Harrington Avenue Fort Worth, TX 76164	Date Hand-delivered or Date Postmarked			
			7-15-20		
Change of Address			, ,,		
			Receipt # Amount		
5 CAMPAIGN	MS/MRS/MR FIRST	MI	Date Processed 7-15-20		
TREASURER NAME	Mrs. Anita		Date Imaged 7-15-20		
	NICKNAME LAST	SUFFIX	(122		
	Ramos				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); AP	T / SUITE #; CITY; STATE;	ZIP CODE		
ADDRESS	1817 Harrington Avenue				
(Residence or business)	Fort Worth, TX 76164				
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER PHONE		EN ENGION			
FIIONE					
8 REPORT TYPE			_		
	January 15 30th day before	e election Runoff	15th day after campaign treasurer appointment (officeholder only)		
			appointment (officeriolider only)		
	X July 15 Bth day before	election Exceeded \$500 limit	Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year	Month Day	Year		
COVERED		THROUGH			
	01/01/2020	06/30/20	20		
10 ELECTION	ELECTION DATE ELECTION	ON TYPE			
		Primary X Runoff	General Special		
	06/13/2013	_			
44 OFFICE					
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)			
	Fort Worth ISD School Board District 01	Fort Worth ISD Scho	ool Board		
	Siddleter				
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Ramos, Jacinto Jr. (Mr.) 14 ACC 000				(Ethics Commission filers)
15 NOTICE FROM This box is for notice of political expenditures by political committees to support the candidate / officeholder. The have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are information only if they receive notice of such expenditures				These expenditures may are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00			0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.			
	4. TOTAL POLITICAL EXPENDITURES			0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			301.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$			0.00
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. NOTARY ID: 125076148				
		Signature of C	Candidate or Officeh	older
	TAMP / SEAL ABOV			
~ I		ne said <u>Jacinto Ramos</u> tify which, witness my hand and seal of office.	, this the	15+h day
7 0	0.	T	c + 1	
Signature of officer admir	nistering oath	Print name of officer administering oath	Title of officer adm	oinistering oath

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

		The Instruction Guide explains ho	w to complete this form.			
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)		
Schedule: 1/0 Re	eport: 3/4	Ramos, Jacinto Jr. (Mr.)		00000001		
4 Date	5 Payee name					
03/13/2020		Prezi.Co				
6 Amount (\$)	7 Payee address	s City; State; Zip Code				
\$63.87	тх					
	'^					
8	(a) Category (Sec	Categories listed at the top of this schedule)	(b) Description (See instructions re	garding type of information required \		
PURPOSE	OTHER - Te		Presentations	garding type of information required.)		
OF EXPENDITURE						
EXI ENDITORIE						
Date	Payee name					
01/09/2020	Wells Fargo	Bank				
Amount (\$)	Payee address City; State; Zip Code					
\$7.00	200 NE 28th	Street				
ψσσ	Fort Worth,	TX 76164				
PURPOSE		Categories listed at the top of this schedule)		garding type of information required.)		
OF	Accounting/Banking Bank Monthly Fee					
EXPENDITURE			1			
			1	\		
			1			
Date	Payee name	Bank				
02/10/2020 Amount (\$)	Wells Fargo Bank					
\$7.00	Payee address City; State; Zip Code 200 NE 28th Street					
Φ7.00	Fort Worth,					
		Categories listed at the top of this schedule)	Description (See instructions re	garding type of information required.)		
PURPOSE OF	Accounting/E	Banking	Bank Monthly Fee			
EXPENDITURE			1			
			1			
Date	Payee name					
03/09/2020	Wells Fargo					
Amount (\$)	Payee address					
\$7.00	200 NE 28th Fort Worth,					
	. 510 770101,					
	Category (See	Categories listed at the top of this schedule)	Description (See instructions red	garding type of information required.)		
PURPOSE	Accounting/E		Bank Monthly Fee	, ang typo of information required.)		
OF EXPENDITURE	3	-	,			
				1		

EXPENDITURE CATEGORIES

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 2/0 Report: 4/4		Ramos, Jacinto Jr. (Mr.)		00000001
4 Date	5 Payee name			
04/08/2020	Wells Fargo			
6 Amount (\$)	7 Payee address			
\$7.00	200 NE 28th Fort Worth,	Street TX 76164		
	, , , , , , , , , , , , , , , , , , , ,			
8	(a) Category (See	Categories listed at the top of this schedule)	(b) Description (See instructions reg	garding type of information required.)
PURPOSE	Accounting/Banking Bank Monthly Fee			, , , ,
EXPENDITURE				
Date	Payee name	_		
05/08/2020	Wells Fargo			
Amount (\$)	Payee address			
\$7.00	200 NE 28th Fort Worth,			
	Category (See	Categories listed at the top of this schedule)	Description (See instructions reg	garding type of information required.)
PURPOSE OF	Accounting/E	Banking	Bank Monthly Fee	, , , ,
EXPENDITURE				
Date	Payee name	Doole		
06/08/2020	Wells Fargo			
Amount (\$)	Payee address 200 NE 28th	-		
\$7.00	Fort Worth,	TX 76164		
DUDDOG		Categories listed at the top of this schedule)		parding type of information required.)
PURPOSE OF	Accounting/E	Banking	Bank Monthly Fee	
EXPENDITURE				
				
ľ				