

CA D DATE / OFF CEHOLDER
CA PA GN F NA CE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

Aaron

NICKNAME

A.J

LAST

Garcia

SUFFIX

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1515 Grand Ave

Fort Worth TX 76164

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

714-1376

Date Postmarked

Receipt #

Amount

Date

2

Date Imaged

6 CAMPAIGN
TREASURER
NAME

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

2204 McKinley Ave

Fort Worth

TX

76164

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

235-7547

9 REPORT TYPE

15th day

align

Modified

Final Report / Attach C/OH - FR1

17 CONTRIBUTION TOTALS

**TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)**

\$

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

\$

3725.00

EXPENDITURE

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

9

SUBTOTALS - C/O

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Aaron Garcia

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT



SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 3725.⁰⁰

2.



SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3.



SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4.

SCHEDULE E: LOANS

\$

5.	☐		\$
6.	☐		\$
7.	☐		\$
8.	☐		\$
9.	☐		\$
10.	☐		\$
11.	☐		\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

DO NOT include this page in the report

☐ out-of-state PAC (ID#: _____)

City;

Fort
Worth

☐ Date out-of-state PAC

☐ out-of-state PAC (ID#: _____)

☐ out-of-state PAC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

☐ out-of-state PAC

Date

☐ out-of-state PAC (ID#)

☐ out-of-state PAC

1 Total pages Schedule A1

TI Instructions: Guide explaining how to complete this form

2 FILER NAME

Aaron Garcia

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

7 Amount of contribution (\$)

04-04-

6 Contributor address;
2106 Lee Ave

State; Zip Code
TX 76164

50.00

8 Principal occupation / Job title (See Instructions)

Man r

9 Employer (See Instructions)

National General Lender Services

Full name of contributor

T. Alton Buntin

Amount of contribution (\$)

00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

☐ out-of-state PAC

☐ out-of-state PAC

Date

☐ out-of-state PAC (ID#: _____)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

☐ out-of-state PAC

City;

7 Amount of contribution (\$) _____

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

Advertising Expense

Solicitation/Fundraising Expense

Transportation Equipment & Related Finance

Fees	
Travel Expense	
Gift/Awards/Memorials Expense	
Legal Services	

Loan Repayment/Reimbursement	
Office Overhead/Rental Expense	
Polling Expense	
Printing Expense	
Salaries/Wages/Contract Labor	

The Instruction Guide explains how to complete this form.

Candidate/Officeholder/Political Committee

Other (enter a category not listed above)

Credit Card Payment

5 Payee name
Anedot

6 Amount (\$)

7. Payee address:
(a) **Category** (See Categories listed at the top of this schedule)

A 121.45

1340 Paydras St Suite 1770

City;

State;

Zip Code

New Orleans

LA

70112

8

PURPOSE OF EXPENDITURE

(c) ☐ Check if travel outside of Texas. Complete Schedule T.

(b) Description

☐ Check if Austin, TX, officeholder living expense

Donation Transaction Fees