

RECEIVED

JAN 20 2022

8 1

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)
00000001

2 PAGE #
1 of 7

3 CANDIDATE / MS / MRS / MR FIRST M OFFICE USE ONLY

OFFICEHOLDER
NAME

Mr

Jacinto

Date Received

NICKNAME

LAST

SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1817 Harrington Avenue
Fort Worth, TX 76164

Date Postmarked

☐ Change of Address

5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST M NICKNAME LAST SUFFIX

Mrs.

An ta

Ramos

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN STATE ADDRESS / NO PO BOX PLEASE APT / SUITE # CITY STATE ZIP CODE

TREASURER

ADDRESS: 1817 Harrington Avenue

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Ramos, Jacinto Jr. (Mr.)**14 ACCOUNT #** (Ethics Commission filers)
00000001

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may

POLITICAL

COMMITTEE NAME

Laura Litton

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense

Travel Expense

Postage

Miscellaneous Expense

Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)**1** PAGE #

Schedule: 1/1 Report: 4/7

2 FILER NAME

Ramos, Jacinto Jr. (Mr.)

3 ACCOUNT # (TEC filers)

00000001

4 Date

09/15/2021

5 Payee name

BSN Sports

6 Amount (\$)

\$1,048.50

7 Payee address

TX

City; State; Zip Code

(a) Category (See Categories listed at the top of this schedule.)	(b) Description (See instructions regarding type of information required.)
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]

Advertising Expense
Accounting/Banking

Event Expense

(a) Category (See Categories listed at the top of this schedule.)
**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

(b) Description (See instructions regarding type of information required.)
Campaign Website Expense **SCHEDULE I**

EXPENDITURE CATEGORIES

Expense

ct

E

e

ed Expense

Candidate/Officeholder/Political Committee

I Expense

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: 3/1 6/7 Ramos, Jacinto Jr. (Mr.) 00000001

4 Date 5 Payee name
10/11/2021 Norton

6 Amount (\$) 7 Payee address City; State; Zip Code
\$113.65 TX

8
PURPOSE
OF
EXPENDITURE

Date Payee name
10/11/2021 People's Cafe

Amount (\$) Payee address City; State; Zip Code
\$219.67 6656 Hawrylak
Lake Worth, TX 76135

Description (See instructions regarding type of information required.)

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

o
Candidate/Officeholder/Political Committee
Expense OTHER (enter a category not listed above)

Completor must complete this form

1 PAGE #

Schedule: 4/1

2 FILER NAME

Ramos, Jacinto Jr. (Mr.)

3 ACCOUNT # (TEC filers)

00000001

4 Date

11/07/2021

5 Payee name

The Original Mexican Eats Cafe

\$550.00

1400 N Main Street
Fort Worth, TX 76164**8****PURPOSE
OF
EXPENDITURE**

Food/Beverage Expense

Dinner with Campaign Team