CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Kennedy	MI	OFFICE USE ONL
NAME	NICKNAME LAST Jones	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address		orty; state; zip code	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (817) 465-4497	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST Terry	MI D	Receipt # Amount \$ Date Processed
I NAME	NICKNAME LAST Bertrand	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) Change	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 2016 W. Bardin Rd Arlingto		ZIP CODE
8 CAMPAIGN TREASURER PHONE change	AREA CODE PHONE NUMBER (817) 944-0316	EXTENSION	
9 REPORT TYPE	January 15 30th day before el		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 4 / 4 / 2019	THROUGH 4	Day Year 26 / 2019
11 ELECTION	ELECTION DATE	ELECTION TYPE Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Arlington City Council E	
	GO ТО	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Kennedy Jone	es Campaign 15 Fili	ler ID (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	COMMITTEE NAME		
	X GENERAL	Kennedy Jones Campaign		
	SPECIFIC	COMMITTEE ADDRESS		
	L_Jor Lon to	511 Harmon Terrace Arlington TX	76010	
		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages		Terry D. Bertrand		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	·	
		2016 W. Bardin Rd Arlington TX 76017		
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0			
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 51.52			
	4. TOTAL POLITICAL EXPENDITURES \$ 1665.20			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 61.61		\$ 61.61	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0	
18 AFFIDAVIT				
	MARTHA GAR otary Public, State Comm. Expires 03- Notary ID 5683	of Texas	on required to be reported by me	
AFFIX NOTARY STAM	P/SEALABOVE	,	4	
Sworn to and subsci	ribad bofore me. I	Konnody Some	30th	
day of Ami	10	to certify which, witness my hand and seal of office.	_, this the	
Montha O	garcie	MARTHA GARCIA	Nestary Public	
Signature of officer a	ministering oath	Printed name of officer administering oath Ti	itle of officer administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	19 FILER NAME Kennedy Jones 20 Filer ID (Ethics Co			mmission Filers)	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE				SUBTOTAL AMOUNT	
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	0
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0
4.	4. SCHEDULE E: LOANS			\$	0
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$	1665.20
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$	0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	0
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			0
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			0
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			0
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			0

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundralsing Expense

Accounting/Banking Consulting/Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
Oreux Gard T ayrilent	The Instruction Guide expl	lains how to complete this form.			
1 Total pages Schedule F1:	² FILER NAME Kennedy Jor	nes	3 Filer ID (Ethics Commission Filers)		
4 Date 4/8/2019	5 Payee name USPS				
6 Amount (\$)	7 Payee address; City; State;	Zip Code			
331.55	Internet				
8	(a) Category (See Categories listed at the top of the				
PURPOSE OF EXPENDITURE	advertising expense		Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Kennedy Jones	Office sought City Counci	Office held		
Date	Payee name	·			
4/16/2019	Logo Factory	'			
Amount (\$)	Payee address; City; State;	Zip Code			
736.10	116 N. W. 16th St Grand Prairie, TX 75052				
-	Category (See Categories listed at the top of the	his schedule) Description			
PURPOSE		Check if travel	outside of Texas. Complete Schedule T.		
OF EXPENDITURE	printing expense	Check if Ausl	tin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held		
expenditure to benefit C/OH	Kennedy Jones	City Council			
Date	Payee name	····			
4/18/2019	USPS				
Amount (\$)	Payee address; City; State;	Zip Code			
293.03	Internet				
	Category (See Categories listed at the top of the	his schedule) Description	· · · · · · · · · · · · · · · · · · ·		
PURPOSE OF EXPENDITURE	Advertising Expense		outside of Texas. Complete Schedule T. tin, TX, officeholder living expense		
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held		
Complete ONLY if direct expenditure to benefit C/OH		City Council			
_	ATTACH ADDITIONAL COPIL	ES OF THIS SCHEDULE AS NE	EDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Contributions/Donations Made By Candidate/Officeholder/Political Credit Card Payment	,	Wages/Contract Labor Other (enter a category not listed above)	
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)	
4 Date 4/25/2019	5 Payee name Impression Marketing		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
324.52	1615 W Abrams St #118 Arlingtor	1 TX 76013	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	consulting expense	Check if travel outside of Texas. Complete Schedule T.	
OF EXP ENDITUR E	advertising expense	Check If Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name H Kennedy Jones	Office sought Office held City Council	
		Oity Council	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Рауее пате		
Amount (\$)	Payee address; City; State; Zip Code		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	