#### **CANDIDATE / OFFICEHOLDER** FORM C/OH **COVER SHEET PG 1** CAMPAIGN FINANCE REPORT 2 Total pages filed: 1 Filer ID (Ethics Commission Filers) The C/OH Instruction Guide explains how to complete this form. 18 MS / MRS (MR FIRST 3 CANDIDATE / MI OFFICE USE ONLY OFFICEHOLDER JAMES NAME Date Received NICKNAME SUFFIX Jim JARRATT APT / SUITE #; CITY; 4 CANDIDATE / ADDRESS / PO BOX; ZIP CODE OFFICEHOLDER 1030 E Hwy 377 ST 110 - 278 **MAILING ADDRESS** GrANBURY, TX 76048 Change of Address AREA CODE 5 CANDIDATE/ Date Hand-delivered or Date Postmarked OFFICEHOLDER (817) 219-6765 PHONE Receipt # Amount S FIRST MS MRS / MR 6 CAMPAIGN **TREASURER** Jennieer L. Date Processed NAME NICKNAME Date Imaged Luker CFA STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: CAMPAIGN STATE: ZIP CODE TREASURER 800 Virginia Place **ADDRESS** FT WORTH TX 76107 (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** PHONE (940) 745 1125 9 REPORT TYPE January 15 30th day before election 15th day after campaign Runoff treasurer appointment (Officeholder Only) July 15 8th day before election Exceeded Modified Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Month **COVERED** 05/28/2021 THROUGH 06/18/2021 ELECTION DATE 11 ELECTION ELECTION TYPE Primary Runoff U Other Day Description General Special 06/29/2021 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) MAYOR OF GRANBUR, TX 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 OFFICEHOLDER'S REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME	JAMES "Jim" T. JARRATT 16 Files	ID (Ethics Commission Filers)
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)	\$ Ø
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ \$
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,922.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ Ø
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ Ø
18 SIGNATURE	swear, or affirm, under penalty of perjury, that the accompanying report is true and co	prrect and includes all information
	equired to be reported by me under Title 15, Election Code.	
		hearth
	Pome g. 1.	janay
	Signature of Gandidate	or Officeholder
	Please complete either option below:	
	riease complete entrei option selow.	
(1) Affidavit		
(1)7411124111		
NOTARY STAMP/SE	AL	
101/111 01/1111 / 02	· <del>-</del>	
Swom to and subscribe	d before me by this the	day of,
20, to certif	fy which, witness my hand and seal of office.	
Signature of officer adminis	tering oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declara	tion	
		1.0
My name is O Av	nes 1 - JARRATT and my date of birth is 12	- /24 /1944
Mailing	30 F Hum 377 ST110-228 (Transviu TR	76048. USA.
My address is	nes T. JARRATT and my date of birth is 12  30 E Hwy 377 ST/10-238 GranBvry TR.  (street) (city) (state)  cood County, State of Texas on the OG day of 20 (month)	(zip code) (country)
	(Street) (City) (State)	
Executed in	ood County, State of <u>(exas</u> , on the <u>OG</u> day of (month)	(year)
	karres U	- Tradt
	Signature of Candidate/Off	iceholder (Declarant)
I .		•

## **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

19 FILERNAME 20 Filer ID (Ethic	cs Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 388.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	s Ø
4. SCHEDULE E: LOANS	\$ Ø
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ P
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	s Ø
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ Ø
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 13,014.07
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 2,520.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF CIC	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ Ø
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	s Ø

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

#### SCHEDULE A2

If the requ	uested information is not applicable, DO NOT inclu	ide this page	e in the report.	
Т	he Instruction Guide explains how to complete this fo	rm.	1 Total pages Sched	dule A2:
2 FILER NAM	JAMES T. "Jim "JARRAT	₹	3 Filer ID (Ethics C	ommission Filers)
4 TOTAL C	OF UNITEMIZED IN-KIND POLITICAL CONTR	BUTIONS	\$	388.00
5 Date	6 Full name of contributor out-of-state PAC (ID#:	ensulti	8 Amount of Contribution \$	9 In-kind contribution description
6	7 Contributor address; City; State;	Zip Code	388.~	Newspaper Ad
40.04	Granbury.			ide of Texas. Complete Schedule T.
	cupation / Job title (FOR NON-JUDICIAL)(See Instructions しからい (十みべて		Self	IAL)(See Instructions)
	s principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	JDICIAL) (See Instructions)
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	ise (if any) (FOR JUDICIAL)
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		• • • • • • • • • • • • • • • • • • • •	
	NA			
Date	Full name of contributor	Zip Code	Amount of Contribution \$	In-kind contribution description
Principal and		·	Check if travel outsi	l de of Texes. Complete Schedule T.
- Tincipal Occ	rupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>		
· · · · · · · · · · · · · · · · · · ·				
I	ATTACH ADDITIONAL COPIES OF f contributor is out-of-state PAC, please see instruct	THIS SCHEDU	LEAS NEEDED	requirements
	in a court of product des matruct	on guide 101	againonai tehorung	requirements.

SCHEDULE F4

ii tiio requested iiioni	12.007.10 Not applicable, 20 110 1 110 1410		
	EXPENDITURE CATEGOR!	ES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fees Office Food/Beverage Expense Pollify Gift/Awards/Memorials Expense Print	n Repayment/Reimbursement te Overhead/Rental Expense ng Expense ting Expense ries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
	The instruction Guide explains how	v to complete this form.	
1 Total pages Schedule F4:	James 7. Jina	JARRATT	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO	ACREDIT CARD	\$ 13,014.0
5 Date OG/19/21	6 Payee name Blue Shark Medi	H	
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
270.62	San Fransisco	CA	
9 TYPE OF EXPENDITURE	Political N	on-Political	
10	(a) Category (See Categories listed at the top of this schedu	(b) Description	
PURPOSE OF Expenditure	Advertising	Video	
	(C) Check if travel outside of Texas. Complete Schedu	e T. Check if A	ustin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		A
06/15/2021	FAST Signs		
Amount (\$)	Payee address;	City;	State; Zip Code
1,211.40		GrANBURY	7x 76048
TYPE OF EXPENDITURE	Political	Ion-Political	
	Category (See Categories listed at the top of this sched	ule) Description	
PURPOSE OF EXPENDITURE	Advertising	526	w S
	Check if travel outside of Texas. Complete Schedu	ule T. Check if A	austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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j	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS N	EENED

### SCHEDULE F4

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

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Constitute Officebookdar/Bolitical Committee

Event Expense Fees Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Sataries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

	The instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F4:	JAMES T. Jim J	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CRE	# 13014.07
5 Date 06/16/2021	6 Payee name PIC PRINTING	
7 Amount (\$)	8 Payee address;	City; State; Zip Code
806.46	IF.	PRT WORTH TX
9 TYPE OF EXPENDITURE	Political Non-Pol	itical
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advatising	Push CAROS
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder tiving expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Of	ffice saught Office held
Date	Payee name	
06/13/2021 Amount (\$)	Signs on Cheap	)
Amount (\$)	Payee address;	City; State; Zip Code
5 99.90		On-Lieve
TYPE OF EXPENDITURE	Political Non-Po	Altical
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Advatising	Signs
	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 O	ffice sought Office held
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SCHEDULE F4

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Advertising Services	EXPENDITURE CATEGORIES F	* *	Schinitation (E. a.d.	ing Eynense
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Fees Office Over Food/Beverage Expense Polling Exp y Gift/Awards/Memorials Expense Printing Ex		Solicitation/Fundrais Transportation Equit Travel In District Travel Out Of Distric Other (enter a category)	oment & Related Expense at
	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F4:	JAMES 7. "Jing"	JARRATT	3 Filer ID (Ethics	Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$ 13,014.	07
5 Date 06   09   20 21	6 Payee name			
7 Amount (\$)	8 Payee address;	City;	State;	Zip Code
2,160,25		GANBURG	1. 7x	76048
9 TYPE OF EXPENDITURE	Political Non-Po	olitical		
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF Expenditure	Advatising	Signs	<b>S</b>	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Au	istin, TX, officeholder livi	ng expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name C	Office sought	Office	held
Date 06   209   2021	Payee name			
Amount (\$)	HAST Signs Payee address;	City;	State;	Zip Code
2010.74		r. Worth	TX	76048
TYPE OF EXPENDITURE	Political Non-P	olitical		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF Expenditure	Advertising	Brod	rupes	
, -	Check if travel outside of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder ilv	ing expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name C	Office sought	Office	held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

SCHEDULE F4

If the requested inform	nation is not applicable, DO NOT include this	s page in the report.
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Fees Office Over Food/Beverage Expense Polling Expense Printing Expense	nyment/Reimbursement Solicitation/Fundralsing Expense Transportation Equipment & Related Expense pense Travel In District pense Travel Out Of District Vages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F4:	JAMES 1. Jim J	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	ZED EXPENDITURES CHARGED TO A CF	\$ 13,014.07
5 Date の6/09/2021	6 Payee name Chik - Fil - A	
7 Amount (\$)	8 Payee address;	City; State; Zip Code
43.12		Grandury. TX 76048
9 TYPE OF EXPENDITURE	✓ Political Non-P	olitical
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF	Food	Block WAIKERS
EXPENDITURE	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
06/08/2021	Bayside Oerm	Citv: State: Zip Code
Amount (\$)	Payee address;	
257.72		Grandury Tx 76048
TYPE OF EXPENDITURE	Political Non-F	Political
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Other	Sun Screen Fa Block Walker
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

### SCHEDULE F4

	EXPENDITURE CATEGORIES FOR BOX 10(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	d Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F4:	2 FILERNAME JAMES T. Jim JAMES T. Taratt  3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 13,014.07
5 Date	6 Payee name
06/04/2021	PIC PRINTING
7 Amount (\$)	8 Payee address; City; State; Zip Code
806.46	FT. WORTH TX 76048
9 TYPE OF EXPENDITURE	∑ Political Non-Political
10	(a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE	Advertising Push Cords
OF EXPENDITURE	Advertising Push Cords
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense
11	Candidate / Officeholder name Office sought Office held
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	
	Pavee name
Date OC LOY 12021	Payee name  TRACTOR Sugala
Date  OG   0 4   2021  Amount (\$)	Payee name  TRACTOR SUPPLY  Payee address; City; State; Zip Code
06/04/2021	TRACTOR Supply Payee address; City; State; Zip Code
06/04/2021	TRACTOR Supply
OG   04   2021 Amount (\$)	TRACTOR Supply Payee address; City; State; Zip Code
06   04   2021 Amount (\$) 667, 24	TRACTOR Supply Payee address; City; State; Zip Code  GRANBURY, TX 76048
OG   04   2021  Amount (\$)  GG 7, 24  TYPE OF EXPENDITURE  PURPOSE	TRACTOR Supply  Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description
06   04   2021 Amount (\$) 667, 24  TYPE OF EXPENDITURE	TRACTOR Supply Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description  Other   Fence Posts for Signs
OG   04   2021  Amount (\$)  GG7, 24  TYPE OF EXPENDITURE  PURPOSE OF	TRACTOR Supply  Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description
OG   04   2021  Amount (\$)  GG7, 24  TYPE OF EXPENDITURE  PURPOSE OF	TRACTOR Supply Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description  Other   Fence Posts for Signs
OG   04   2021  Amount (\$)  GG7, 24  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	TRACTOR Supply  Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description  OTHER   Fence Posts for Signs    Check if travel outside of Texas. Completo Schedule T.   Check if Austin, TX, officeholder living expense
OG   04   2021  Amount (\$)  GG7, 24  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	TRACTOR Supply  Payee address; City; State; Zip Code  GRANBURY, TX 76048    Political   Non-Political  Category (See Categories listed at the top of this schedule)   Description  OTHER   Fence Posts for Signs    Check if travel outside of Texas. Completo Schedule T.   Check if Austin, TX, officeholder living expense

## SCHEDULE F4

	EXPENDITURE CATEGORII	ES FOR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Fees Offic Food/Beverage Expense Polling Gift/Awards/Memorials Expense Print	Repayment/Reimbursement e Overhead/Rental Expense ng Expense ing Expense rles/Wages/Contract Labor r to complete this form.	Solicitation/Fundraisis Transportation Equipr Travel In District Travel Out Of District Other (enter a catego	ment & Related Expense
1 Total pages Schedule F4:	2 FILER NAME  JAMES T. Jim		3 Filer ID (Ethics (	Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO		\$ 13,014	.07
5 Date	6 Payee name	1	<del> </del>	
06/04/2021	Signs on the ( 8 Payee address;	she ap		
7 Amount (\$)	8 Payee address;	City;	State;	Zip Code
599.90		Online		
9 TYPE OF EXPENDITURE	Political N	on-Political		
10	(a) Category (See Categories listed at the top of this schedu	(b) Description		
PURPOSE OF Expenditure	Advertising	Sign	n S	
EXI ENDITORE	(c) Check if travel outside of Texas. Complete Schedul	e T. Check if A	austin, TX, officeholder tiving	expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office h	eld
Date	Payee name			
06/04/2021	FAST Signs			
Amount (\$)	Payee address;	City;	State;	Zip Code
153.55		Grans	ing Tx	76048
TYPE OF Expenditure	Political N	lon-Political		
	Category (See Categories listed at the top of this schedu	ule) Description		
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	Check if travel outside of Texas. Complete Schedu	le T. Check if	Austin, TX, officeholder livir	g expense
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## SCHEDULE F4

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	EXPENDITURE CATEGO	PRIES FOR BOX 10(a)	
Advertising Expense		Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Consulting Expense	Food/Beverage Expense	Office Overhead/Rental Expense Polling Expense	Transportation Equipment & Related Expense Travel in District
Contributions/Donations Made By Candidate/Officeholder/Politica		Printing Expense Salaries/Wages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
Cardidater of the cholden routes	The Instruction Guide explains		
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED T		\$ 13,014.07
5 Date	6 Payee name		
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7 Amount (\$)	8 Payee address;	City;	State; Zip Code
1,000.00		Grangue	) Tx 76048
9 TYPE OF EXPENDITURE	Political	Non-Political	
10	(a) Category (See Categories listed at the top of this so	hedule) (b) Description	
PURPOSE	<b>^ .</b>		
OF	Advertising	Sign	<u>S</u>
EXPENDITURE		<u>_</u>	
	(C) Check if travel outside of Texas. Complete Sci	nedule T Check if Au	estin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Deta	Payee name		
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06/02/2021			
Amount (\$)	Payee address;	City;	State; Zip Code
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1500.00		ONAI-CC	
TYPE OF EXPENDITURE	Political	Non-Political	
	Category (See Categories listed at the top of this se		_
PURPOSE	1 4	S.c.	Design
OF	Advertising	0191	222.1.0
EXPENDITURE	Check if travel outside of Texas. Complete So	todula T	ustin, TX, officeholder living expense
	CiteCk il travel outside of Texas. Complete Sc	AROUNE 1. CRECK IT A	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NI	EEDED
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### SCHEDULE F4

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

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

	d Committee Legal Services Salaries/W The Instruction Guide explains how to c	/ages/Contract Labor omplete this form.	Other (enter a category not listed above)
1 Total pages Schedule F4:	2 FILERNAME JAMES T. Jim	JARRATT	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$ 13,014.07
5 Date	6 Payee name		
06/02/2021	TTAPLES.		
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
98.84		Granzo	ey Tx 76048
9 TYPE OF EXPENDITURE	Political Non-Po	olitical	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF Expenditure	Othen	Clip Board	ds for Block walters
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	stin, TX, afficeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name C	Office sought	Office held
	T		
Date	Payee name		ĺ
	1 · ·		
Date 06 0 2 2021 Amount (\$)	Payee address;	City;	State; Zip Code
	All About Sports	City;	State: Zip Code
06 02 2021 Amount (\$)	All About Sports Payee address;	City;	
06   02   2021 Amount (\$)  227.27  TYPE OF	All About Sports Payee address;	Granzo	
OG   02   2021  Amount (\$)  227.27  TYPE OF EXPENDITURE  PURPOSE OF	All About Sports Payee address;  Political Non-P	City;  Grango	12 Tx 76048
OG   02   2021  Amount (\$)  227.27  TYPE OF EXPENDITURE  PURPOSE	All About Sports Payee address;  Political Non-P	City;  Gran32  Political  Description  Bann	12 Tx 76048
OG   02   2021  Amount (\$)  227.27  TYPE OF EXPENDITURE  PURPOSE OF	Payee address;  Political Non-P  Category (See Categories listed at the top of this schedule)  Adwartsing  Check if travel outside of Texas. Complete Schedule T.	City;  Gran32  Political  Description  Bann	12 TX 76048
Amount (\$)  227.27  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee address;  Political Non-P  Category (See Categories listed at the top of this schedule)  Adwartsing  Check if travel outside of Texas. Complete Schedule T.	City;  GYAM32  Political  Description  BANN  Check if Au	21.

SCHEDULE F4

	EXPENDITURE CATEGORIES F	• •	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E		Solicitation/Fundratsing Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
	The Instruction Guide explains how to o	omplete this form.	
1 Total pages Schedule F4:	2 FILERNAME JAMES T. Jim JA	+RRATT	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	ZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$ 13,014.07
5 Date	6 Payee name		
06 02 2021	LAKE View Inn		
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
189.25		Grangu	Ry 7x 76048
9 TYPE OF EXPENDITURE	✓ Political Non-P	olitical	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE		0 1.	T. 11 Ma dia
OF Expenditure	Other	Koom Char	ge for Videographer
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought	Office held
Complete ONLY if direct expenditure to benefit C/OH  Date	Payee name		Office held
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 202)	Payee name All About Sport	3	
Complete ONLY if direct expenditure to benefit C/OH  Date	Payee name		Office held State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 202)	Payee name All About Sport	City;	
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 2021  Amount (\$)	Payee name  All About Sport  Payee address;	City;	State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date O(5 - 0( - 202)  Amount (\$)  4//, 35	Payee name  All About Sport  Payee address;	S City; CYANBUR	State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date 06-01-2021  Amount (\$)  4//, 35  TYPE OF EXPENDITURE	Payee name  All About Sport  Payee address;    V Political	City;  CYANGUA  Political  Description	State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 2021)  Amount (\$)  4//, 35  TYPE OF EXPENDITURE	Payee name  All About Sport  Payee address;	City;  CYANGUA  Political  Description	State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date 06 - 01 - 2021  Amount (\$)  4//. 35  TYPE OF EXPENDITURE  PURPOSE OF	Payee name  All About Sport  Payee address;    V Political	City;  CYANGUA  Political  Description  "T"Shire	State; Zip Code
Complete ONLY if direct expenditure to benefit C/OH  Date 06 - 01 - 2021  Amount (\$)  4//. 35  TYPE OF EXPENDITURE  PURPOSE OF	Payee name All About Sport Payee address;    V Political	City;  CYANGUA  Political  Description  "T"Shire	State; Zip Code ey Tx 76048 es Tx 86048
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 2021)  Amount (\$)  4//. 35  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name All About Sport  Payee address;    V Political	City;  Crangua  Political  Description  " T Shire  Check if Aust	State; Zip Code  ey Tx 76048  ets Fa Bbck Walku S  stin, Tx, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH  Date  O(5 - O( - 2021)  Amount (\$)  4//. 35  TYPE OF EXPENDITURE  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee name All About Sport  Payee address;    V Political	City;  CYANGUA  Political  Description  Check if Aust	State; Zip Code  Ey Tx 76048  Ets Fa Block Walku S  stin, Tx, officeholder living expense  Office held

#### SCHEDULE G

	EXPENDITURE CATEGORIES	FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E By Gift/Awards/Memorials Expense Printing B	Expense Travel Out Of District Wages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule G:	2 FILER NAME James T. Jim	3 Filer ID (Ethics Commission Filers)
4 Date 6 - 19 - 21	5 Payee name  Shark M	dia
6 Amount (\$)	7 Pavee address:	City; State; Zip Code
270.62 Reimbursement from political contributions intended		SAN FRANCISCO CA
8 purpose	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertising	Video
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 6-1 thr 2-21	Payee name All About Sports	
Amount (\$)	Payee address;	City; State; Zip Code
638.62 Reimbursement from political contributions intended		Granbury TX 76048
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising	Description T's & Banner
·	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name  OH	Office sought Office held
Date	Payee name	
6-8-21	Bryside Derm	
Amount (\$)	Payee address;	City; State; Zip Code
257.72 Reimbursement from political contributions intended		Granguay Tx 76048
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Other	Sunscien For Block Walkers
	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 S	SCHEDULE AS NEEDED

### SCHEDULE G

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	EXPENDITURE CATEGO	DRIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Card Payment	Fees ( Food/Beverage Expense F By Gift/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Printing Expense Printing Expense Travel In District Travel Out Of District Other (enter a category not listed above) Travel to Complete this form.
1 Total pages Schedule G:	2 FILER NAME JAMES T. Jim	JARRATT  3 Filer ID (Ethics Commission Filers)
4 Date 6-9-21	5 Payee name Chik-F	1 -1A
6 Amount (\$) 43./2 Reimbursement from political contributions intended	7 Payee address;	City: State; Zip Code Gran Bueg TX 76048
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche	God on Block Walkers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) Check if travel outside of Texas. Complete Sched	Check if Austin, TX, officeholder living expense  Office sought  Office held
6-3 th/- 9-21	Payee name	n S
Amount (\$)  (6,535,94  Reimbursement from political contributions intended	Payee address;	Granzury Tx 76048
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche	Signs / Push (ands/Maili
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name  OH	Office sought Office held
Date 6 · 2 - 2 i	Payee name  LAKE Uicu	······································
Amount (\$)  189,25  Reimbursement from political contributions intended	Payee address;	Grangury Tx 76048
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sche  OHLE  Check if travel outside of Texas. Complete Scheo	Room Charge For Videographer
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED

### SCHEDULE G

111-1111		EXPENDITURE CATE	EGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made & Candidate/Officeholder/Politic Credit Card Payment	-	Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Over Palling Ex Printing E: Salaries/V	xpense Nages/Contract Labor	Solicitation/Fundraisir Transportation Equipr Travel in District Travel Out Of District Other (enter a categor	ment & Related Expense
1 Total pages Schedule G:	2 FILER NA	ME			3 Filer ID (Ethics	Commission Filers)
4 Date 6-4 Hw/ 15-21	5 Payee nam	DIC Printin	9			
6 Amount (\$)    (612.92  Reimbursement from political contributions	7 Payee add			City:	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this  Aduction  Check if travel outside of Texas. Complete is		(b) Description	ends	xpense
9 Complete ONLY if direct expenditure to benefit C/OH	<u>``</u>	ate / Officeholder name	Cureous I.	Office sought	., i.e., omeencader aving (	Office held
Date 6-4 Hr. 13-21	Payee nan	ne Signs On th	e Ch	CAP		
Amount (\$)  1 99.80  Reimbursement from political contributions intended	Payee add		_	city; n Line	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this  Advaration of the Check if travel outside of Texas. Complete	· · · -	Description  Jard  Check if Austin	Sign S	)xpense
Complete ONLY if direct expenditure to benefit C/C	Candida	ate / Officeholder name		Office sought		Office held
Date (6 - 2 - 2 \	Payee nan	URSTL (	CREA	TIVE		
Amount (\$)  1,500.00  Reimbursement from political contributions intended	Payee add	<del></del>		city: Online	State;	Zip Code
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this  Advert's in  Check if travel outside of Texas. Complete		Description  De Sign  Check if Austin	n, TX, officeholder living (	expense
Complete ONLY if direct expenditure to benefit C/OH		ate / Officeholder name		Office sought		Office held
	ATTA	ACH ADDITIONAL COPIES	OF THIS S	CHEDULE AS NEED	)ED	

### SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhea Polling Expens Printing Expens Satarles/Wage	se s/Contract Labor	Travel in District Travel Out Of Dist	upment & Related Expense
<u>-</u>		The Instruction Guide expl	iains now to com	piete this form.		
1 Total pages Schedule G:	2 FILER NA	JAMES T.	Jim' &	TATTAL	3 Filer ID (Eth	ics Commission Filers)
4 Date 6-2-2\	5 Payee nam					
6 Amount (\$) 98.84	7 Payee add	dress;		City;	State	; Zip Code
Reimbursement from political contributions intended		0		GIAUB	ury TX	
8 PURPOSE OF	1	(See Categories listed at the top of thi		Description Lip Bo A	rds Fu S	كالمدلز للهالاءة
EXPENDITURE						
		Check if travel outside of Texas. Complete		<del></del>	in, TX, officeholder livin	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name	Offi	ice sought		Office held
Date	Payee nan					
6.4.21		TRACTOR	Suppl	4		
Amount (\$)	Payee add	dress;	•	City;	State	e; Zip Code
Reimbursement from political contributions intended				GranBu	ry TX	
DUDDOG	Category	(See Categories listed at the top of th		Description		
PURPOSE OF EXPENDITURE		Other	•	Ence S	takes For	. 4x4 Signs
ALEXY		Check if travel outside of Texas. Complete	e Schedule T.	Check if Aust	tin, TX, officeholder livir	
Complete ONLY if direct expenditure to benefit Co	t	ate / Officeholder name	Off	ice sought		Office held
Date	Payee nam					
6-10.21		JARED FRO	٦ ١	· · ·		
Amount (\$)	Payee add	dress;		City;	State;	Zip Code
Reimbursement from political contributions intended				Tran Bur	5 Tx	76048
PURPOSE	Category	(See Categories listed at the top of th	nis schedule)	Description		
OF EXPENDITURE		Contract La	BOR	いなるへよ		
		Check if travel outside of Texas. Complete	e Schedule T.	Check if Aust	tin, TX, officeholder livin	
Complete ONLY if direct	Candid	late / Officeholder name	Off	fice sought		Office held
expenditure to benefit C/OF	1					

#### SCHEDULE G

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Salarles/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name 6-5-21 6 Amount (\$) 7 Payee address; Zip Code 2080.00 Reimbursement from political contributions Jefferson TX intended R (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City; State: Zip Code Relmbursement from political contributions intended 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 Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Pavee name Amount (\$) Payee address; City; State: Zip Code Reimbursement from political contributions intended 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 Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED