

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE 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: <span style="font-size: 2em; font-weight: bold;">25</span>								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI Mr                      James                      A. <hr style="border-top: 1px dashed black;"/> NICKNAME                      LAST                      SUFFIX Jim                      Mann	<b>OFFICE USE ONLY</b> Date Received <div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p style="margin: 0;"><b>RECEIVED</b></p> <p style="margin: 0; font-weight: bold;">OCT 26 2020</p> <p style="margin: 0; font-size: 0.8em;">City Manager's / City Secretary's Office</p> </div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE P.O. Box 1693 Denton TX 76202	Date Hand-delivered or Date Postmarked									
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION (940)                      594 - 3501	Receipt #                      Amount \$									
6 CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI Mr                      Pat <hr style="border-top: 1px dashed black;"/> NICKNAME                      LAST                      SUFFIX Smith	Date Processed  Date Imaged									
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 1417 Cambridge Ln. Denton TX 76209										
8 CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION (940)                      735 - 3234										
9 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)
<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)								
<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)								
10 PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month    Day    Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month    Day    Year</td> </tr> <tr> <td style="text-align: center; font-size: 1.2em;">09 / 25 / 2020</td> <td></td> <td style="text-align: center; font-size: 1.2em;">10 / 24 / 2020</td> </tr> </table>			Month    Day    Year	THROUGH	Month    Day    Year	09 / 25 / 2020		10 / 24 / 2020		
Month    Day    Year	THROUGH	Month    Day    Year									
09 / 25 / 2020		10 / 24 / 2020									
11 ELECTION	ELECTION DATE Month    Day    Year 11 / 03 / 2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special									
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Denton City Council, Place 6 at Large									

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

**14 C/OH NAME** James A. Mann **15 Filer 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.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>—</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>17,070.00</u>
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>—</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>23,181.12</u>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>—</u>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>1,000.00</u>

**18 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.

**ROSA A. RIOS**  
Notary Public, State of Texas  
Comm. Expires 05-23-2024  
Notary ID 8760780

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James A. Mann, this the 26<sup>th</sup> day of October, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Rosa A. Rios  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,070. <sup>00</sup>
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000. <sup>00</sup>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 23,181.12
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>10</b>
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Carrell Ann Simmons</b>	7 Amount of contribution (\$)
<b>9/25/20</b>	6 Contributor address; City; State; Zip Code <b>709 Ticonderoga Dr. Denton TX 76205</b>	<b>100<sup>00</sup></b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark Michniacki</b>	Amount of contribution (\$)
<b>9/28/20</b>	Contributor address; City; State; Zip Code <b>3813 Cuddy Dr. Denton TX 76210</b>	<b>100<sup>00</sup></b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Richard Cooper</b>	Amount of contribution (\$)
<b>9/28/20</b>	Contributor address; City; State; Zip Code <b>201 Royal Oaks Ct. Denton TX 76210</b>	<b>50<sup>00</sup></b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Melissa Fairchild</b>	Amount of contribution (\$)
<b>9/30/20</b>	Contributor address; City; State; Zip Code <b>625 Northridge St. Denton 76210</b>	<b>100<sup>00</sup></b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kirk/Debra Watson</i>	7 Amount of contribution (\$)  <i>100<sup>00</sup></i>
<i>9/30/20</i>	6 Contributor address; City; State; Zip Code <i>1210 Dover St. Denton TX 76209</i>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shawn Martin</i>	Amount of contribution (\$)  <i>200<sup>00</sup></i>
<i>9/30/20</i>	Contributor address; City; State; Zip Code <i>310 Cottonwood Trl. Shady Shores TX 76208</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shane A. Wells</i>	Amount of contribution (\$)  <i>\$ 500.<sup>00</sup></i>
<i>10/4/20</i>	Contributor address; City; State; Zip Code <i>3700 St. Johns Dr. Denton TX 76210</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Apartment Association of Greater Dallas</i>	Amount of contribution (\$)  <i>\$ 1,500.<sup>00</sup></i>
<i>10/1/20</i>	Contributor address; City; State; Zip Code <i>5728 LBJ Freeway Ste 100 Dallas TX 75240</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>James Mann</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/20</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hal Reed</i> 6 Contributor address; City; State; Zip Code <i>2414 Northwood Ter. Denton Tx 76209</i>	7 Amount of contribution (\$)  <i>\$ 100</i>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>9/28/20</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jeff and Judy Fairchild</i> Contributor address; City; State; Zip Code <i>625 Northridge St. Denton Tx 76201</i>	Amount of contribution (\$)  <i>\$ 300.<sup>GA</sup></i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>10/2/20</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lewis Toland</i> Contributor address; City; State; Zip Code <i>9700 Teakwood Ave. Denton Tx 76207</i>	Amount of contribution (\$)  <i>\$ 100.<sup>00</sup></i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>9/30/20</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joe Alford</i> Contributor address; City; State; Zip Code <i>1608 Lynhurst Denton TX 76205</i>	Amount of contribution (\$)  <i>\$ 100.<sup>00</sup></i>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>James Mann</b>		3 Filer ID (Ethics Commission Filers) <b>74-1801786</b>
4 Date <b>9/25/20</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Texas Association of Realtors Political Action Committee</b>	7 Amount of contribution (\$) <b>\$2,000.<sup>00</sup></b>
6 Contributor address; City; State; Zip Code <b>P.O. Box 2246 Austin Texas 78768</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>9/30/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ryan P. Jordan</b>	Amount of contribution (\$) <b>\$200</b>
Contributor address; City; State; Zip Code <b>6231 Berryhill St. Dallas Tx 75231</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>9/28/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Grant Pearson</b>	Amount of contribution (\$) <b>\$100</b>
Contributor address; City; State; Zip Code <b>15801 Artist Way Apt. 4415 Addison Tx 75001</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>9/29/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>John J. McDermott</b>	Amount of contribution (\$) <b>\$100</b>
Contributor address; City; State; Zip Code <b>6201 Piping Rock Ln. Houston TX 77057</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>James Mann</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/27/2020</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert Harris</b>	7 Amount of contribution (\$) <b>\$200.00</b>
6 Contributor address; City; State; Zip Code <b>P.O. Box 1352 Denton TX 76202</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>10/6/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kirk Wilson</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>10739 Bridge Hollow Ct. Dallas TX 75229</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>10/08/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Carl Anderson</b>	Amount of contribution (\$) <b>\$200.00</b>
Contributor address; City; State; Zip Code <b>114 Mustang Trl. Shady Shores TX 76208</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>10/7/20</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Glan Carter</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>13247 Cashstos Mill Rd. Sanger TX 76264</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Mann

3 Filer ID (Ethics Commission Filers)

4 Date

10/16/20

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Kelley Morgan

6 Contributor address; City; State; Zip Code

409 Ridgecrest Cir. Denton TX 76205

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/15/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Barbara Russell

Contributor address; City; State; Zip Code

1324 Heather Lane Denton TX 76201

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/16/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Anonymous

Contributor address; City; State; Zip Code

Amount of contribution (\$)

\$20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Dallas Builders Association PAC

Contributor address; City; State; Zip Code

5816 W. Plano Pkwy Plano TX 75093

Amount of contribution (\$)

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Mann

3 Filer ID (Ethics Commission Filers)

4 Date

10/15/20

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Samantha Bean

7 Amount of contribution (\$)

\$800.<sup>00</sup>

6 Contributor address; City; State; Zip Code

3011 68th St. Lubbock Tx 79413

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/15/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Andy Bean

Amount of contribution (\$)

\$800.<sup>00</sup>

Contributor address; City; State; Zip Code

3011 68th St. Lubbock Tx 79413

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Charlie Hamilton

Amount of contribution (\$)

\$400.<sup>00</sup>

Contributor address; City; State; Zip Code

5422 CR 7330 Lubbock Tx 79424

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Kathleen Hamilton

Amount of contribution (\$)

\$400.<sup>00</sup>

Contributor address; City; State; Zip Code

5422 CR 7330 Lubbock Tx 79424

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Mann

3 Filer ID (Ethics Commission Filers)

4 Date

10/21/2020

5 Full name of contributor

Kent & Cheryl Key

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$4,000.00

6 Contributor address; City; State; Zip Code

3100 Triple Crown Ct. Denton Tx 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/19/2020

Full name of contributor

Andy Priest

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$2,000.00

Contributor address; City; State; Zip Code

675 Bering Dr. Ste 580 Houston Tx 77057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/6/20

Full name of contributor

Thomas Wilson

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

10739 Bridge Hollow Ct. Dallas Tx 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/7/20

Full name of contributor

Andrew Hydock

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

8401 Mill Creek Ln. Denton Tx 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Mann

3 Filer ID (Ethics Commission Filers)

4 Date

10/8/20

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Hunter Scruggs

6 Contributor address; City; State; Zip Code

4112 Fanita Pl. Denton Tx 76210

7 Amount of contribution (\$)

\$ 25.<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/11/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

William Sullivan

Contributor address; City; State; Zip Code

1716 Emery St. Denton Tx 76201

Amount of contribution (\$)

\$ 100.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Steven Johnson

Contributor address; City; State; Zip Code

1907 Stonegate Dr. Denton Tx 76205

Amount of contribution (\$)

\$ 25.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/14/20

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Walter Huzarevic

Contributor address; City; State; Zip Code

5925 Westcrest Dr. E Edgediff Village Tx 76134

Amount of contribution (\$)

\$ 50.<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

James Mann

3 Filer ID (Ethics Commission Filers)

4 Date

10/14/20

5 Full name of contributor

Joe Smith

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

\$ 50.<sup>00</sup>

6 Contributor address; City; State; Zip Code

2317 Kingston Tr. Denton TX 76209

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/20/20

Full name of contributor

Walter Huzarevic

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

\$ 25.<sup>00</sup>

Contributor address; City; State; Zip Code

5925 Westcrest Dr. Edgecliff Village Tx 76134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

**LOANS**

**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <u>1</u>
2 FILER NAME <u>James Mann</u>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <u>01/08/2020</u>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <u>James A. Mann</u>	9 Loan Amount (\$) <u>\$1,000.<sup>00</sup></u>
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <u>3933 Miramar Dr. Denton, Tx 76210</u>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) <u>Clergy</u>		13 Employer (See Instructions) <u>New Life Church</u>
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# 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  
Credit Card Payment

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  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>11</b>		2 FILER NAME <b>James Mann</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>9/25/20</b>		5 Payee name <b>Rosas Cafe'</b>			
6 Amount (\$) <b>\$22.04</b>		7 Payee address; City; State; Zip Code <b>1275 S. Loop 288 Denton Tx 76205</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food / Beverage Exp.</b>		(b) Description <b>Lunch with Volunteer</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/6/20</b>		Payee name <b>Denton County G.O.P.</b>			
Amount (\$) <b>\$50.00</b>		Payee address; City; State; Zip Code <b>2921 Country Club Rd. #102 Denton Tx 76210</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>		Description <b>Table Registration</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/11/20</b>		Payee name <b>Marty B's</b>			
Amount (\$) <b>\$78.06</b>		Payee address; City; State; Zip Code <b>2664 FM 407 Bartonville, Tx 76266</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food/Beverage Exp.</b>		Description <b>Denton Co G.O.P. Event</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>James Mann</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/30/2020</b>	5 Payee name <b>Google</b>
----------------------------	-------------------------------

6 Amount (\$) <b>\$ 47.04</b>	7 Payee address; <b>1600 Amphitheatre Way Mountain View CA 94043</b>
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Google Cloud - Sept.</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/1/2020</b>	Payee name <b>Oh Glory! Tee Co.</b>
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Amount (\$) <b>\$ 151.56</b>	Payee address; <b>3024 Lake Ridge Dr. Sanger TX 76266</b>
---------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Tee shirts for volunteers (x10)</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if 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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Date <b>10/1/2020</b>	Payee name <b>U.S.P.S</b>
--------------------------	------------------------------

Amount (\$) <b>\$ 11.00</b>	Payee address; <b>101 E. McKinney St. Denton TX 76202</b>
--------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>20 Stamps</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if 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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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>James Mann</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/30/2020</b>	5 Payee name <b>North Texas Print Solutions</b>
----------------------------	--

6 Amount (\$) <b>\$ 175.31</b>	7 Payee address; City; State; Zip Code <b>2077 Switzer Rd. Sanger Texas 76266</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>6 car magnets</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>10/01/2020</b>	Payee name <b>Office Depot / office Max</b>
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Amount (\$) <b>\$565.04</b>	Payee address; City; State; Zip Code <b>2300 San Jacinto Blvd. Denton TX 76205</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Stamps for mailer</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>10/01/2020</b>	Payee name <b>Office Depot / office Max</b>
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Amount (\$) <b>\$264.11</b>	Payee address; City; State; Zip Code <b>2300 San Jacinto Blvd. Denton TX 76205</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	Description <b>Cartridges for copier</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>James Mann</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/3/2020</b>	5 Payee name <b>Chili's</b>
----------------------------	--------------------------------

6 Amount (\$) <b>\$49.76</b>	7 Payee address; <b>2406 I-35E. South Denton, TX 76201</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food / Beverage Expense</b>	(b) Description <b>Lunch / Block walkers</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <b>10/4/2020</b>	Payee name <b>North Texas Print Solutions</b>
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Amount (\$) <b>\$140.25</b>	Payee address; <b>2077 Switzer Rd. Sanger TX 76266</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Mail merge, Imprint and fold mailout.</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <b>10/09/20</b>	Payee name <b>It's a Burger</b>
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Amount (\$) <b>\$9.18</b>	Payee address; <b>3220 Teasley Lane Denton TX 76210</b>	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking Expense   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | 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 F1:	2 FILER NAME <i>James Mann</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>10/12/2020</i>	5 Payee name <i>Tractor Supply Co.</i>
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6 Amount (\$) <i>\$23.32</i>	7 Payee address; City; State; Zip Code <i>1200 S. Loop 288 Denton Tx 76205</i>
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertisisng Expense</i>	(b) Description <i>6 + posts for signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <i>10/12/2020</i>	Payee name <i>Hoochies</i>
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Amount (\$) <i>\$30.00</i>	Payee address; City; State; Zip Code <i>214 E. Hickory St. Denton Tx 76201</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food / Beverage Exp.</i>	Description <i>Strategy Mtg. / Jerry Reagin</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <i>10/13/20</i>	Payee name <i>Aaron, Thomas ? Associates, Inc.</i>
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Amount (\$) <i>\$9,237.08</i>	Payee address; City; State; Zip Code <i>21344 Superior St. Chatsworth, CA 91311</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Mailout</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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# 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  
Credit Card Payment

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  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>James Mann</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>10/13/20</i>		5 Payee name <i>Aaron Thomas &amp; Associates, Inc.</i>			
6 Amount (\$) <i>\$1536.02</i>		7 Payee address; City; State; Zip Code <i>21344 Superior St. Chatsworth CA 91311</i>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>		(b) Description <i>Yard Signs</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>10/14/2020</i>		Payee name <i>Rudy's Bar-B-Q</i>			
Amount (\$) <i>\$10.58</i>		Payee address; City; State; Zip Code <i>520 S. IH 35 Frontage Rd E Denton Tx 76205</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food &amp; Beverage Exp.</i>		Description <i>Kiwanis Breakfast</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>10/17/2020</i>		Payee name <i>The Dive Bar and Restaurant</i>			
Amount (\$) <i>\$6.17</i>		Payee address; City; State; Zip Code <i>3350 Unicorn Lake Blvd. Denton Tx 76210</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food &amp; Beverage Exp</i>		Description <i>Political Rally</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# 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  
Credit Card Payment

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  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>James Mann</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>10/14/20</b>		5 Payee name <b>EZ Politix</b>			
6 Amount (\$) <b>\$528.<sup>48</sup></b>		7 Payee address; City; State; Zip Code <b>314 N. 115th St Omaha, NE 68154</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Exp.</b>		(b) Description <b>Text Messaging</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/15/2020</b>		Payee name <b>Naumann Consulting</b>			
Amount (\$) <b>\$300.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>4025. 2nd Ave Brighton, CO 80601</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Exp.</b>		Description <b>Print Design Mailer</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/20/2020</b>		Payee name <b>Denton Record Chronicle</b>			
Amount (\$) <b>\$450.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>P.O. Box 369 Denton TX 76202</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Political Ads</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>James Mann</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>10/20/2020</b>	5 Payee name <b>Denton Record Chronicle</b>
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6 Amount (\$) <b>\$ 450</b>	7 Payee address; <b>P.O. Box 369 Denton, Texas 76202</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Political Ads</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>10/20/2020</b>	Payee name <b>Denton Record Chronicle</b>
---------------------------	--

Amount (\$) <b>\$ 350</b>	Payee address; <b>P.O. Box 369 Denton, Texas 76202</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Exp</b>	Description <b>Web Ads</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>10/20/2020</b>	Payee name <b>NT Fair and Rodeo</b>
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Amount (\$) <b>\$ 36.00</b>	Payee address; <b>2217 N. Carroll Blvd. Denton, Tx 76201</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Entry Fee</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>James Mann</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>10/21/2020</i>		5 Payee name <i>El Chaparral Grill</i>			
6 Amount (\$) <i>\$13.00</i>		7 Payee address; City; State; Zip Code <i>324 E. McKinney St. Denton TX 76201</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food and Beverage Exp</i>		(b) Description <i>Repub. Women's Lunch</i>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>10/21/2020</i>		Payee name <i>Rudy's Bar-B-Q</i>			
Amount (\$) <i>\$16.11</i>		Payee address; City; State; Zip Code <i>520 S IH35 Frontage Rd E. Denton Tx 76205</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Exp.</i>		Description <i>Veterans Group Mtg.</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>10/18/2020</i>		Payee name <i>Naumann Consulting</i>			
Amount (\$) <i>\$100.00</i>		Payee address; City; State; Zip Code <i>402 S. 2nd Ave. Brighton, CO 80601</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Adv. Expense</i>		Description <i>Graphic Design</i>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>James Mann</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>10/16/2020</b>		5 Payee name <b>United States Postal Service</b>			
6 Amount (\$) <b>\$110.00</b>		7 Payee address; City; State; Zip Code <b>2101 Colorado Blvd Denton Tx 76205</b>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		(b) Description <b>200 stamps</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/21/2020</b>		Payee name <b>Arvon, Thomas &amp; Associates, Inc.</b>			
Amount (\$) <b>\$7,726.82</b>		Payee address; City; State; Zip Code <b>21344 Superior St. Chatsworth CA 91311</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Mailout</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>10/22/20</b>		Payee name <b>The Dive Bar and Restaurant</b>			
Amount (\$) <b>\$28.27</b>		Payee address; City; State; Zip Code <b>3350 Unicorn Lake Blvd Denton Tx 76210</b>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food / Beverage</b>		Description <b>Political Rally</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# 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  
Credit Card Payment

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  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>James Mann</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>11/21/2020</b>	5 Payee name <b>Naumann Consulting</b>
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6 Amount (\$) <b>\$260.00</b>	7 Payee address; <b>402 S. 2nd Ave, Brighton CO 80601</b>	City;	State;	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Adv. Expense</b>	(b) Description <b>Mailout print design</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <b>10/23/2020</b>	Payee name <b>EZ Politix</b>
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Amount (\$) <b>\$405.92</b>	Payee address; <b>314 N. 115th St. Omaha NE 68154</b>	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Adv. Exp.</b>	Description <b>text messagin</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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