

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 19

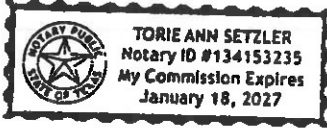
| | |
|-------------------------------------|--------------------|
| 13 C / OH NAME Ross, Jimmy R | 14 Filer ID |
|-------------------------------------|--------------------|

| | | |
|---|---|-----------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | |
| | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME |
| | COMMITTEE ADDRESS | |
| | COMMITTEE CAMPAIGN TREASURER NAME | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | |

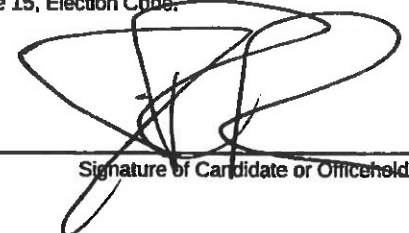
| | | |
|--------------------------------|---|---------------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 91,160.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 78,398.18 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 38,816.03 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 111,723.13 |

17 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.



AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Jim Ross, this the Sixth day of April, 2023, to certify which, witness my hand and seal of office.

Torie Setzler
Signature of officer administering

Torie Setzler
Printed name of officer administering

Notary
Title of officer administering oath

SUBTOTALS - C/OH

| | |
|---------------------------------------|--------------------|
| 18 FILER NAME Ross, Jimmy R | 19 Filer ID |
|---------------------------------------|--------------------|

| 20 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
|------------------------------|---|------------------------|
| NAME OF SCHEDULE | | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 91,160.00 |
| 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 | \$ 17,000.00 |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 78,298.18 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 100.00 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES 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:
Sch: 1/10 Rpt: 4/19

2 FILER NAME
Ross, Jimmy R

3 Filer ID

4 Date
03/27/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Bane, Marsha

7 Amount of Contribution (\$)
\$200.00

6 Contributor address; City; State; Zip Code
503 South Fielder Rd

Arlington, TX 76013

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/10/2023

Full name of contributor out-of-state PAC (ID#: _____)
Brady, Charles

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
3902 Farmingdale Dr

Arlington, TX 76001

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/17/2023

Full name of contributor out-of-state PAC (ID#: _____)
Brodie Consulting Group,LLC

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
2714 Wolff DR

Arlington, TX 76015

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/26/2023

Full name of contributor out-of-state PAC (ID#: _____)
Burns, Joel

Amount of Contribution (\$)
\$250.00

Contributor address; City; State; Zip Code
2420 Adams st

Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/26/2023

Full name of contributor out-of-state PAC (ID#: _____)
Campbell, Sandra & George

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
1305 Findlay Ct

Arlington, TX 76012

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/10 Rpt: 5/19

2 FILER NAME
Ross, Jimmy R

3 Filer ID

4 Date
02/14/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Carroll, Christopher & Rebecca

6 Contributor address; City; State; Zip Code
4518 Ridgecrest Drive
Arlington, TX 76017

7 Amount of Contribution (\$)
\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/26/2023

Full name of contributor out-of-state PAC (ID#: _____)
Chapa, Justin

Contributor address; City; State; Zip Code
2212, Racquet Club Ct
Arlington, TX 76017

Amount of Contribution (\$)
\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/14/2023

Full name of contributor out-of-state PAC (ID#: _____)
Choi, Myoung S

Contributor address; City; State; Zip Code
11245 Newkirk St
Dallas, TX 75229

Amount of Contribution (\$)
\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/14/2023

Full name of contributor out-of-state PAC (ID#: _____)
Choi, Roy

Contributor address; City; State; Zip Code
5909 Luther Lane
Dallas, TX 76065

Amount of Contribution (\$)
\$5,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/10/2023

Full name of contributor out-of-state PAC (ID#: _____)
Cotter, Brian

Contributor address; City; State; Zip Code
2004 Hill Country Ct.
Arlington, TX 76012

Amount of Contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/10 Rpt: 6/19

2 FILER NAME

Ross, Jimmy R

3 Filer ID

4 Date

01/18/2023

5 Full name of contributor

Cox, Ken

out-of-state PAC (ID#: _____)

7 Amount of Contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code

1325 Blue Lake Blvd

Arlington, TX 76005

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/27/2023

Full name of contributor

Cravens, Tom

out-of-state PAC (ID#: _____)

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

501 South Fielder Road

Arlington, TX 76013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/23/2023

Full name of contributor

Cumutt & Hafer LLP

out-of-state PAC (ID#: _____)

Amount of Contribution (\$)

\$2,500.00

Contributor address; City; State; Zip Code

301 West Abram Street

Arlington, TX 76010

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2023

Full name of contributor

Dezham, Mahdi

out-of-state PAC (ID#: _____)

Amount of Contribution (\$)

\$2,500.00

Contributor address; City; State; Zip Code

6326 Lakehurst Ave

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2023

Full name of contributor

Dipert, Linda Kei

out-of-state PAC (ID#: _____)

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

1512 Killian Dr

Arlington, TX 76013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/10 Rpt: 7/19

2 FILER NAME
Ross, Jimmy R

3 Filer ID

4 Date
02/26/2023

5 Full name of contributor out-of-state PAC (ID#: _____)
Distefano, Alfred & Laura

6 Contributor address; City; State; Zip Code
722 Crowley RD.

Arlington, TX 76012

7 Amount of Contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/14/2023

Full name of contributor out-of-state PAC (ID#: _____)
Duke, Don A

Contributor address; City; State; Zip Code
PO Box 13464

Arlington, TX 76094

Amount of Contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/14/2023

Full name of contributor out-of-state PAC (ID#: _____)
Fain, Jacob

Contributor address; City; State; Zip Code
1312 W 2nd St

Arlington, TX 76013

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/15/2023

Full name of contributor out-of-state PAC (ID#: _____)
Gaines, Terry & Teresa

Contributor address; City; State; Zip Code
711 Findlay Dr.

Arlington, TX 76012

Amount of Contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/15/2023

Full name of contributor out-of-state PAC (ID#: _____)
Gerro, Mike & Becky

Contributor address; City; State; Zip Code
2301 N. Fielder Rd

Arlington, TX 76012

Amount of Contribution (\$)

\$5,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 03/14/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Charles & Nora | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code 801 Orthopedic Way Arlington, TX 76015 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/27/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddad, Moji | Amount of Contribution (\$) \$10,000.00 |
| Contributor address; City; State; Zip Code 2500 Northeast Green Oaks Blvd Arlington, TX 76006 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hightower, Christopher | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code 2300 Castle Rock Rd Arlington, TX 76006 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hissin, Sarah | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2003 Fawnhollow Ct Arlington, TX 76001 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphreys, Jean | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 2201 Winewood LN Arlington, TX 76013 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 03/10/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levis Consulting Group, LLC | 7 Amount of Contribution (\$) \$1,000.00 |
| 6 Contributor address; City; State; Zip Code 600 Six Flags Dr STE 435 Arlington, TX 76011 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/23/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP | Amount of Contribution (\$) \$2,000.00 |
| Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Kathleen | Amount of Contribution (\$) \$35,000.00 |
| Contributor address; City; State; Zip Code 1903 Peyco Drive N Arlington, TX 76001 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/04/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MPAC Arlington | Amount of Contribution (\$) \$350.00 |
| Contributor address; City; State; Zip Code 1316 S Pecan St. Arlington, TX 76010 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahrouq, Sam | Amount of Contribution (\$) \$5,000.00 |
| Contributor address; City; State; Zip Code 1161 Corporate Dr W Arlington, TX 76006 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 03/14/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maibach Investments LP | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code 1703 North Peyco Dr Arlington, TX 76001 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/07/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Raul G. | Amount of Contribution (\$) \$400.00 |
| Contributor address; City; State; Zip Code 2011 Thames Drive Arlington, TX 76017 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/10/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDermott, Edward & Grace | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code 2114 Franklin Dr Arlington, TX 76011 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgovern, Robert & Ella | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 4803 Villa Vera Dr. Arlington, TX 76017 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montes, Joseph | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code 2511 Ironwood Ct. Arlington, TX 76016 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 02/26/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parra, Alberto <hr/> 6 Contributor address; City; State; Zip Code 2400 N Davis Dr Arlington, TX 76012 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 03/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parvez, Shabana <hr/> Contributor address; City; State; Zip Code 4135 Cascade Sky Dr Arlington, TX 76005 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Linda <hr/> Contributor address; City; State; Zip Code 4514 Colt Dr Arlington, TX 76017 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/01/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierson, Grey <hr/> Contributor address; City; State; Zip Code 1521 N Cooper STE 750 Arlington, TX 76011 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/26/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Robert <hr/> Contributor address; City; State; Zip Code 1016 Almond Dr Mansfield, TX 76063 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 02/26/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Brooklyn <hr/> 6 Contributor address; City; State; Zip Code 2801 Woodshire Dr Arlington, TX 76016 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 03/14/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush Human Resources <hr/> Contributor address; City; State; Zip Code 1300 Canterbury Ct Arlington, TX 76013 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/15/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent Investments, LLC <hr/> Contributor address; City; State; Zip Code 3101 Shadow Drive West Arlington, TX 76006 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/14/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Robert P <hr/> Contributor address; City; State; Zip Code 5606 Hunterwood Lanr Arlington, TX 76017 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/24/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas United Automobile Workers CAP <hr/> Contributor address; City; State; Zip Code 151 Maddox Simpson Pkwy Lebanon, TN 37090 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 Date 02/26/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lorie 6 Contributor address; City; State; Zip Code 2712 West Shadow Drive Arlington, TX 76006 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/13/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Joni Contributor address; City; State; Zip Code 3405 Forestshire Court Arlington, TX 76001 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

LOANS

SCHEDULE E

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 14/19 |
| 2 FILER NAME Ross, Jimmy R | | 3 Filer ID |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 02/28/2023 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Jimmy R | 9 Loan Amount (\$) \$17,000.00 |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code 1975 Ballpark Way #201605 Arlington, TX 76006 | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Principal occupation / Job title (See Instructions) | | 13 Employer (See Instructions) |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/> |
| 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 | | 21 Employer (See Instructions) |

POLITICAL EXPENDITURES 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: Sch: 1/4 Rpt: 15/19 | 2 FILER NAME Ross, Jimmy R | 3 Filer ID |
| 4 Date 03/01/2023 | 5 Payee name Anedot | |
| 6 Amount (\$) \$964.10 | 7 Payee address; City; State; Zip Code 1921 McKinney Avenue 7th Floor Dallas, TX 75202 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/09/2023 | Payee name Arlington Today | |
| Amount (\$) \$4,000.00 | Payee address; City; State; Zip Code P.O. Box 170539 Arlington, TX 76003 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Magazine Inserts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/16/2023 | Payee name Campaign Solutions Inc | |
| Amount (\$) \$12,500.00 | Payee address; City; State; Zip Code P O Box 1454 Colleyville, TX 76034 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaing Consulting Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES 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.

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| 1 Total pages Schedule F1: Sch: 2/4 Rpt: 16/19 | 2 FILER NAME Ross, Jimmy R | 3 Filer ID |
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| 4 Date 02/28/2023 | 5 Payee name Green Group Advisors, P.C. |
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| 6 Amount (\$) \$377.50 | 7 Payee address; City; State; Zip Code 801 Orthopedic Way Arlington, TX 76015 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Accounting |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/22/2023 | Payee name Harland Clarke |
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| Amount (\$) \$106.58 | Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Check Printing |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 03/15/2023 | Payee name Lewis, Rita |
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| Amount (\$) \$400.00 | Payee address; City; State; Zip Code 1704 Northwest Dr Arlington, TX 76012 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling / Scheduling |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES 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: Sch: 3/4 Rpt: 17/19 | | 2 FILER NAME Ross, Jimmy R | | 3 Filer ID | |
| 4 Date 03/01/2023 | | 5 Payee name Mayes Media Group | | | |
| 6 Amount (\$) \$50,000.00 | | 7 Payee address; City; State; Zip Code 312 Creekwood Drive Sunnyvale, TX 75182 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Prior Unpaid Incurred Obligations - Campaign Consulting, Digital Ads, Printing & Mail Services | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 03/14/2023 | | Payee name Patriot Print | | | |
| Amount (\$) \$325.00 | | Payee address; City; State; Zip Code 106 A E Petsche Ct Ste 120 Arlington, TX 76012 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Stickers | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 02/21/2023 | | Payee name Payne, Paige | | | |
| Amount (\$) \$3,500.00 | | Payee address; City; State; Zip Code 6110 Bay Hill Dr Arlington, TX 76018 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting -February | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |

POLITICAL EXPENDITURES 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.

| | | |
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| 1 Total pages Schedule F1: Sch: 4/4 Rpt: 18/19 | 2 FILER NAME Ross, Jimmy R | 3 Filer ID |
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| 4 Date 03/06/2023 | 5 Payee name Payne, Paige |
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| 6 Amount (\$) \$5,625.00 | 7 Payee address; City; State; Zip Code 6110 Bay Hill Dr Arlington, TX 76018 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Installation |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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|--------------------|--|
| Date 02/15/2023 | Payee name Southwest Custom Creations |
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| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 5008 Sandalwood Ln Arlington, TX 76017 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-Shirts |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

| | | |
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| 1 Total pages Schedule G: Sch: 1/1 Rpt: 19/19 | 2 FILER NAME Ross, Jimmy R | 3 Filer ID |
| 4 Date 01/19/2023 | 5 Payee name City of Arlington | |
| 6 Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 101 W. Abrams St Arlington, TX 76010 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |