

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <b>14</b>		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>MR.</b>	FIRST <b>Jerry</b>	MI <b>J.</b>	<b>OFFICE USE ONLY</b>	
	NICKNAME	LAST <b>Ransom</b>	SUFFIX		
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; <b>P.O. Box 8703</b>		APT / SUITE #; CITY; STATE; ZIP CODE <b>Greenville TX 75404</b>		
	AREA CODE <b>( 903 )</b>		PHONE NUMBER <b>455-8200</b>		EXTENSION
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	STREET ADDRESS (NO PO BOX PLEASE); <b>1302 Cheltenham Pl</b>		CITY; STATE; ZIP CODE <b>Greenville TX 75402</b>	Date Received	
	AREA CODE <b>( 214 )</b>		PHONE NUMBER <b>578-0971</b>	EXTENSION	
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR <b>MR.</b>	FIRST <b>Roger</b>	MI	Date Hand-delivered or Date Postmarked	
	NICKNAME	LAST <b>Carwile</b>	SUFFIX	Receipt #   Amount \$	
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); <b>1302 Cheltenham Pl</b>		CITY; STATE; ZIP CODE <b>Greenville TX 75402</b>	Date Processed	
	AREA CODE <b>( 214 )</b>		PHONE NUMBER <b>578-0971</b>	EXTENSION	
<b>8</b> CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); <b>1302 Cheltenham Pl</b>		CITY; STATE; ZIP CODE <b>Greenville TX 75402</b>	Date Imaged	
	AREA CODE <b>( 214 )</b>		PHONE NUMBER <b>578-0971</b>	EXTENSION	
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15		<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	
	<input type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	
<b>10</b> PERIOD COVERED	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		<input type="checkbox"/> Final Report (Attach C/OH - FR)		
	Month <b>01</b>	Day <b>13</b>	Year <b>2021</b>	THROUGH	
<b>11</b> ELECTION	Month <b>05</b>		Day <b>01</b>	Year <b>2021</b>	
	ELECTION DATE		ELECTION TYPE		
<b>12</b> OFFICE	OFFICE HELD (if any) <b>Place1- Greenville City Council</b>		OFFICE SOUGHT (if known) <b>Place 7- Mayor of Greenville</b>		
	OFFICE HELD (if any) <b>Place1- Greenville City Council</b>		OFFICE SOUGHT (if known) <b>Place 7- Mayor of Greenville</b>		
<b>14</b> 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	COMMITTEE NAME			
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS			
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

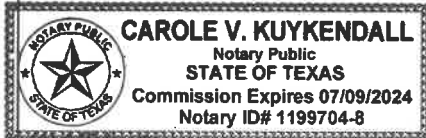
**FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b> Jerry J. Ransom		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 398.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,648.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,012.60
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 6,648.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 SIGNATURE** 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.

*Jerry J. Ransom*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Jerry John Ransom this the 25 day of March, 2021, to certify which, witness my hand and seal of office.

Carole V. Kuykendall Carole V. Kuykendall City Secretary  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

**19 FILER NAME**

Jerry J. Ransom

**20 Filer ID (Ethics Commission Filers)**

**21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE**

**SUBTOTAL  
AMOUNT**

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,648.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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 checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 19,012.60
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

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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: <b>8</b>
2 FILER NAME <b>Jerry J. Ransom</b>		3 Filer ID (Ethics Commission Filers)
4 Date  2/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>W. D. Hilton</b>  6 Contributor address; City; State Zip Code <b>4342 Catfish Cove Greenville TX 75402</b>	7 Amount of contribution (\$)  <b>\$1,000.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>James Evans</b>  Contributor address; City; State; Zip Code <b>6410 Buena Vista Dr Greenville TX 75402</b>	Amount of contribution (\$)  <b>\$100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Robert and Yvonne Bihl</b>  Contributor address; City; State; Zip Code <b>5026 Red Oak Drive Royce City TX 75189</b>	Amount of contribution (\$)  <b>\$500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Michael and Carol Taylor</b>  Contributor address; City; State; Zip Code <b>P.O. Box 69 Greenville TX 75403</b>	Amount of contribution (\$)  <b>\$500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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<b>2</b> FILER NAME <b>Jerry J. Ransom</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date  <b>2/10/2021</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Dreiling</b> <hr/> <b>6</b> Contributor address; City; State Zip Code <b>6302 Villa Fontana Greenville TX 75402</b>	<b>7</b> Amount of contribution (\$)  <b>\$250.00</b>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b>  <b>2/10/2021</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Thomas and Mary Ann Darte</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>10503 Woodland Dr Greenville TX 75402</b>	<b>Amount of contribution (\$)</b>  <b>\$250.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b>  <b>2/10/2021</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Howard and Carol Winans</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>1307 Steeplechase Greenville TX 75402</b>	<b>Amount of contribution (\$)</b>  <b>\$100.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b>  <b>2/10/2021</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Duncan and Ginger Thomas</b> <hr/> <b>Contributor address; City; State; Zip Code</b> <b>P.O. Box 500 Greenville TX 75403</b>	<b>Amount of contribution (\$)</b>  <b>\$200.00</b>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		
<b>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</b>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Jerry J. Ransom

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/2021

5 Full name of contributor

H. H. Lytle

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

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State

Zip Code

P.O. Box 9262

Greenville

TX

75404

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/10/2021

Full name of contributor

Donald and Linda Bolin

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

Amount of contribution (\$)

\$250.00

Contributor address;

City;

State;

Zip Code

6 Willow Ridge RD

Greenville

TX

75402

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/10/2021

Full name of contributor

Sue Ann Harting

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

Amount of contribution (\$)

\$150.00

Contributor address;

City;

State;

Zip Code

1618 Park Street

Greenville

TX

75401

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/10/2021

Full name of contributor

Sharon Leonard

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

519 Turtle Creek Drive

Greenville

TX

75402

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

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<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: <b>8</b>
2 FILER NAME <b>Jerry J. Ransom</b>		3 Filer ID (Ethics Commission Filers)
4 Date  2/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Byron and Shirley Chitwood</b>	7 Amount of contribution (\$)  <b>\$100.00</b>
6 Contributor address; City; State Zip Code <b>18 Mullaney Dr Greenville TX 75402</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Howard and Denise Kweller</b>	Amount of contribution (\$)  <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>2407 Twilight Peninsula Greenville TX 75402</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Donald and Elizabeth McBride</b>	Amount of contribution (\$)  <b>\$200.00</b>
Contributor address; City; State; Zip Code <b>2322 Lake Side Dr. Greenville TX 75402</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joe Leonard III</b>	Amount of contribution (\$)  <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>519 Turtle Creek Drive Greenville TX 75402</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: <b>8</b>
2 FILER NAME <b>Jerry J. Ransom</b>		3 Filer ID (Ethics Commission Filers)
4 Date  2/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Randy and Judy Tarpley</b> ..... 6 Contributor address; City; State Zip Code  708 Sahara Dr. Greenville TX 75402	7 Amount of contribution (\$)  \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Jerry Grady</b> ..... Contributor address; City; State; Zip Code  3 Cedar Ridge Rd. Greenville TX 75402	Amount of contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Truett and Dianna Mays</b> ..... Contributor address; City; State; Zip Code  7445 Jack Finney Blvd. Greenville TX 75402	Amount of contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date  2/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____ ) <b>Janeen Cunningham</b> ..... Contributor address; City; State; Zip Code  11 Willow Ridge Rd. Greenville TX 75402	Amount of contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8

2 FILER NAME

Jerry J. Ransom

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/2021

5 Full name of contributor

Roger Carwile

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

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City;

State

Zip Code

1302 Cheltenham Pl

Greenville

TX

75402

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/10/2021

Full name of contributor

Barbara Peters

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

7802 County Rd. 3522.

Quinlan

TX

75474

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/2021

Full name of contributor

RL Jacobs

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

1454 Mamie Road

Greenville

TX

75402

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/06/2021

Full name of contributor

Perry Goen

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

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

1103 Whitehall Lane

Greenville

TX

75402

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

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1 Total pages Schedule A1:

8

2 FILER NAME

Jerry J. Ransom

3 Filer ID (Ethics Commission Filers)

4 Date

3/11/2021

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Byron Taylor and Craig Waters

7 Amount of contribution (\$)

\$100.00

6 Contributor address; City; State Zip Code

5106 Meadowbrook Drive Greenville TX 75402

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/12/2021

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

Amount of contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

615 Mink Greenville TX 75402

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/15/2021

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

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

503 Muskrat Place Greenville TX 75402

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/19/2021

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

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

P.O. Box 29 Wolfe City TX 75496

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

8

2 FILER NAME

Jerry J. Ransom

3 Filer ID (Ethics Commission Filers)

4 Date

3/22/2021

5 Full name of contributor

Keith Willeford

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

7 Amount of contribution (\$)

\$500.00

6 Contributor address;

City;

State

Zip Code

P.O. Box 11

Greenville

TX

75403

8 Principal occupation / Job title (See Instructions)

9 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)

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**

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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.

<b>1</b> Total pages Schedule G: 3	<b>2</b> FILER NAME Jerry J. Ransom	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 02/02/2021	<b>5</b> Payee name Tim Reeves Consulting
-----------------------------	--

<b>6</b> Amount (\$) 3500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; 5214 Vickery Blvd Dallas TX 75206	City;	State;	Zip Code
--	---	-------	--------	----------

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description General Consulting fee for Mayor campaign
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 02/02/2021	Payee name Tim Reeves Consulting
--------------------	-------------------------------------

Amount (\$) 1500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; 5214 Vickery Blvd Dallas TX 75206	City;	State;	Zip Code
---	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Website w/email design,create, implement
	<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
--	-------------------------------	---------------	-------------

Date 02/11/2021	Payee name Tim Reeves Consulting
--------------------	-------------------------------------

Amount (\$) 3062.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; 5214 Vickery Blvd Dallas TX 75206	City;	State;	Zip Code
---	--	-------	--------	----------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Herald Banner Ad Campaign for March and April
	<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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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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.

<b>1</b> Total pages Schedule G: <b>3</b>	<b>2</b> FILER NAME <b>Jerry J. Ransom</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>02/11/2021</b>	<b>5</b> Payee name <b>Tim Reeves Consulting</b>	
<b>6</b> Amount (\$) <b>4249.80</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <b>5214 Vickery Blvd Dallas TX 75206</b>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>500 Yard signs 50 4'x4' grommated signs</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date <b>03/21/2021</b>	Payee name <b>Tim Reeves Consulting</b>	
Amount (\$) <b>2700.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>5214 Vickery Blvd Dallas TX 75206</b>	
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Yard Sign Program</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		
Date <b>03/21/2021</b>	Payee name <b>Tim Reeves Consulting</b>	
Amount (\$) <b>2000.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <b>5214 Vickery Blvd Dallas TX 75206</b>	
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>4 Color Pushcards &amp; Doorhangers Design &amp; Produce</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 PERSONAL FUNDS

## SCHEDULE G

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### 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.

<b>1</b> Total pages Schedule G: <b>3</b>	<b>2</b> FILER NAME <b>Jerry J. Ransom</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>03/21/2021</b>	<b>5</b> Payee name <b>Tim Reeves Consulting</b>	
<b>6</b> Amount (\$) <b>2000.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <b>5214 Vickery Blvd Dallas TX 75206</b>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Radio Create, Produce, Buy</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<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		
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<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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