CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction Guide explains how to complete this form.

1. Filer ID (Ethics Commission Filers) 2. Total pages filed: 3

OFFICE USE ONLY

Date Received

RECEIVED
JAN 16 2018

City Secretary's Office

Date Hand-delivered or Date Postmarked

Receipt #: Amount $ 

Date Processed
Hand: 4/16/18

Date Imaged

FORM C/OH
COVER SHEET PG 1

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MRS (MR) FIRST O
NICKNAME JELS
LAST WARD

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☑ Change of Address
ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
NICKNAME STACEY
LAST MARTIN

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE

1503 IRVIN RD., IRVING TX 75060

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 477-3333

9 REPORT TYPE

☑ January 15 ☐ 30th day before election ☐ Runoff
☐ July 15 ☐ 8th day before election ☐ Exceeded $500 limit
☐ 15th day after campaign treasurer appointment!
(Officierholder Only)
☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year

07/01/2017 THROUGH 12/31/2017

11 ELECTION

ELECTION DATE

Month Day Year ☐ Primary ☐ Runoff ☐ Other

05/06/2017 ☐ General ☐ Special Description

12 OFFICE

OFFICE HELD (if any)

IRVING CITY COUNCIL
Place 5

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 9/8/2015
CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

14 C/OH NAME
JELKS O. WARD

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.

COMMITTEE TYPE
- GENERAL
- SPECIFIC

COMMITTEE NAME
Oscar Ward Campaign

COMMITTEE ADDRESS
608 Farine Dr.
Irving, TX 75062

COMMITTEE CAMPAIGN TREASURER NAME
Stacey Martin

COMMITTEE CAMPAIGN TREASURER ADDRESS
1503 Irvin Rd.
Irving, TX 75060

□ Additional Pages

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED $ - 0 -

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) $ - 0 -

3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED $ - 0 -

4. TOTAL POLITICAL EXPENDITURES $ - 0 -

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD $ - 0 -

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD $8,905.03

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.

Jennifer Phillips
Notary Public
State of Texas
My Commission Expires June 21, 2019

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Oscar Ward, this the 16th day of January, 2019, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Forms provided by Texas Ethics Commission
www.ethics.state.tx.us
Revised 9/8/2015
<table>
<thead>
<tr>
<th></th>
<th>SCHEDULE NAME</th>
<th>SUBTOTAL AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>2.</td>
<td>SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>3.</td>
<td>SCHEDULE B: PLEDGED CONTRIBUTIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>4.</td>
<td>SCHEDULE E: LOANS</td>
<td>$ 0</td>
</tr>
<tr>
<td>5.</td>
<td>SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>6.</td>
<td>SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>7.</td>
<td>SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</td>
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</tr>
<tr>
<td>8.</td>
<td>SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</td>
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</tr>
<tr>
<td>9.</td>
<td>SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</td>
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</tr>
<tr>
<td>10.</td>
<td>SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH</td>
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</tr>
<tr>
<td>11.</td>
<td>SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$ 0</td>
</tr>
<tr>
<td>12.</td>
<td>SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</td>
<td>$ 0</td>
</tr>
</tbody>
</table>
# MONETARY POLITICAL CONTRIBUTIONS

| 1 | Total pages Schedule A1: |
| 2 | FILER NAME |
| 3 | Filer ID (Ethics Commission Filers) |
| 4 | Date |
| 5 | Full name of contributor | □ out-of-state PAC (ID#:__________) |
| 6 | Contributor address; City; State; Zip Code |
| 7 | Amount of contribution ($)|

## Principal occupation / Job title (See Instructions) |

| 8 | Date |
| 9 | Employer (See Instructions) |
| 10 | Full name of contributor | □ out-of-state PAC (ID#:__________) |
| 11 | Contributor address; City; State; Zip Code |
| 12 | Amount of contribution ($)|

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| 24 | Employer (See Instructions) |
| 25 | Full name of contributor | □ out-of-state PAC (ID#:__________) |
| 26 | Contributor address; City; State; Zip Code |
| 27 | Amount of contribution ($)|

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

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