

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: 5	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Mr. Bryan Jones				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE	
	1608 Canyon Oaks Dr. Irving TX 75061			
<input type="checkbox"/> Change of Address				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(918) 706-6556			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Mr. John Lappe				
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY: STATE: ZIP CODE	
	1710 Henderson Ct. Irving TX 75061			
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(469) 460-4746			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach COH - FR)			
10 PERIOD COVERED	Month	Day	Year	
	01 / 01 / 2022		THROUGH 03 / 28 / 2022	
11 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	
05 / 07 / 2022		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special <u>uniform</u>		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)	
			Irving City Council, Seat 7	
14 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"/> Additional Pages <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
			Families for Irving PAC	
			COMMITTEE ADDRESS	
			P.O. Box 165203 Irving, TX 75016	
			COMMITTEE CAMPAIGN TREASURER NAME	
			John Lappe	
			COMMITTEE CAMPAIGN TREASURER ADDRESS	
			1710 Henderson Ct. Irving, TX 75061	



Date Hand-delivered or Date Postmarked
Mailed 9:50am 4/1/22

Receipt # Amount \$

Date Processed
Filed by JJ 4-19-2022

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

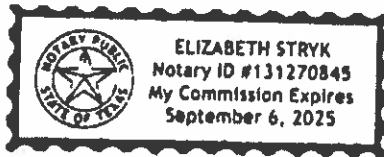
15 C/OH NAME <u>Bryan Christopher Jones</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,875.14
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	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.

[Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Bryan C Jones this the 7th day of April, 2022, to certify which, witness my hand and seal of office.

[Signature] Elizabeth Stryk Notary public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Bryan Jones, and my date of birth is May 24, 1982
My address is 1608 Canyon Oaks Dr, Irving, TX, 75061, USA
(street) (city) (state) (zip code) (country)
Executed in Dallas County, State of TEXAS, on the 7th day of April, 2022.
(month) (year)
[Signature]
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Bryan Christopher Jones

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,875.14
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 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	\$

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <i>1 of 2</i>	
2 FILER NAME <i>Bryan Christopher Jones</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3/23/2022</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Families for Irving PAC</i>	8 Amount of Contribution \$ <i>\$2,143.35</i>	9 In-kind contribution description <i>375 CAMPAIGN signs</i>
7 Contributor address; City: State: Zip Code <i>P.O. Box 165203 Irving TX 75016</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>	
12 Contributor's principal occupation (FOR JUDICIAL) <i>N/A</i>		13 Contributor's job title (FOR JUDICIAL)(See Instructions) <i>N/A</i>	
14 Contributor's employer/law firm (FOR JUDICIAL) <i>N/A</i>		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) <i>N/A</i>	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) <i>N/A</i>			
Date <i>3/15/2022</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Families for Irving PAC</i>	Amount of Contribution \$ <i>\$570.12</i>	In-kind contribution description <i>2,500 push cards</i>
Contributor address; City: State: Zip Code <i>P.O. Box 165203 Irving TX 75016</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>		Employer (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>	
Contributor's principal occupation (FOR JUDICIAL) <i>N/A</i>		Contributor's job title (FOR JUDICIAL)(See Instructions) <i>N/A</i>	
Contributor's employer/law firm (FOR JUDICIAL) <i>N/A</i>		Law firm of contributor's spouse (if any) (FOR JUDICIAL) <i>N/A</i>	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) <i>N/A</i>			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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2 FILER NAME <i>Bryan Christopher Jones</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3/15/2022</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Families for Irving PAC</i>	8 Amount of Contribution \$ <i>\$161.67</i>	9 In-kind contribution description <i>1-month subscription to campaign sidekick</i>
7 Contributor address; City; State; Zip Code <i>P.O. Box 165203 Irving, TX 75016</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <i>N/A</i>	
12 Contributor's principal occupation (FOR JUDICIAL) <i>N/A</i>		13 Contributor's job title (FOR JUDICIAL)(See Instructions) <i>N/A</i>	
14 Contributor's employer/law firm (FOR JUDICIAL) <i>N/A</i>		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) <i>N/A</i>	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) <i>N/A</i>			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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