SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

P.O.Box 12070

FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION complete this form.	GUIDE explains how to	1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE#					
3 COMMITTEE NAME								
Branch Forum Political	Action Committee		OFFICE USE ONLY					
			Date Received					
			-					
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE						
Change of Address	3033 Primrose Lane Farmers Branch, TX 75234		Date Hand-delivered or Date Postmarked					
	Talmore Branch, 12 70204							
5 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipl # Amount					
TREASURER	Mr. Matt							
NAME			Date Processed					
	NICKNAME LAST Wenthold	SUFFIX	Date Imaged					
	vventiloid		Salo IIIagou					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT/SU	TE#; CITY; STATE;	ZIP CODE					
TREASURER'S								
STREET ADDRESS (Residence or business)	3033 Primrose Lane Farmers Branch, TX 75234							
(Nesidefice of pasifiess)	Talliote Brailon, 127 7020 1							
7 CAMPAIGN	STREET OR PO BOX; APT / SU	JITE#; CITY; STATE;	ZIP CODE					
TREASURER'S								
MAILING ADDRESS	3033 Primrose Lane							
Change of Address	Farmers Branch, TX 75234							
_								
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION						
TREASURER	(070) 500 7477							
PHONE	PHONE (972) 502-7477							
9 REPORT TYPE January 15 30th day before election Exceeded \$500 limit								
3 REPORTITE	January 15	30th day before election	Exceeded \$500 limit					
	July 15 X	8th day before election	Dissolution (attach PAC-DR)					
		Runoff	10th day after campaign treasurer termination					
10 PERIOD COVERED	Month Day Year		Month Day Year					
			·					
	04/01/2015	THROUGH	04/29/2015					
11 ELECTION	ELECTION DATE ELECTION	ITYPE						
	Month Day Year							
	05/09/2015 Prim.	ary Runoff X	General Special					
GO TO PAGE 2								

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS

P.O. Box 12070

FORM SPAC COVER SHEET PG 2

12 COMMITTEE Bra		CCOUNT # (Ethics Commission filers) 0000001					
13 COMMITTEE PURPOSE	CANDIDATE / OFFICEHOLDER NAME						
(Attach lists on plain paper to complete this report if necessary.)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)					
SUPPORT (Candidate or Measure)	BALLOT IDENTIFICATION / # ELECTION I Month Day Y						
OPPOSE (Candidate or Measure)							
ASSIST (Officeholder only)	MEASURE	DESCRIPTION					
14 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			700.00			
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	ED \$	0.00			
	4. TOTAL POLITICAL EXPENDITURES			604.67			
CONTRIBUTION BALANCE	5. TOTAL F	*	1,226.50				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00			
15 AFFIDAVIT	1 15 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.							
AMY PIUKANA My Commission Expires Matt Wenthald							
January 8, 2017 Signature of Campaign Treasurer							
Sworn to and subscribed before me, by the said							
of May, 20_15, to certify which, witness my hand and seal of office.							
Any Line Amyfickana Borond May.							
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath							

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 1/1 Report: 3/4			
2	FILER NAME	Branch Forum Political Action Committee	3 ACCOUNT # (Ethics Commission filers) 00000001				
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dingman, Joseph	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)				
	04/23/2015	6 Contributor address; City; State; Zip Code 13223 Glad Acres Drive Dallas, TX 75234	\$175.00				
9	Principal occup	ation / Job title (See Instructions)	I (If travel outside of Texas, complete Schedule T)				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/23/2015	Contributor address; City; State; Zip Code 13806 Wooded Creek Dr Farmers Branch, TX 75244		\$175.00 			
				(If travel outside of 1	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	O4/23/2015 Contributor address; City; State; Zip Code 3336 Dorado Beach Farmers Branch, TX 75234			\$175.00 	r		
_	Principal occup	ation / Job title (See Instructions)	(If travel outside of Texas, complete Schedule T)				
	i ililoipai oodap	audity and the teaching		,			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/23/2015	Contributor address; City; State; Zip Code 3440 Brook Hollow Farmers Branch, TX 75234	6514 6514 FECTA VILVA XX	\$175.00 			
_	Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	r intelpar occup	Starry and the test management,		361 (61			

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Consulting Expense Event Expense Fees	Polling B	everage Expense Expense Expense The Instruction	Travel In District Travel Out Of Distr Office Overhead/R GUIDE explains how	ental Expense	OTHER (enter a		
1 PAGE#		2 FILER NAME			1;	3 ACCOUNT#	(TEC filers)
Schedule: 1/1 Rep	port: 4/4	Branch Forum Po	olitical Action Commi	ttee		00000001	
	5 Payee name	•					
04/29/2015	Technology	Media Group					
6 Amount (\$)	7 Payee addres	s City; Stat	te; Zip Code				
\$604.67	1262 Vicero Dallas, TX 7	y Drive 75247					
8 PURPOSE OF	(a) Category (See Advertising I	e Categories listed at the to Expense	op of this schedule)	(b) Description Endorsemen	•	Texas, complete So	chedule T)
EXPENDITURE							
O Consulate ONLY S	Candidata / O	fficeholder name		Office sou	, TX, officeholder	Office held:	
9 Complete ONLY if direct expenditure to benefit C/OH	Calididate / O	inceriolaei name		Office sou	yııı.	Office field.	