

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.

1 Filer ID

2 Total pages filed:  
25

3 COMMITTEE NAME  
VOTE YES! KEEP THE RANGERS

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECEIVED - CSO  
16 OCT 31 PM 3:45

4 COMMITTEE ADDRESS  
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
PO BOX 1283  
ARLINGTON, TX 76004

Change of Address

5 CAMPAIGN TREASURER NAME  
MS / MRS / MR FIRST MI  
MICHAEL  
NICKNAME LAST SUFFIX  
JACOBSON

6 CAMPAIGN TREASURER STREET ADDRESS  
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
703 FINDLAY  
ARLINGTON, TX 76011  
(Residence or Business)

7 CAMPAIGN TREASURER MAILING ADDRESS  
STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
PO BOX 1283  
ARLINGTON, TX 76004  
 Change of Address

8 CAMPAIGN TREASURER PHONE  
AREA CODE PHONE NUMBER EXTENSION

9 REPORT TYPE  
 January 15  30th day before election  Exceeded \$500 Limit  
 July 15  8th day before election  Dissolution (Attach PAC-DR)  
 Runoff  10th day after campaign treasurer termination

10 PERIOD COVERED  
Month Day Year THROUGH Month Day Year  
09/30/2016 THROUGH 10/29/2016

11 ELECTION  
ELECTION DATE  
Month Day Year  
11/08/2016  
ELECTION TYPE  
 Primary  Runoff  Other  
 General  Special

**GO TO PAGE 2**

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM SPAC  
COVER SHEET PG 2**

12 COMMITTEE NAME VOTE YES! KEEP THE RANGERS		13 Filer ID	
14 COMMITTEE PURPOSE  (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure)  <input type="checkbox"/> OPPOSE (Candidate or Measure)  <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder    <input checked="" type="checkbox"/> Measure	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
		BALLOT IDENTIFICATION / #	ELECTION DATE Month Day Year 11/08/2016
15 CONTRIBUTION TOTALS		DESCRIPTION AUTHORIZING FOR THE CITY OF ARLINGTON TO PROVIDE FOR THE TEXAS RANGERS DEVELOPMENT PROJECT	
1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$	\$50.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	\$810,844.60
EXPENDITURE TOTALS		3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	
4. TOTAL POLITICAL EXPENDITURES		\$	\$851,096.05
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$	\$210,703.93
OUTSTANDING LOAN TOTALS		\$	\$0.00

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Michael Jacobson*  
Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Michael Jacobson, this the 31 day of October, 2016, to certify which, witness my hand and seal of office.

Tamara Johnson      Tamara Johnson      Director Finance  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - SPAC

**FORM SPAC**  
**COVER SHEET PG 3**  
3 of 25

<b>17 COMMITTEE NAME</b> VOTE YES! KEEP THE RANGERS	<b>18 Filer ID</b>
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<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 270,015.00
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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 467,880.00
5. <input checked="" type="checkbox"/>	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 72,949.60
6. <input type="checkbox"/>	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/>	SCHEDULE E: LOANS	\$
8. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 626,500.46
9. <input checked="" type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 224,595.59
10. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/7 Rpt: 4/25
<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID
<b>4</b> Date 10/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, EDWARD	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>6</b> Contributor address; City; State; Zip Code 201 MAIN ST STE 2700  FT WORTH, TX 76102		
<b>8</b> Principal occupation / Job title (See Instructions) PRESIDENT		<b>9</b> Employer (See Instructions) SID W RICHARDSON FOUNDATION
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BETHUNE, JOHN	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 2209 MEDITERRANEAN AVE  ARLINGTON, TX 76011		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOREK, DEBBIE	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2733 W 7TH ST  FT WORTH, TX 76107		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) THE FLOWER MARKET OF 7TH ST
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRYANT, RODNEY	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 5516 HUNTERWOOD LN  ARLINGTON, TX 76017		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CASEY, LINDA	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code 2024 RUMSON DR  ARLINGTON, TX 76006		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 2/7 Rpt: 5/25

**2** FILER NAME

VOTE YES! KEEP THE RANGERS

**3** Filer ID

**4** Date

10/11/2016

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

CELLULAR SYSTEMS AND SIGNAGE LLC

**7** Amount of Contribution (\$)

\$100,000.00

**6** Contributor address; City; State; Zip Code

2711 CENTERVILLE RD STE 400

WILMINGTON, DE 19808

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date

10/28/2016

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

CELLULAR SYSTEMS AND SIGNAGE LLC

Amount of Contribution (\$)

\$100,000.00

Contributor address; City; State; Zip Code

2711 CENTERVILLE RD STE 400

WILMINGTON, DE 19808

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/14/2016

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

DAVIS, JACK

Amount of Contribution (\$)

\$10.00

Contributor address; City; State; Zip Code

1803 TENNYSON DR

ARLINGTON, TX 76013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

RETIRED

RETIRED

Date

10/21/2016

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

DAVIS, JODI

Amount of Contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

5504 IVY HILL DR

ARLINGTON, TX 76016

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MARKETING

BRAUN INTERTEC

Date

10/21/2016

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

FARRAR, BILLIE

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

600 W PARK ROW

ARLINGTON, TX 76010

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/25
<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID
<b>4</b> Date 10/14/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLEATON, CURTIS  <b>6</b> Contributor address; City; State; Zip Code 2716 ANTERO DR  ARLINGTON, TX 76006	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGE, JAMEY  Contributor address; City; State; Zip Code 6415 BIG OAK CT  ARLINGTON, TX 76001	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMAN, DIXON  Contributor address; City; State; Zip Code 7304 BAY CHASE DR  ARLINGTON, TX 76016	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, LAURA  Contributor address; City; State; Zip Code 430 HENSLEY RD  GORDON TX, TX 76453	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JUSTICE Jr., JIM  Contributor address; City; State; Zip Code 5808 EARLE ST  ARLINGTON, TX 76016	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/25
<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEBARGER GOGGAN BLAIR AND SAMPSON LLP	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code PO BOX 17428  AUSTIN, TX 78769		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACDONALD, ROD	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2120 ARLENA DR  ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARSH, CURTIS	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2100 KIMBERLY  ARLINGTON, TX 76016		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCNEILL, LARA	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2303 BRADWOOD CT  ARLINGTON, TX 76016		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERDUE BRANDON FIELDER COLLINS & MOTT LLP	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 500 E BORDER ST STE 640  ARLINGTON, TX 76010		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/7 Rpt: 8/25
<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, MARLENE <b>6</b> Contributor address; City; State; Zip Code 1609 GLASGOW DR  ARLINGTON, TX 76015	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions) RETIRED
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETSCHKE, ALAN Contributor address; City; State; Zip Code 3850 BELLAIRE CIR  FT WORTH, TX 76109	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, ANCEL Contributor address; City; State; Zip Code 3802 IVYWOOD CT  ARLINGTON, TX 76016	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINWATER, MATTHEW Contributor address; City; State; Zip Code 3315 AVONDALE ST  FT WORTH, TX 76109	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) BOARD MEMBER		Employer (See Instructions) RAINWATER CHARITABLE FOUNDATION
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINWATER, TODD Contributor address; City; State; Zip Code 333 THROCKMORTON ST  FT WORTH, TX 76016	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) TRUSTEE		Employer (See Instructions) RAINWATER CHARITABLE FOUNDATION

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/25
2 FILER NAME VOTE YES! KEEP THE RANGERS		3 Filer ID
4 Date 10/29/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAINWATER, TODD	7 Amount of Contribution (\$) \$15,000.00
6 Contributor address; City; State; Zip Code 333 THROCKMORTON ST  FT WORTH, TX 76016		
8 Principal occupation / Job title (See Instructions) TRUSTEE		9 Employer (See Instructions) RAINWATER CHARITABLE FOUNDATION
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROLLINS, ALBERT	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3004 YELLOWSTONE DR  ARLINGTON, TX 76013		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHELTON, KIM & PAT	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1401 W 2ND ST  ARLINGTON, TX 76013		
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) ALL-PRO FASTENERS
Date 10/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNDANCE SQUARE MANAGEMENT LP	Amount of Contribution (\$) \$25,000.00
Contributor address; City; State; Zip Code 201 MAIN ST STE 700  FT WORTH, TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRYON, W. MICKEY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 4019 CROSS BEND DR  ARLINGTON, TX 76010		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/25
2 FILER NAME VOTE YES! KEEP THE RANGERS		3 Filer ID
4 Date 09/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNDERWOOD, RICHARD	7 Amount of Contribution (\$)  \$25.00
6 Contributor address; City; State; Zip Code 2612 BLACK OAK LN  ARLINGTON, TX 76012		
8 Principal occupation / Job title (See Instructions) ENGINEER		9 Employer (See Instructions) IBM
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERKEST, JUDITH	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 2402 N HUNTER PL LN  ARLINGTON, TX 76006		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTON, MAX	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 503 BAYLOR DR  ARLINGTON, TX 76010		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEHR, ROGER	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code 2011 CASTLE OAKS DR  ARLINGTON, TX 76012		
Principal occupation / Job title (See Instructions) LECTURER		Employer (See Instructions) UT-ARLINGTON

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/2 Rpt: 11/25
2 FILER NAME VOTE YES! KEEP THE RANGERS		3 Filer ID
4 Date 10/28/2016	5 Corporation / Labor Organization name BALLPARK PARKING PARTNERS  6 Corporation / Labor Organization address; City; State; Zip Code 800 BERING DR STE 250  HOUSTON, TX 77057	7 Amount of contribution (\$) \$60,000.00
Date 10/29/2016	Corporation / Labor Organization name CEARNALCO LLC  Corporation / Labor Organization address; City; State; Zip Code PO BOX 13587  ARLINGTON, TX 76094	Amount of contribution (\$) \$100.00
Date 10/29/2016	Corporation / Labor Organization name CRAIG REAL ESTATE  Corporation / Labor Organization address; City; State; Zip Code 5400 JASON DR  ARLINGTON, TX 76016	Amount of contribution (\$) \$100.00
Date 10/26/2016	Corporation / Labor Organization name DELAWARE NORTH COMPANIES SPORTSERVICE INC  Corporation / Labor Organization address; City; State; Zip Code 250 DELAWARE AVE  BUFFALO, NY 14202	Amount of contribution (\$) \$250,000.00
Date 10/26/2016	Corporation / Labor Organization name FREESE AND NICHOLS INC  Corporation / Labor Organization address; City; State; Zip Code 4055 INTERNATIONAL PLAZA STE 200  FT WORTH, TX 76109	Amount of contribution (\$) \$500.00
Date 10/29/2016	Corporation / Labor Organization name GREEN OAKS REALTY  Corporation / Labor Organization address; City; State; Zip Code 3825 W GREEN OAKS BLVD #150  ARLINGTON, TX 76016	Amount of contribution (\$) \$100.00
Date 10/26/2016	Corporation / Labor Organization name HKS CONSULTING  Corporation / Labor Organization address; City; State; Zip Code 350 N ST PAUL ST STE 100  DALLAS, TX 75201	Amount of contribution (\$) \$25,000.00

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/2 Rpt: 12/25
2 FILER NAME VOTE YES! KEEP THE RANGERS		3 Filer ID
4 Date 10/06/2016	5 Corporation / Labor Organization name MANHATTAN CONSTRUCTION CO  6 Corporation / Labor Organization address; City; State; Zip Code 5601 S 122ND E AVE  TULSA, OK 74146	7 Amount of contribution (\$) \$5,000.00
Date 09/30/2016	Corporation / Labor Organization name MPAC ARLINGTON INC  Corporation / Labor Organization address; City; State; Zip Code 1316 S PECAN ST  ARLINGTON, TX 76010	Amount of contribution (\$) \$250.00
Date 10/11/2016	Corporation / Labor Organization name NEHEMIAH REAL ESTATE ADVISORS LLC  Corporation / Labor Organization address; City; State; Zip Code 835 E LAMAR BLVD 175  ARLINGTON, TX 76011	Amount of contribution (\$) \$25,000.00
Date 10/26/2016	Corporation / Labor Organization name RANGERS BASEBALL  Corporation / Labor Organization address; City; State; Zip Code 1000 BALLPARK WAY STE 400  ARLINGTON, TX 76011	Amount of contribution (\$) \$100,000.00
Date 10/14/2016	Corporation / Labor Organization name STADIUM PARKING  Corporation / Labor Organization address; City; State; Zip Code 2809 HARDER DR  ARLINGTON, TX 76016	Amount of contribution (\$) \$1,830.00

# NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

**SCHEDULE C2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C2: Sch: 1/1 Rpt: 13/25	
<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID	
<b>4</b> Date 10/07/2016	<b>5</b> Corporation / Labor Organization name RANGERS BASEBALL	<b>7</b> Amount of contribution(\$) \$59,049.60	<b>8</b> In-kind contribution description INKIND TICKETS/ADVERTISING/FACILITY RENTAL/CATERING/B
	<b>6</b> Corporation / Labor Organization address; City; State; Zip Code 1000 BALLPARK WAY STE 400  ARLINGTON, TX 76011		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Date 10/12/2016	Corporation / Labor Organization name RANGERS BASEBALL	Amount of contribution(\$) \$13,900.00	In-kind contribution description INKIND PLAYER APPEARANCES
	Corporation / Labor Organization address; City; State; Zip Code 1000 BALLPARK WAY STE 400  ARLINGTON, TX 76011		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/10 Rpt: 14/25		<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID	
<b>4</b> Date 10/05/2016		<b>5</b> Payee name AMERICAN EXPRESS			
<b>6</b> Amount (\$) \$4.64		<b>7</b> Payee address; City; State; Zip Code 200 VESEY ST  NEW YORK, NY 10285			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</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 PROCESSING FEE	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/18/2016		Payee name ARLINGTON CHAMBER OF COMMERCE			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 505 E BORDER ST  ARLINGTON, TX 76010			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense REGISTRATION FEE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/18/2016		Payee name ARLINGTON TODAY			
Amount (\$) \$4,000.00		Payee address; City; State; Zip Code 1000 BALLPARK WAY STE 315  ARLINGTON, TX 76011			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PRINT AD	
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.

<b>1</b> Total pages Schedule F1: Sch: 2/10 Rpt: 15/25		<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS		<b>3</b> Filer ID	
<b>4</b> Date 10/03/2016		<b>5</b> Payee name BB&T BANK			
<b>6</b> Amount (\$) \$17.00		<b>7</b> Payee address; City; State; Zip Code 2200 WILSON BLVD STE 100  ARLINGTON, VA 22201			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEE	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/19/2016		Payee name BB&T BANK			
Amount (\$) \$1.00		Payee address; City; State; Zip Code 2200 WILSON BLVD STE 100  ARLINGTON, VA 22201			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/21/2016		Payee name BB&T BANK			
Amount (\$) \$41.50		Payee address; City; State; Zip Code 2200 WILSON BLVD STE 100  ARLINGTON, VA 22201			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEE	
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.

<b>1</b> Total pages Schedule F1: Sch: 3/10 Rpt: 16/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Payee name CAELEN COMMUNICATIONS	
<b>6</b> Amount (\$) \$10,500.00	<b>7</b> Payee address; City; State; Zip Code 13083 CORDELLERA LN  FRISCO, TX 75035	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2016	Payee name CHAPMAN-CORNELIUS INSURANCE SERVICES INC	
Amount (\$) \$542.06	Payee address; City; State; Zip Code PO BOX 2000308  ARLINGTON, TX 76006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INSURANCE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2016	Payee name CITY OF ARLINGTON PARKS & RECREATION	
Amount (\$) \$385.00	Payee address; City; State; Zip Code 2800 S CENTER ST  ARLINGTON, TX 76014	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FACILITY RENTAL
Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1: Sch: 4/10 Rpt: 17/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
<b>4</b> Date 10/06/2016	<b>5</b> Payee name FEDEX	
<b>6</b> Amount (\$) \$38.50	<b>7</b> Payee address; City; State; Zip Code 942 SHADY GROVE RD  MEMPHIS, TN 38119	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) DELIVERY	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DELIVERY
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/18/2016	Payee name JACOBSON, JONATHAN	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 703 FINDLAY DR  ARLINGTON, TX 76012	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/21/2016	Payee name KATE FOLEY DESIGNS	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 6517 E LANCASTER  FT WORTH, TX 76112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FLOWERS
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.

<b>1</b> Total pages Schedule F1: Sch: 5/10 Rpt: 18/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
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<b>4</b> Date 10/26/2016	<b>5</b> Payee name MAYES MEDIA GROUP
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<b>6</b> Amount (\$) \$106,000.00	<b>7</b> Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182
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<b>8</b> 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 SURVEY/POLLING/TOWNHALL
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2016	Payee name MAYES MEDIA GROUP
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Amount (\$) \$71,097.75	Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182
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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 AD DESIGN AND PLACEMENT
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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 10/26/2016	Payee name MAYES MEDIA GROUP
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Amount (\$) \$81,300.62	Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182
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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 BROCHURE/MAILER 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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# 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: 6/10 Rpt: 19/25		2 FILER NAME VOTE YES! KEEP THE RANGERS		3 Filer ID	
4 Date 10/26/2016		5 Payee name MAYES MEDIA GROUP			
6 Amount (\$) \$58,627.62		7 Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) DELIVERY		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POSTAGE	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/20/2016		Payee name MAYES MEDIA GROUP			
Amount (\$) \$231,619.00		Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182			
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 AD DESIGN AND PLACEMENT	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/20/2016		Payee name MAYES MEDIA GROUP			
Amount (\$) \$8,780.80		Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182			
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 POLITICAL STRATEGY CONSULTING	
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.

<b>1</b> Total pages Schedule F1: Sch: 7/10 Rpt: 20/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
<b>4</b> Date 10/26/2016	<b>5</b> Payee name MAYES MEDIA GROUP	
<b>6</b> Amount (\$) \$39,927.46	<b>7</b> Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2016	Payee name RIGHTSIDE COMPLIANCE LLC	
Amount (\$) \$1,645.00	Payee address; City; State; Zip Code PO BOX 341027  AUSTIN, TX 78734	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMPLIANCE CONSULTING
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2016	Payee name RTP MARKETING	
Amount (\$) \$3,017.18	Payee address; City; State; Zip Code 505 E ABRAM ST  ARLINGTON, TX 76010	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GLOW STICKS
Complete <u>ONLY</u> 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.

<b>1</b> Total pages Schedule F1: Sch: 8/10 Rpt: 21/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
<b>4</b> Date 10/18/2016	<b>5</b> Payee name SHULTS, MATT	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 1505 WALTHAM CT  ARLINGTON, TX 76012	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/13/2016	Payee name TIME WARNER CABLE	
Amount (\$) \$473.66	Payee address; City; State; Zip Code 1900 BLUE CREST LN  SAN ANTONIO, TX 78247	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INTERNET SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/18/2016	Payee name TIME WARNER CABLE	
Amount (\$) \$240.63	Payee address; City; State; Zip Code 1900 BLUE CREST LN  SAN ANTONIO, TX 78247	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense INTERNET SERVICE
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.

<b>1</b> Total pages Schedule F1: Sch: 9/10 Rpt: 22/25	<b>2</b> FILER NAME VOTE YES! KEEP THE RANGERS	<b>3</b> Filer ID
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<b>4</b> Date 10/05/2016	<b>5</b> Payee name WIDGETMAKR
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<b>6</b> Amount (\$) \$4.20	<b>7</b> Payee address; City; State; Zip Code 1593 SPRING HILL RD #400  TYSONS CORNER, VA 22182
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</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 PROCESSING FEE
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/19/2016	Payee name WIDGETMAKR
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Amount (\$) \$200.19	Payee address; City; State; Zip Code 1593 SPRING HILL RD #400  TYSONS CORNER, VA 22182
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</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 PROCESSING FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2016	Payee name WIDGETMAKR
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Amount (\$) \$36.65	Payee address; City; State; Zip Code 1593 SPRING HILL RD #400  TYSONS CORNER, VA 22182
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 10/10 Rpt: 23/25	2 FILER NAME VOTE YES! KEEP THE RANGERS	3 Filer ID	
4 Date 10/18/2016	5 Payee name WILBANKS, ESTER		
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 2505 SHADYDALE DR  ARLINGTON, TX 76012		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL STRATEGY CONSULTING	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F2: Sch: 1/2 Rpt: 24/25	2 FILER NAME VOTE YES! KEEP THE RANGERS	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 10/29/2016	6 Payee name CAELEN COMMUNICATIONS
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7 Amount (\$) \$2,484.02	8 Payee address; City; State; Zip Code 13083 CORDELLERA LN  FRISCO, TX 75035
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 OFFICE SUPPLIES
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/28/2016	Payee name CASE-BALDWIN JANITORIAL PROFESSIONALS
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Amount (\$) \$43.03	Payee address; City; State; Zip Code 890 N MILL ST STE 113  LEWISVILLE, TX 75057
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 JANITORIAL SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F2: Sch: 2/2 Rpt: 25/25	2 FILER NAME VOTE YES! KEEP THE RANGERS	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 10/28/2016	6 Payee name HILTON ARLINGTON
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7 Amount (\$) \$11,007.30	8 Payee address; City; State; Zip Code 2401 E LAMAR BLVD  ARLINGTON, TX 76006
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 FACILITY RENTAL/CATERING
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/29/2016	Payee name MAYES MEDIA GROUP
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Amount (\$) \$211,061.24	Payee address; City; State; Zip Code 312 CREEKWOOD DR  SUNNYVALE, TX 75182
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 ADVERTISING DESIGN/PLACEMENT/POSTAGE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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