

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

3 COMMITTEE NAME

Denton Taxpayers for a Strong Economy

OFFICE USE ONLY

Date Received

4 COMMITTEE
ADDRESS change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1824 Bonnie Brae St
Denton, Texas 76207

Date Hand-delivered or Postmarked

Receipt #

Amount

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Bobby

NICKNAME

LAST

SUFFIX

Jones

Date Processed

Date Imaged

6 CAMPAIGN
TREASURER'S
STREET ADDRESS
(residence or business)

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

1824 Bonnie Brae St
Denton, Texas 762077 CAMPAIGN
TREASURER'S
MAILING ADDRESS change of address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Same

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(940) 600-2108

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 termination10 PERIOD
COVERED

Month Day Year

8 / 5 / 2014

THROUGH

Month Day Year

9 / 25 / 2014

11 ELECTION

ELECTION DATE
Month Day Year

11 / 4 / 2014

ELECTION TYPE

 Primary Runoff General Special

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME Denton Taxpayers for a Strong Economy **ACCOUNT # (Ethics Commission Filers)**

<p>13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)</p> <p><input type="checkbox"/> SUPPORT (Candidate or Measure)</p> <p><input checked="" type="checkbox"/> OPPOSE (Candidate or Measure)</p> <p><input type="checkbox"/> ASSIST (Officeholder)</p>	<p><input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> OFFICEHOLDER</p> <p><input checked="" type="checkbox"/> MEASURE</p>	<p>CANDIDATE / OFFICEHOLDER NAME</p> <hr/> <p>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</p> <hr/> <p>BALLOT IDENTIFICATION / # ELECTION DATE</p> <p style="text-align: right;">Month Day Year 11 / 4 / 14</p> <hr/> <p>DESCRIPTION</p> <p style="text-align: center;">Denton Drilling Ban Proposition</p>
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<p>14 CONTRIBUTION TOTALS</p> <hr/> <p>EXPENDITURE TOTALS</p> <hr/> <p>CONTRIBUTION BALANCE</p> <hr/> <p>OUTSTANDING LOAN TOTALS</p>	<p>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</p>	\$ 3.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 231,063.00
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 10.61
	4. TOTAL POLITICAL EXPENDITURES	\$ 185,758.66
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 45,304.34
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.



Robert Jones

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robert Jones, this the 6th day of October, 20 14, to certify which, witness my hand and seal of office.

Naomi Robinson Naomi Robinson Notary

Signature of officer administering oath Printed 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 Total pages Schedule A:	
2 FILER NAME Denton Taxpayers for a Strong Economy		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/25/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Jones 6 Contributor address; City; State; Zip Code 1428 Bonnie Brae Street, Denton, TX; 76205	7 Amount of contribution (\$) 500.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 9/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Sorrells Contributor address; City; State; Zip Code 3501 Roselawn Drive; Denton; Texas 76205	Amount of contribution (\$) 250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/14/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederick Plaeger Contributor address; City; State; Zip Code 5105 Longmont Dr; Houston; TX; 77056	Amount of contribution (\$) 250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/16/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marty Allday Contributor address; City; State; Zip Code P.O. Box 27564; Houston; TX; 77227	Amount of contribution (\$) 25.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/18/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Horton Contributor address; City; State; Zip Code 2305 Ridgewood; Bridgeport; TX; 76426	Amount of contribution (\$) 5.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME **Denton Taxpayers for a Strong Economy**

3 ACCOUNT # (Ethics Commission Filers)

4 Date
9/22/14

5 Full name of contributor out-of-state PAC (ID#: _____)
Devon Energy

6 Contributor address; City; State; Zip Code
333 W Sheridan Ave; Oklahoma City; OK; 73102

7 Amount of contribution (\$)
45000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
XTO

Contributor address; City; State; Zip Code

810 Houston; Fort Worth; TX; 76102

Amount of contribution (\$)
45000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Devon Energy

Contributor address; City; State; Zip Code

333 W Sheridan Ave; Oklahoma City; OK; 73102

Amount of contribution (\$)
30000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Enervest Operating

Contributor address; City; State; Zip Code

1001 Fannin St #800; Houston; TX; 77002

Amount of contribution (\$)
45000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
XTO

Contributor address; City; State; Zip Code

810 Houston; Fort Worth; TX; 76102

Amount of contribution (\$)
30000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME Denton Taxpayers for a Strong Economy

3 ACCOUNT # (Ethics Commission Filers)

4 Date
9/24/14

5 Full name of contributor out-of-state PAC (ID#: _____)
John Riesenber
6 Contributor address; City; State; Zip Code
2128 NW 26th St; Oklahoma City; OK; 73107

7 Amount of contribution (\$)
10.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
9/5/14

Full name of contributor out-of-state PAC (ID#: _____)
Texas Alliance of Energy Producers
Contributor address; City; State; Zip Code
90 8th Street; #400; Wichita Falls; TX 76301

Amount of contribution (\$)
5000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
9/11/14

Full name of contributor out-of-state PAC (ID#: _____)
Tricia K. Davis
Contributor address; City; State; Zip Code
22301 Hamilton Pool Rd.; Dripping Springs, TX
78620

Amount of contribution (\$)
20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
9/25/14

Full name of contributor out-of-state PAC (ID#: _____)
Enervest Operating
Contributor address; City; State; Zip Code
1001 Fannin St #800; Houston; TX; 77002

Amount of contribution (\$)
30000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials
Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related
Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **2** 2 FILER NAME **Denton Taxpayers for a Strong Economy** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **9/25/14** 5 Payee name **The Eppstein Group**

6 Amount (\$) **\$42,500.00** 7 Payee address; City; State; Zip Code **4055 International Plaza Fort Worth TX 76109**

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) **Advertising** (b) Description (If travel outside of Texas, complete Schedule T) **Direct Mail**
 Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **9/25/14** Payee name **The Eppstein Group**

Amount (\$) **\$65,015.00** Payee address; City; State; Zip Code **4055 International Plaza Fort Worth TX 76109**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Advertising** Description (If travel outside of Texas, complete Schedule T) **Campaign ads**
 Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **9/25/14** Payee name **The Eppstein Group**

Amount (\$) **\$25,000.00** Payee address; City; State; Zip Code **4055 International Plaza Fort Worth TX 76109**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Consulting** Description (If travel outside of Texas, complete Schedule T) **Professional Services**
 Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **9/25/14** Payee name **The Eppstein Group**

Amount (\$) **\$43,852.46** Payee address; City; State; Zip Code **4055 International Plaza Fort Worth TX 76109**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Advertising** Description (If travel outside of Texas, complete Schedule T) **Voter Contact**
 Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By Candidate/Officeholder/Political Committee |
| Event Expense | Polling Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | Printing Expense | Office Overhead/Rental Expense | |

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2	2 FILER NAME Denton Taxpayers for a Strong Economy	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9/25/14	5 Payee name The Eppstein Group
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6 Amount (\$) \$5747.72	7 Payee address; City; State; Zip Code 4055 International Plaza Fort Worth TX 76109
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Signs <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/25/14	Payee name The Eppstein Group
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Amount (\$) \$3632.87	Payee address; City; State; Zip Code 4055 International Plaza Fort Worth TX 76109
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Campaign Materials <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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