

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 10
3 COMMITTEE NAME <p style="text-align:center;">Vote Yes Farmers Branch</p>		OFFICE USE ONLY <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> Date Received RECEIVED APR 08 2019 CITY MANAGER'S OFFICE </div> Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2972 Primrose Lane Farmers Branch, Texas 75234		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Natasha J NICKNAME LAST SUFFIX Moser		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2972 Primrose Lane Farmers Branch, Texas 75234		
7 CAMPAIGN TREASURER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2972 Primrose Lane Farmers Branch, Texas 75234		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 597-3528		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 3 / 1 / 2019 THROUGH 4 / 7 / 2019		
11 ELECTION	ELECTION DATE Month Day Year 5 / 4 / 2019	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

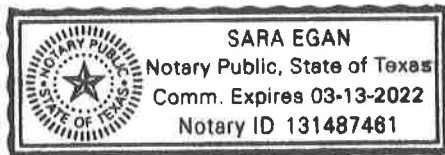
12 COMMITTEE NAME Vote Yes Farmers Branch **13 Filer ID (Ethics Commission Filers)**

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported May 4, 2019 City of Farmers Branch Proposition A New Library
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,362.57
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,661.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 448.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

16 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.



[Handwritten Signature]
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Natasha Moser, this the 8th day of April, 20 19, to certify which, witness my hand and seal of office.

[Handwritten Signature] Signature of officer administering oath Sara Egan Printed name of officer administering oath Asst. to City Sec. Title of officer administering oath

SUBTOTALS - GPAC

**FORM GPAC
COVER SHEET PG 3**

17 COMMITTEE NAME Vote Yes Farmers Branch		18 Filer ID (Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,110.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,252.57
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3 : MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4 : NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,661.43
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 2

2 FILER NAME

Vote Yes Farmers Branch

3 Filer ID (Ethics Commission Filers)

4 Date

3/12/19

5 Full name of contributor

Robert C. Dye

out-of-state PAC (ID#: _____)

6 Contributor address;

City; State; Zip Code

13218 Bee Street Farmers Branch Texas 75234

7 Amount of contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

Commercial Developer

9 Employer (See Instructions)

Date

3/12/19

Full name of contributor

Bronson Blackson

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

3137 Berrymeade Lane Farmers Branch Texas 75234

Amount of contribution (\$)

\$800.00

Principal occupation / Job title (See Instructions)

Vice President

Employer (See Instructions)

Date

3/13/19

Full name of contributor

Jennifer Bauer

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

3319 Becket Ridge Court Farmers Branch Texas 75234

Amount of contribution (\$)

\$20.00

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Date

3/15/19

Full name of contributor

Heather Garner

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

3115 Golfing Green Drive Farmers Branch Texas 75234

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Registered Nurse

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 2

2 FILER NAME
Vote Yes Farmers Branch

3 Filer ID (Ethics Commission Filers)

4 Date
3/26/19

5 Full name of contributor out-of-state PAC (ID#: _____)
Jessica Rodriguez

7 Amount of contribution (\$)
\$200.00

6 Contributor address; City; State; Zip Code
13806 Heartside Place Farmers Branch Texas 75234

8 Principal occupation / Job title (See Instructions)
Coordinator

9 Employer (See Instructions)

Date
3/27/19

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

Amount of contribution (\$)
\$20.00

Contributor address; City; State; Zip Code
12719 Epps Field Road Farmers Branch Texas 75234

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date
4/2/19

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

Amount of contribution (\$)
\$20.00

Contributor address; City; State; Zip Code
2537 Havenhurst Street Farmers Branch Texas 75234

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date
4/7/19

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

Amount of contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
13699 Rawhide Parkway Farmers Branch Texas 75234

Principal occupation / Job title (See Instructions)
Teacher

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 3	
2 FILER NAME Vote Yes Farmers Branch		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 2/6/19	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson Blackson 7 Contributor address; City; State; Zip Code 3137 Berrymeade Lane Farmers Branch Texas 75234	8 Amount of Contribution \$ \$50.32	9 In-kind contribution description PAC Domain voteyesfb.com GoDaddy.com Order # 1441192693 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Vice President		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 3/1/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson Blackson Contributor address; City; State; Zip Code 3137 Berrymeade Lane Farmers Branch Texas 75234	Amount of Contribution \$ \$25.68	In-kind contribution description TXSOS Certificate of Formation File #803252604 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Vice President		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)			

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2 of 3	
2 FILER NAME Vote Yes Farmers Branch		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 3/6/19	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson Blackson 7 Contributor address; City; State; Zip Code 3137 Berrymeade Lane Farmers Branch Texas 75234	8 Amount of Contribution \$ \$90.00	9 In-kind contribution description Without Code, Inc. Webhosting Order #2838-7834 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Vice President		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 3/6/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos Castro Contributor address; City; State; Zip Code 4233 Swan Forest Drive #C Carrollton Texas 75006	Amount of Contribution \$ \$500.00	In-kind contribution description Graphic/Media/ Web Design <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Creative Director		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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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3 of 3	
2 FILER NAME Vote Yes Farmers Branch		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 4/4/19	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natasha J. Moser 7 Contributor address; City; State; Zip Code 2972 Primrose Lane Farmers Branch Texas 75234	8 Amount of Contribution \$ \$86.57 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description Signage Office Depot Order # 298660817-001
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Marketing Director		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 4/4/19	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosa Poetschke Contributor address; City; State; Zip Code 2969 Lavita Lane Farmers Branch Texas 75234	Amount of Contribution \$ \$500.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind contribution description Photography
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Photographer		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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 2		2 FILER NAME Vote Yes Farmers Branch		3 Filer ID (Ethics Commission Filers)	
4 Date 3/22/19		5 Payee name Aquecs, Inc. dba Cross & Oberlie			
6 Amount (\$) \$994.15 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 916 Byrd Avenue Neenah Wisconsin 54956			
8 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 Yard Signs (Invoice #30101)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/27/19		Payee name Aquecs, Inc. dba Cross & Oberlie			
Amount (\$) \$345.61 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 916 Byrd Avenue Neenah Wisconsin 54956			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expedited Shipping (Invoice #30107)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/30/19		Payee name Vistaprint			
Amount (\$) \$311.18 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 9230 Red Rock Road Reno Nevada 89506			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postcards (Order #D9GT5-85A14-0K4)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE 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: 2 of 2	2 FILER NAME Vote Yes Farmers Branch	3 Filer ID (Ethics Commission Filers)
4 Date 4/7/19	5 Payee name PayPal, Inc.	
6 Amount (\$) \$10.49 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2211 North First Street San Jose California 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation Processing (3/1/19 - 4/7/19)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED