

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <span style="font-size: 2em; color: blue;">27</span>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST John	MI J	<b>OFFICE USE ONLY</b>  <div style="border: 2px solid blue; padding: 5px; margin: 5px auto; width: 80%;"> <p style="color: blue; margin: 0;">Abilene City Secretary</p> <p style="color: red; font-size: 1.2em; margin: 5px 0;">JUN - 8 2018</p> <p style="color: blue; margin: 0;">Filed for Record</p> </div>
	NICKNAME Jack	LAST Rentz	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #; 18 Pinehurst Abilene, TX 79606	CITY; Abilene, TX	STATE; TX	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( 325 )	PHONE NUMBER 794-5601	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Elyse	MI	Date Received
	NICKNAME McAnally Lewis	LAST Lewis	SUFFIX	Date Hand-delivered or Date Postmarked
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 2002 Cedar Crest Dr. Abilene, TX 79601			Receipt #
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 325 )	PHONE NUMBER 660-6901	EXTENSION	Amount \$
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month    Day    Year <span style="font-size: 1.2em; color: blue;">04 / 26 / 2018</span>			Month    Day    Year <span style="font-size: 1.2em; color: blue;">06 / 06 / 2018</span>
11 ELECTION	ELECTION DATE Month    Day    Year <span style="font-size: 1.2em; color: blue;">06 / 16 / 2018</span>		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)  Abilene City Council Place 2	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

*John J. Rentz*

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ *920.00*

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ *16,600.00*

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ *21.20*

4. TOTAL POLITICAL EXPENDITURES

\$ *18,816.13*

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ *5,314.61*

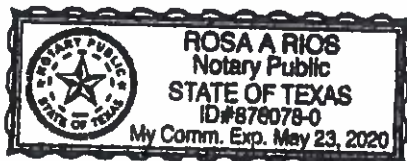
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ *9,500.00*

18 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.



*John J. Rentz*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *John J. Rentz*, this the *8<sup>th</sup>* day of *June*, 20 *18*, to certify which, witness my hand and seal of office.

*Rosa A. Rios*  
Signature of officer administering oath

*Rosa A. Rios*  
Printed name of officer administering oath

*Notary Public*  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> <i>John S. Rantz</i>	<b>20 Filer ID (Ethics Commission Filers)</b>
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21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>16,600</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>0</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0</i>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>7,000</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>18,816.13</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>0</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME **John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/8/2018**

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

7 Amount of contribution (\$)  
**\$250.00**

6 Contributor address; City; State; Zip Code  
**609 Prosperity Rd. Abilene, Tx 79602**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
**5/8/2018**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Jim and Kimberly Synder**

Contributor address; City; State; Zip Code  
**1426 Elmwood Abilene TX 79605**

Amount of contribution (\$)  
**\$ 500.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/8/2018**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**BUSH and Cindy Ramsey**

Contributor address; City; State; Zip Code  
**21 Fairway Oaks Blvd. Abilene TX 79606**

Amount of contribution (\$)  
**\$ 250.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/8/2018**

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

Contributor address; City; State; Zip Code  
**54 Rue Maison Abilene, TX 79605**

Amount of contribution (\$)  
**\$ 100.00**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>John. J. Rentz</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/8/2018</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gary Grubbs</b> 6 Contributor address; City; State; Zip Code <b>1410 Kingwood Cr. Abilene TX 79602</b>	7 Amount of contribution (\$) <b>\$ 100.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>5/8/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Phil and Jane Guitar</b> Contributor address; City; State; Zip Code <b>PO Box 2213 Abilene TX 79604</b>	Amount of contribution (\$) <b>\$ 500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/8/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Larry Gill</b> Contributor address; City; State; Zip Code <b>PO Box 176 Abilene TX 79604</b>	Amount of contribution (\$) <b>\$ 500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/8/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rick Weather</b> Contributor address; City; State; Zip Code <b>104 Pine, Ste. 612 Abilene TX 79601</b>	Amount of contribution (\$) <b>\$ 500.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/8/2018**

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

**Ron and Anne Fogle**

6 Contributor address; City; State; Zip Code

**1466 Woodland Trail Abilene TX 79605**

7 Amount of contribution (\$)

**\$ 250.00**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/23/2018**

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

**Joe and Jana Crawford**

Contributor address; City; State; Zip Code

**1910 Campbell Dr. Abilene TX 79602**

Amount of contribution (\$)

**\$ 100.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

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

**Grady Barr**

Contributor address; City; State; Zip Code

**3 Glen Abbey Ct. Abilene TX 79606**

Amount of contribution (\$)

**\$ 250.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

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

**Paul and Rolanda Fulham**

Contributor address; City; State; Zip Code

**1225 Elmwood Dr. Abilene TX 79605**

Amount of contribution (\$)

**\$ 100.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/23/2018**

5 Full name of contributor

**Mike and Cindy Sullivan**

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

7 Amount of contribution (\$)

**\$ 100.00**

6 Contributor address;

**2518 Crestline Dr.**

City; State; Zip Code

**Abilene TX 79602**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Buddy Napier**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

**2120 Shoreline Cir.**

City; State; Zip Code

**Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**David Copeland**

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

Amount of contribution (\$)

**\$ 250.00**

Contributor address;

**PO Box 2791**

City; State; Zip Code

**Abilene TX 79604**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Lee and Callie Hampton**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

**1410 River Oaks Rd. Abilene TX 79605**

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/23/2018**

5 Full name of contributor

**Dan Garrett**

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

7 Amount of contribution (\$)

**\$ 100.00**

6 Contributor address;

City; State; Zip Code

**1281 Canterbury Dr. Abilene TX 79602**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Maureen Trotter**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**11 Cypress Point St. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Ronny and Teresa Bryant**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**2151 Oldham Ln. Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Phil and Mary Christopher**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**2102 Westminster Dr. Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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1 Total pages Schedule A1: **20**

2 FILER NAME **John J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/23/2018**

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

7 Amount of contribution (\$)  
**\$ 250.00**

6 Contributor address; City; State; Zip Code  
**1273 Lancelot Abilene TX 79602**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
**5/23/2018**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Louis J. Paulsen**

Amount of contribution (\$)  
**\$ 250.00**

Contributor address; City; State; Zip Code  
**47 Pebble Beach Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/23/2018**

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Jason Luis and Stacy Elizabeth Acevedo**

Amount of contribution (\$)  
**\$ 100.00**

Contributor address; City; State; Zip Code  
**7925 Saddle Creek Rd. Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/23/2018**

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

Amount of contribution (\$)  
**\$ 100.00**

Contributor address; City; State; Zip Code  
**71 Glen Abbey St. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/23/2018**

5 Full name of contributor

**Zane Travis**

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

7 Amount of contribution (\$)

**\$ 100.00**

6 Contributor address:

**1156 Elmwood Dr.**

City: State: Zip Code

**Abilene Tx 79605**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Frederick Scott Dueser**

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

Amount of contribution (\$)

**\$ 500.00**

Contributor address:

**5 Glen Abbey Ct.**

City: State: Zip Code

**Abilene Tx 79604**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Late M. Ester**

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

Amount of contribution (\$)

**\$ 60.00**

Contributor address:

**6513 Lincolnshire Way**

City: State: Zip Code

**Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/23/2018**

Full name of contributor

**Carol and Glen Hall**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address:

**740 Sayles Dr.**

City: State: Zip Code

**Abilene TX 79605**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME **John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date **5/23/2018**  
 5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Paige and Mandy Galihar**  
 6 Contributor address; City; State; Zip Code  
**2106 Shoreline Cir. Abilene TX 79602**

7 Amount of contribution (\$)  
**\$ 100.00**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date **5/23/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Guy and Peggy Beckham**  
 Contributor address; City; State; Zip Code  
**1416 Woodland Trail Abilene TX 79605**

Amount of contribution (\$)  
**\$ 300.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **5/23/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Bob Willburn**  
 Contributor address; City; State; Zip Code  
**4334 La Hacienda Dr. Abilene TX 79602**

Amount of contribution (\$)  
**\$ 60.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **5/23/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Robert and Sue Patton**  
 Contributor address; City; State; Zip Code  
**1510 River Oaks Rd. Abilene TX 79605**

Amount of contribution (\$)  
**\$ 100.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. S. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

5/23/2018

5 Full name of contributor

**Casey D. Cornutt**

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

7 Amount of contribution (\$)

**\$ 200.00**

6 Contributor address;

City: State: Zip Code

**1726 Elmwood Dr. Abilene TX 79605**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/23/2018

Full name of contributor

**James T. Walker**

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

Amount of contribution (\$)

**\$ 500.00**

Contributor address;

City: State: Zip Code

**4 Glen Abbey Ct. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/30/2018

Full name of contributor

**Billye Proctor Shaw**

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

Amount of contribution (\$)

**\$ 250.00**

Contributor address;

City: State: Zip Code

**1760 River Oaks Rd, Abilene TX 79605**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/30/2018

Full name of contributor

**John and Carolyn Beckham**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City: State: Zip Code

**1609 Elmwood Abilene TX 79605**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME **John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/30/2018**

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

**Charles and Betty Hukill**

7 Amount of contribution (\$)

**\$ 60.00**

6 Contributor address; City; State; Zip Code

**1933 Highland Abilene TX 79605**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
**5/30/2018**

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

**David Flanagan**

Amount of contribution (\$)

**\$ 60.00**

Contributor address; City; State; Zip Code

**5566 Chimney Rock Rd. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/30/2018**

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

**Randy and Sherry Burchell**

Amount of contribution (\$)

**\$ 100.00**

Contributor address; City; State; Zip Code

**2 Village Dr. Ste. 200 Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**5/30/2018**

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

**Peter and Cathy Laue**

Amount of contribution (\$)

**\$ 100.00**

Contributor address; City; State; Zip Code

**2334 Vatholla Ct. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/30/2018**

5 Full name of contributor

**Austin King**

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

7 Amount of contribution (\$)

**\$ 500.00**

6 Contributor address;

City; State; Zip Code

**2217 S. Danville Dr. Abilene TX 79605**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Ed and Sue Patton**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**PO Box 296 Abilene TX 79604**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Paul and Gail Thomas**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**1217 Elmwood Dr. Abilene TX 79605**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Jim and Jue Barr**

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

Amount of contribution (\$)

**\$ 500.00**

Contributor address;

City; State; Zip Code

**889 Elmwood Dr. Abilene TX 79605**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/30/2018**

5 Full name of contributor

**Kelly McCarty**

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

7 Amount of contribution (\$)

**\$ 250.00**

6 Contributor address;

**5 Winged Foot Cir.**

City: State: Zip Code

**Abilene TX 79606**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Josie Cossle**

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

Amount of contribution (\$)

**\$ 500.00**

Contributor address;

**750 Grove St.**

City: State: Zip Code

**Abilene TX 79605**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Bill Senter**

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

Amount of contribution (\$)

**\$ 125.00**

Contributor address;

**3401 Curry Ln.**

City: State: Zip Code

**Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Scott Senter**

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

Amount of contribution (\$)

**\$ 125.00**

Contributor address;

**18 Pinchurst**

City: State: Zip Code

**Abilene TX 79606**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>John S. Rentz</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/30/2018</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David and Kay Alexander</b>	7 Amount of contribution (\$) <b>\$ 250.00</b>
6 Contributor address; City: State; Zip Code <b>29 Colen Abbey Abilene TX 79606</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kris Seale</b>	Amount of contribution (\$) <b>\$ 500.00</b>
Contributor address; City: State; Zip Code <b>38 Muirfield St. Abilene TX 79606</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leroy and Rhonda Bolt</b>	Amount of contribution (\$) <b>\$ 100.00</b>
Contributor address; City: State; Zip Code <b>2201 Garthright Abilene TX 79606</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Robert and Barbara Anderson</b>	Amount of contribution (\$) <b>\$ 100.00</b>
Contributor address; City: State; Zip Code <b>PO Box 266 Abilene TX 79604</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5/30/2018**

5 Full name of contributor

**Andre and Linda White**

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

7 Amount of contribution (\$)

**\$ 100.00**

6 Contributor address;

City: State: Zip Code

**6 Turnberry Cir. Abilene TX 79606**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Robert and Shirley Hunter**

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

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City: State: Zip Code

**1250 E. North 10th St.  
Apt 120 Abilene TX 79601**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Suzanne Starr**

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

Amount of contribution (\$)

**\$ 60.00**

Contributor address;

City: State: Zip Code

**18 Kings Cross Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**5/30/2018**

Full name of contributor

**Jerry and Rozlyn Love**

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

Amount of contribution (\$)

**\$ 250.00**

Contributor address;

City: State: Zip Code

**3258 Heritage Ln. Abilene TX 79606**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME **John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date **5/30/2018**  
 5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Kelly and Sandra Utley**  
 6 Contributor address; City; State; Zip Code  
**1700 Woodridge Dr. Abilene TX 79605**

7 Amount of contribution (\$)  
**\$ 100.00**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date **5/30/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Ronnie and Rebecca Nail**  
 Contributor address; City; State; Zip Code  
**941 Prado Verde Dr. Abilene TX 79602**

Amount of contribution (\$)  
**\$ 250.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **5/30/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**Johnon McDonald**  
 Contributor address; City; State; Zip Code  
**#11 Muirfield St. Abilene TX 79606**

Amount of contribution (\$)  
**\$ 250.00**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **5/30/2018**  
 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
**JUNE ESTES**  
 Contributor address; City; State; Zip Code  
**2309 Lincoln Dr. Abilene TX 79601**

Amount of contribution (\$)  
**\$ 60.00**

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.

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>John. J. Rantz</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/30/2018</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark and Judy Sisley</b>	7 Amount of contribution (\$) <b>\$ 60.00</b>
6 Contributor address; City; State; Zip Code <b>4373 Tremor Dr. Abilene TX 79602</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mark and Rebecca Colman</b>	Amount of contribution (\$) <b>\$ 1,000.00</b>
Contributor address; City; State; Zip Code <b>1333 Elmwood Dr. Abilene TX 79605</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Richard and Kristine Waldraff</b>	Amount of contribution (\$) <b>\$ 250.00</b>
Contributor address; City; State; Zip Code <b>24 Glenn Abbey Ct. Abilene TX 79606</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>5/30/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gary A. Young</b>	Amount of contribution (\$) <b>\$ 100.00</b>
Contributor address; City; State; Zip Code <b>4518 Sierra Sunset Abilene TX 79606</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

<sup>5</sup>  
8/25/2018

5 Full name of contributor

**Charles T. Boecking**

out-of-state PAC ID# \_\_\_\_\_

7 Amount of contribution (\$)

**\$ 100.00**

6 Contributor address;

City; State; Zip Code

**59 Fairway Oaks Blvd. Abilene TX 79606**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

<sup>5</sup>  
8/31/2018

Full name of contributor

**J. Price and Nancy Brock**

out-of-state PAC ID# \_\_\_\_\_

Amount of contribution (\$)

**\$ 250.00**

Contributor address;

City; State; Zip Code

**5969 Wyndham Ct. Abilene TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

<sup>5</sup>  
8/31/2018

Full name of contributor

**Steven and Julianne Sitzes**

out-of-state PAC ID# \_\_\_\_\_

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**1742 Sandpiper St. Abilene TX 79602**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

<sup>5</sup>  
8/23/2018

Full name of contributor

**Rodney and Nancy Smith**

out-of-state PAC ID# \_\_\_\_\_

Amount of contribution (\$)

**\$ 100.00**

Contributor address;

City; State; Zip Code

**197 E. Beltway S. Abilene TX 79602**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **20**

2 FILER NAME

**John. J. Rentz**

3 Filer ID (Ethics Commission Filers)

4 Date

**5**  
**6/30/2018**

5 Full name of contributor

**Kellye Ellen Crawford**

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

7 Amount of contribution (\$)

**\$ 250.00**

6 Contributor address;

City: State; Zip Code

**1 Glen Abbey Ct. Abilene TX 79606**

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

**6/6/18**

Full name of contributor

**Richard Wolfe**

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

Amount of contribution (\$)

**\$100.00**

Contributor address;

City: State; Zip Code

**2418 Whispering Oaks Abilene, TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/6/18**

Full name of contributor

**Lovann Trull**

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

Amount of contribution (\$)

**\$60.00**

Contributor address;

City: State; Zip Code

**4910 James Ct. Abilene, TX 79606**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**6/6/18**

Full name of contributor

**Homer Hillis**

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

Amount of contribution (\$)

**\$200.00**

Contributor address;

City: State; Zip Code

**301 East South 11th St. Abilene, TX 79602**

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>John. J. Rentz</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/6/18</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kenan Pyantt</b>	7 Amount of contribution (\$) <b>\$ 100.00</b>
6 Contributor address; City; State; Zip Code <b>3566 La Solla Beach Abilene, Tx 79606</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>6/6/18</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bruce and Nancy Hildebrand</b>	Amount of contribution (\$) <b>\$250.00</b>
Contributor address; City; State; Zip Code <b>19 Mesa Ridge Abilene, Tx 79606</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>6/6/18</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bobbie Wolfe</b>	Amount of contribution (\$) <b>\$500.00</b>
Contributor address; City; State; Zip Code <b>24 Avenida De Silva Abilene, Tx 79602</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>6/6/18</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Daniel and Kathleen Nasser</b>	Amount of contribution (\$) <b>\$100.00</b>
Contributor address; City; State; Zip Code <b>233 Country Place South Abilene, Tx 79606</b>		
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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20</b>
2 FILER NAME <b>John. J. Rentz</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/6/18</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marty Anderson</b>	7 Amount of contribution (\$) <b>\$100.00</b>
6 Contributor address; City; State; Zip Code <b>119 Lytle Place Dr. Abilene, Tx 79602</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
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.

**LOANS**

**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <span style="font-size: 2em;">1</span>
2 FILER NAME <span style="font-size: 1.5em;">John S. Rentz</span>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ <span style="font-size: 1.5em;">0</span>
5 Date of loan <span style="font-size: 1.2em;">4/27/2018</span>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <span style="font-size: 1.2em;">JACK RENTZ</span>	9 Loan Amount (\$) <span style="font-size: 1.2em;">7,000.00</span>
6 Is lender a financial institution?  Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code  <span style="font-size: 1.2em;">18 Pinchurst Abilene, TX 79606</span>	10 Interest rate <span style="font-size: 1.2em;">0%</span>
		11 Maturity date <span style="font-size: 1.2em;">N/A</span>
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution?  Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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



# 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: <b>3</b>	2 FILER NAME <b>John J Rantz</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>4/26/2018</b>	5 Payee name <b>3rd Street Printing + Sign Co.</b>	
6 Amount (\$) <b>5,907.04</b>	7 Payee address; City; State; Zip Code <b>1230 N. 3rd St. Abilene, TX 79601</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Solicitation/Fundraising Expense</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 <b>Postcards</b>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>5/8/2018</b>	Payee name <b>Unique Signs</b>	
Amount (\$) <b>1,350.12</b>	Payee address; City; State; Zip Code <b>32 Buttercup Dr. Abilene, TX 79606</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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 <b>Yard Signs</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>5/17/2018</b>	Payee name <b>Pink Goose Media</b>	
Amount (\$) <b>1,623.75</b>	Payee address; City; State; Zip Code <b>2602 Barrow St. Abilene, TX 79605</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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 <b>Video Production Services</b>
	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	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: <b>3</b>	2 FILER NAME <b>John J Rantz</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>5/17/2018</b>	5 Payee name <b>Sally's Printing and Mail Service</b>	
6 Amount (\$) <b>1,188.85</b>	7 Payee address; City; State; Zip Code <b>1942 B Industrial Blvd. Abilene, TX 79602</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Solicitation/Fundraising Expense</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 <b>Mailers</b>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>5/30/2018</b>	Payee name <b>ADV Consulting</b>	
Amount (\$) <b>4,955.00</b>	Payee address; City; State; Zip Code <b>PO Box 5975 Abilene, TX 79608</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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 <b>Television Ads</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>6/1/2018</b>	Payee name <b>Facebook, Inc.</b>	
Amount (\$) <b>877.18</b>	Payee address; City; State; Zip Code <b>1601 Willow Road Menlo Park, CA 94025</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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 <b>Facebook Ads</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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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.

<b>1</b> Total pages Schedule F1: <i>3</i>	<b>2</b> FILER NAME <i>John J Rantz</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>6/5/2018</i>	<b>5</b> Payee name <i>Sally's Printing and Mail Service</i>	
<b>6</b> Amount (\$) <i>1,114.98</i>	<b>7</b> Payee address; City; State; Zip Code <i>1942 B Industrial Blvd. Abilene, TX 79602</i>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	<b>(b)</b> Description <i>Doorhangers</i> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>6/5/2018</i>	Payee name <i>Pink Goose Media</i>	
Amount (\$) <i>1,299.00</i>	Payee address; City; State; Zip Code <i>2602 Barrow St. Abilene, TX 79605</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Video Production Services</i> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>6/5/2018</i>	Payee name <i>Sign Pro</i>	
Amount (\$) <i>479.01</i>	Payee address; City; State; Zip Code <i>2541 S. Treadaway Abilene, TX 79602</i>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Bumper Stickers</i> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED