## JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT**

## FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to complete thi	is form.  1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	MI پ	OFFICE USE ONLY		
NAME	NICKNAME LAST LOPEZ	SUFFIX	Date Received		
	Lofez	<u>,                                     </u>			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS /PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	Date Hend-deijvered or Postmarked		
change of address			Receipt # To Amount 3		
5 CANDIDATE/ OFFICEHOLDER PHONE	• • •		Date Session C		
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST	J MI	Date Imaged		
NAME	NICKNAME LAST  MCCA	SUFFIX			
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); AF	PT/SUITE#; CITY; STATE;	ZIP CODE		
	/				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day before	re election Runoff	15th day after campaign treasurer appointment		
	July 15 8th day before	e election Exceeded \$500 limit	(officeholder only)  Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year T	HROUGH 05/ M	ay Year 9/14		
11 ELECTION	Month Day Year S / 27 / 2014	/	General Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (#ki	nown)		
GO TO PAGE 2					

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME	LENNYL	ONEZ FOR J.P. #3	5 ACCOUNT # (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 OF FICEHOLDER. 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(S)	COMMITTEE TYPE	COMMITTEE NAME	ELECTION NA HIRZ		
	GENERAL SPECIFIC	COMMITTEE ADDRESS	40 54 1 6 1 A 6 1		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	M H: 5		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	97		
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6		
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	ZED \$ <b>%</b>		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 1,555-		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DEPORTING PERIOD	DAY \$ Ø		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 AY OF THE REPORTING PERIOD	THE \$ Ø		
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.					
RAETTA M. BROCK S Rotary Public State of Texas Comm. Exp. 04-15-2015 Serverererererererererererererererererer					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said Leonard Lopez(Lenny), this the 19th day of MAY, 200014, to certify which, witness my hand and seal of office.					
Signature of officer adm	nistering oath	Print name of officer administering oath	Notary Title of officer administering oath		

## **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

P.O. Box 12070

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES F Gift/Awards/Memorials Expense Salaries/Wages/Cor Legal Services Solicitation/Fundrais Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distri Printing Expense Office Overhead/Re The Instruction Guide explains how to c	tract Labor Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Partical Committee ontal Expense OTHER (enter a category not listed above)		
1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)		
1	Lenny Lopez			
4 Date 02   28   14	5 Payee name TRUE PRINT			
Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 6808 Bowman ARLINGTON TX	Springs RD # B 76017		
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	Printing Flyers			
Date .	Payee name			
04/1/14	TRUE PRINT			
Amount (\$)	Payee address; City; State; Zip Code			
	Payee address; City; State; Zip Code  6808 Bowman Springs Ro # B  ARLING fon TX 76017			
Reimbursement from political contributions intended				
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF EXPENDITURE	Printing Sighs			
Date	Payee name			
05/01/14	True PRINT			
Amount (\$)	Payee address; City; State; Zip Code			
Peimbursement from political contributions	Payee address; City; State; Zip Code  6808 Bowman Springs RD # B  AFLINE fon TV 76017			
intended	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF		Description (intraterousade or texas, complete scriedule 1)		
EXPENDITURE	Print Flyors / Push			
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
Reimbursement from political contributions intended				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				