

# 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:
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR: <u>Mr.</u> FIRST: <u>Jeff</u> MI: NICKNAME: _____      LAST: <u>Casper</u> SUFFIX: <u>#</u>	<b>OFFICE USE ONLY</b> <hr/> Date Received <h2 style="margin: 0;">RECEIVED</h2> OCT 04 2021 CITY OF MESQUITE CITY SECRETARY <hr/> Date Hand-delivered or Date Postmarked <hr/> Receipt #      Amount \$ <hr/> Date Processed <hr/> Date Imaged	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX;      APT / SUITE #;      CITY;      STATE;      ZIP CODE <u>905 Via Avenida      Mesquite TX 75150</u>		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE      PHONE NUMBER      EXTENSION <u>(214) 577-2018</u>		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR: <u>Mrs</u> FIRST: <u>Sara</u> MI: NICKNAME: _____      LAST: <u>Cowley</u> SUFFIX: _____		
<b>7 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);      APT / SUITE #;      CITY;      STATE;      ZIP CODE <u>4321 Pear Trail      Mesquite TX 75150</u>		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE      PHONE NUMBER      EXTENSION <u>(714) 478-3526</u>		
<b>9 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input 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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10 PERIOD COVERED</b>	Month      Day      Year      THROUGH      Month      Day      Year <u>7 / 1 / 21</u> THROUGH <u>9 / 23 / 21</u>		
<b>11 ELECTION</b>	ELECTION DATE Month      Day      Year <u>11 / 2 / 21</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b> <u>City Council</u>	
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	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.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

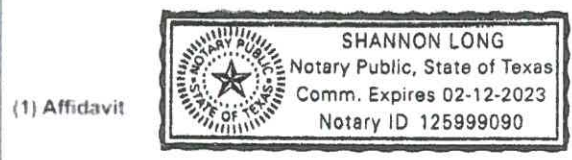
FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME <b>Jeff Casper</b>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1744.55
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2975.12
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 2131.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2684.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

*Jeff Casper*  
Signature of Candidate or Officeholder

Please complete either option below:



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Jeffrey Casper this the 3rd day of October 2021, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath      Shannon Long Printed name of officer administering oath      Notary Title of officer administering oath

(2) Unsworn Declaration

My name is \_\_\_\_\_ and my date of birth is \_\_\_\_\_

My address is \_\_\_\_\_ (street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (month) \_\_\_\_\_ (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <i>Jeff Casper</i>	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2975.12
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2131.64
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Jeff Casper</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/13</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jeff Casper</b>	7 Amount of contribution (\$) <b>\$500</b>
6 Contributor address; City; State; Zip Code <b>905 Via Avenida Mesquite TX 75150</b>		
8 Principal occupation / Job title (See Instructions) <b>Educator</b>		9 Employer (See Instructions) <b>Dallas ISD</b>
Date <b>8/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Hailey Sartoris</b>	Amount of contribution (\$) <b>\$100</b>
Contributor address; City; State; Zip Code <b>14612 Marsha Drive Balch Springs TX 75180</b>		
Principal occupation / Job title (See Instructions) <b>Student</b>		Employer (See Instructions) <b>Student</b>
Date <b>8/14</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Elizabeth Walley</b>	Amount of contribution (\$) <b>\$500</b>
Contributor address; City; State; Zip Code <b>1112 Sicbold Ct Mesquite TX 75150</b>		
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>Retired</b>
Date <b>8/15</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Atrice Adeniyi</b>	Amount of contribution (\$) <b>\$103.48</b>
Contributor address; City; State; Zip Code <b>2840 Shelduck Drive Mesquite TX 75181</b>		
Principal occupation / Job title (See Instructions) <b>Assistant Principal</b>		Employer (See Instructions) <b>Mesquite ISD</b>

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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Jeff Casper</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/15</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Teresa Jefferson</b> <hr/> 6 Contributor address; City; State; Zip Code <b>2312 Roanoke Circle Mesquite TX 75150</b>	7 Amount of contribution (\$)  <b>\$100</b>
8 Principal occupation / Job title (See Instructions) <b>Retired</b>		9 Employer (See Instructions) <b>Retired</b>
Date <b>8/15</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sean Hill</b> <hr/> Contributor address; City; State; Zip Code <b>13730 Ranch Road Austin TX 78717 620N #1230</b>	Amount of contribution (\$)  <b>\$103.48</b>
Principal occupation / Job title (See Instructions) <b>Recreation Program Supervisor</b>		Employer (See Instructions) <b>City of Austin</b>
Date <b>8/18</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cynthia Steiner</b> <hr/> Contributor address; City; State; Zip Code <b>6685 Avalon Avenue Dallas TX 75214</b>	Amount of contribution (\$)  <b>\$96.02</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>Retired</b>
Date <b>8/21</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James Terry</b> <hr/> Contributor address; City; State; Zip Code <b>2320 Heatherdale Dr Mesquite TX 75150</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions) <b>Retired</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Jeff Casper</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/23</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Cary &amp; Patricia Tanamachi</b>	7 Amount of contribution (\$) <b>\$ 96.62</b>
6 Contributor address; City; State; Zip Code <b>4821 Saint James CT Mesquite TX 75150</b>		
8 Principal occupation / Job title (See Instructions) <b>Retired</b>		9 Employer (See Instructions) <b>Retired</b>
Date <b>9/5</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lisa Bagley</b>	Amount of contribution (\$) <b>\$ 100</b>
Contributor address; City; State; Zip Code <b>9743 Dartridge Drive Dallas TX 75238</b>		
Principal occupation / Job title (See Instructions) <b>STEM Program Manager for K-12 Initiatives</b>		Employer (See Instructions) <b>AWS</b>
Date <b>9/6</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ricky James</b>	Amount of contribution (\$) <b>\$ 100</b>
Contributor address; City; State; Zip Code <b>2151 Village Walk Drive Henderson NV 89012 APT 24204</b>		
Principal occupation / Job title (See Instructions) <b>Project Manager</b>		Employer (See Instructions) <b>P3</b>
Date <b>9/6</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Heather McKinney</b>	Amount of contribution (\$) <b>\$100</b>
Contributor address; City; State; Zip Code <b>2921 Rambling Dr. Dallas TX 75228</b>		
Principal occupation / Job title (See Instructions) <b>Entertainer</b>		Employer (See Instructions) <b>Sinisterhood LLC</b>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Jeff Casper</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/16</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cindy &amp; Allan Smethic</i> <hr/> 6 Contributor address; City; State; Zip Code <i>2445 Larchmont Dr Mesquite TX 75150</i>	7 Amount of contribution (\$)  <i>\$100</i>
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		9 Employer (See Instructions) <i>Retired</i>
Date <i>9/16</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hon. Carol Donovan</i> <hr/> Contributor address; City; State; Zip Code <i>6501 Malcolm Dr Dallas TX 75214</i>	Amount of contribution (\$)  <i>\$500</i>
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Carol Crabtree Donovan PC</i>
Date <i>9/17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kenneth Martin</i> <hr/> Contributor address; City; State; Zip Code <i>1037 Woodlawn Ave Dallas TX 75208</i>	Amount of contribution (\$)  <i>\$96.62</i>
Principal occupation / Job title (See Instructions) <i>Teacher</i>		Employer (See Instructions) <i>Mesquite ISD</i>
Date <i>9/19</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alex Harris</i> <hr/> Contributor address; City; State; Zip Code <i>1130 Via del Rey Mesquite TX 75150</i>	Amount of contribution (\$)  <i>\$495.06</i>
Principal occupation / Job title (See Instructions) <i>Account Manager</i>		Employer (See Instructions) <i>Southwest Airlines</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>Jeff Casper</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/11</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Susic Hess</b> <hr/> 6 Contributor address; City; State; Zip Code <b>2905 Clearwater Dr Mesquite TX 75181</b>	7 Amount of contribution (\$)  <b>\$96.62</b>
8 Principal occupation / Job title (See Instructions) <b>Insurance</b>		9 Employer (See Instructions) <b>Marsh USA Inc</b>
Date <b>9/11</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michelle Lopez</b> <hr/> Contributor address; City; State; Zip Code <b>10657 Oak Gate Ln Dallas TX 75217</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Customer Service</b>		Employer (See Instructions) <b>Chic-Fil-A</b>
Date <b>9/13</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ulisses Mata</b> <hr/> Contributor address; City; State; Zip Code <b>1210 Athens Dr Mesquite TX 75149</b>	Amount of contribution (\$)  <b>\$96.62</b>
Principal occupation / Job title (See Instructions) <b>Tax office Representative</b>		Employer (See Instructions) <b>Dallas County Tax office</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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:	<b>2</b> FILER NAME Jeff Casper	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 8/16	<b>5</b> Payee name T.D.P.
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<b>6</b> Amount (\$) \$180	<b>7</b> Payee address; PO Box 15707	City; Austin	State; TX	Zip Code 78714
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Software
	<b>(c)</b> <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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8/30	Payee name Print Place
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Amount (\$) \$160.43	Payee address; 1130 Avenue HE	City; Arlington	State; TX	Zip Code 76011
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/8	Payee name Long Game Communications
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Amount (\$) \$152.98	Payee address; 1009 Ashland Dr	City; Mesquite	State; TX	Zip Code 75149
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Fee	Description Voter Contact
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>Jeff Casper</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/8</b>	5 Payee name <b>Cafe Del Rio</b>
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6 Amount (\$) <b>\$100.01</b>	7 Payee address; <b>1530 N Peachtree Rd</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75149</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food Expense</b>	(b) Description <b>Food for Volunteers</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>9/8</b>	Payee name <b>Long Game Communications</b>
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Amount (\$) <b>\$240</b>	Payee address; <b>1609 Ashland Drive</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75149</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Fee</b>	Description <b>Voter Contact</b>
	<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
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Date <b>9/10</b>	Payee name <b>Walmart</b>
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Amount (\$) <b>\$105.80</b>	Payee address; <b>915 N Town East Blvd</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75150</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food Expense</b>	Description <b>Food for Volunteers</b>
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>Jeff Casper</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/13</b>	5 Payee name <b>A &amp; E Party Solutions</b>
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6 Amount (\$) <b>\$126.28</b>	7 Payee address; <b>aepartysolution.com</b>	City; <b>Dallas</b>	State; <b>TX</b>	Zip Code
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <b>Tables &amp; Chairs</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>9/13</b>	Payee name <b>QT Store #980</b>
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Amount (\$) <b>\$10.78</b>	Payee address; <b>4451 N Galloway Ave</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75150</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food Expense</b>	Description <b>Food for Volunteers</b>
	<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
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Date <b>9/15</b>	Payee name <b>Long Game Communications</b>
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Amount (\$) <b>\$280</b>	Payee address; <b>1009 Ashland Drive</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75149</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Fee</b>	Description <b>Voter Contact</b>
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>Jeff Casper</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/20</b>	5 Payee name <b>Panera Bread</b>
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6 Amount (\$) <b>\$24.76</b>	7 Payee address; <b>18641 LBJ Freeway</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75150</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Food Expense</b>	(b) Description <b>Food for Volunteers</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>9/20</b>	Payee name <b>Long Game Communications</b>
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Amount (\$) <b>\$580</b>	Payee address; <b>1009 Ashland</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75149</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Consulting Fee</b>	Description <b>Voter Contact</b>
	<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
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Date <b>9/21</b>	Payee name <b>Long Game Communications</b>
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Amount (\$) <b>\$170</b>	Payee address; <b>1009 Ashland Drive</b>	City; <b>Mesquite</b>	State; <b>TX</b>	Zip Code <b>75150</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Food Expense</b>	Description <b>Food for Volunteers</b>
	<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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED