

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:

10

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	NICKNAME	LAST	SUFFIX				
		Jeremy		Received by Ellie Garcia 7/15/21 at 1:45PM			
		Raines					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
		2313 Ashland Ave	Fort Worth, TX		76107		
<input type="checkbox"/> Change of Address							
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		Date Received		
		()			Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$		
	NICKNAME	LAST	SUFFIX	Date Processed			
				Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
(Residence or Business)							
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
		()					
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
		<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
		04	23	2021	THROUGH	07 / 15 / 2021	
11 ELECTION	ELECTION DATE		ELECTION TYPE				
		Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	
		05	01	2021	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
				<input type="checkbox"/> Other Description			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
		None, Tarrant			Tarrant Regional Water District Board of Directors		
14 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.						
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS					
	<input type="checkbox"/> SPECIFIC	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 Raines, Jeremy **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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 38,787.89
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$69,616.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$2,245.20
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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Jeremy Raines, and my date of birth is 07/19/1982.

My address is 2313 Ashland Ave, Fort Worth, TX, 76107, USA.
(street) (city) (state) (zip code) (country)

Executed in Tarrant County, State of Texas, on the 15th day of July, 2021.
(month) (year)

[Signature]
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Raines, Jeremy		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 36,300.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,487.89
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 69,616.07
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 47.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/10
2 FILER NAME Raines, Jeremy		3 Filer ID
4 Date 04/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balloun, Mike 6 Contributor address; City; State; Zip Code 12852 CR 1117 Cleburne, TX 76033	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Development and Construction		9 Employer (See Instructions) Self
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassidy , Douglas Contributor address; City; State; Zip Code 1320 S. University Drive Fort Worth , TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Senior VP		Employer (See Instructions) Southside Bank
Date 04/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charboneau, Brian Contributor address; City; State; Zip Code 2312 Ashland Avenue Fort Worth, TX 76107	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cranford, Denis Contributor address; City; State; Zip Code 1541 Hudnall Farm Rd Keller, TX 76248	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Grapevine Consignment
Date 04/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Avignon, Owen Contributor address; City; State; Zip Code 2409 Winton Terr West Fort Worth, TX 76109	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10
2 FILER NAME Raines, Jeremy		3 Filer ID
4 Date 04/24/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, Kay & JD	7 Amount of Contribution (\$) \$25,000.00
	6 Contributor address; City; State; Zip Code 3100 West 7th Street Suite 811 Fort Worth, TX 76107	
8 Principal occupation / Job title (See Instructions) Congresswoman		9 Employer (See Instructions)
Date 04/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JH, Beach	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raines, Jeremy and Logan Konty	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code 2313 Ashland Avenue Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RMP Industrial Supply
Date 04/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raines, Jeremy and Logan Konty	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code 2313 Ashland Avenue Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RMP Industrial Supply
Date 04/26/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roehm, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/10	
2 FILER NAME Raines, Jeremy		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/13/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angle JD, Burns Joel	8 Amount of contribution (\$) \$1,487.89	9 In-kind contribution description Brian Gaugon Photography AMM Voter Contact
	7 Contributor address; City; State; Zip Code 2420 S. Adams Fort Worth, TX 76110	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Consultant		11 Employer (FOR NON-JUDICIAL) (See instructions) AMM Political	
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 07/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarty, Taylor	Amount of contribution (\$) \$1,000.00	In-kind contribution description Finance Report Management
	Contributor address; City; State; Zip Code 1279 S US Hwy 87 Fredericksburg, TX 78624	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Admin		Employer (FOR NON-JUDICIAL) (See instructions) McLane Ford of Fredericksburg	
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)			

POLITICAL EXPENDITURES 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: Sch: 1/2 Rpt: 7/10	2	FILER NAME Raines, Jeremy	3	Filer ID
4	Date 04/29/2021	5	Payee name Digital Turf		
6	Amount (\$) \$29,000.00	7	Payee address; City; State; Zip Code 7 Clearbrook Crossing Kennebunk, ME 04043		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Digital Media/Advertisement		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 04/28/2021		Payee name Malbert Media		
	Amount (\$) \$40,584.57		Payee address; City; State; Zip Code 626 Lincoln Pl Apt 4C Brooklyn , NY 11216		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Persuasion and GOTV Mail Program		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/13/2021		Payee name Paypal		
	Amount (\$) \$30.50		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Online Contribution Fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES 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: Sch: 2/2 Rpt: 8/10	2 FILER NAME Raines, Jeremy	3 Filer ID
4 Date 06/25/2021	5 Payee name Southside Bank	
6 Amount (\$) \$1.00	7 Payee address; City; State; Zip Code 1000 Pennsylvania Ave Fort Worth, TX 76104	
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 Service Charge Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 9/10
2 FILER NAME Raines, Jeremy		3 Filer ID
4 Date 05/06/2021	5 Name of person from whom amount is received United States Postal Service	8 Amount (\$) \$47.00
6 Address of person from whom amount is received; City; State; Zip Code 251 W. Lancaster Avenue Fort Worth, TX 76102		
7 Purpose for which amount is received Refund on PO BOx		<input type="checkbox"/> Check if political contribution returned to filer

The Instruction Guide explains how to complete this form.

**** Complete only if "Report Type" on page 1 is marked "Final Report" ****

1 C/OH NAME

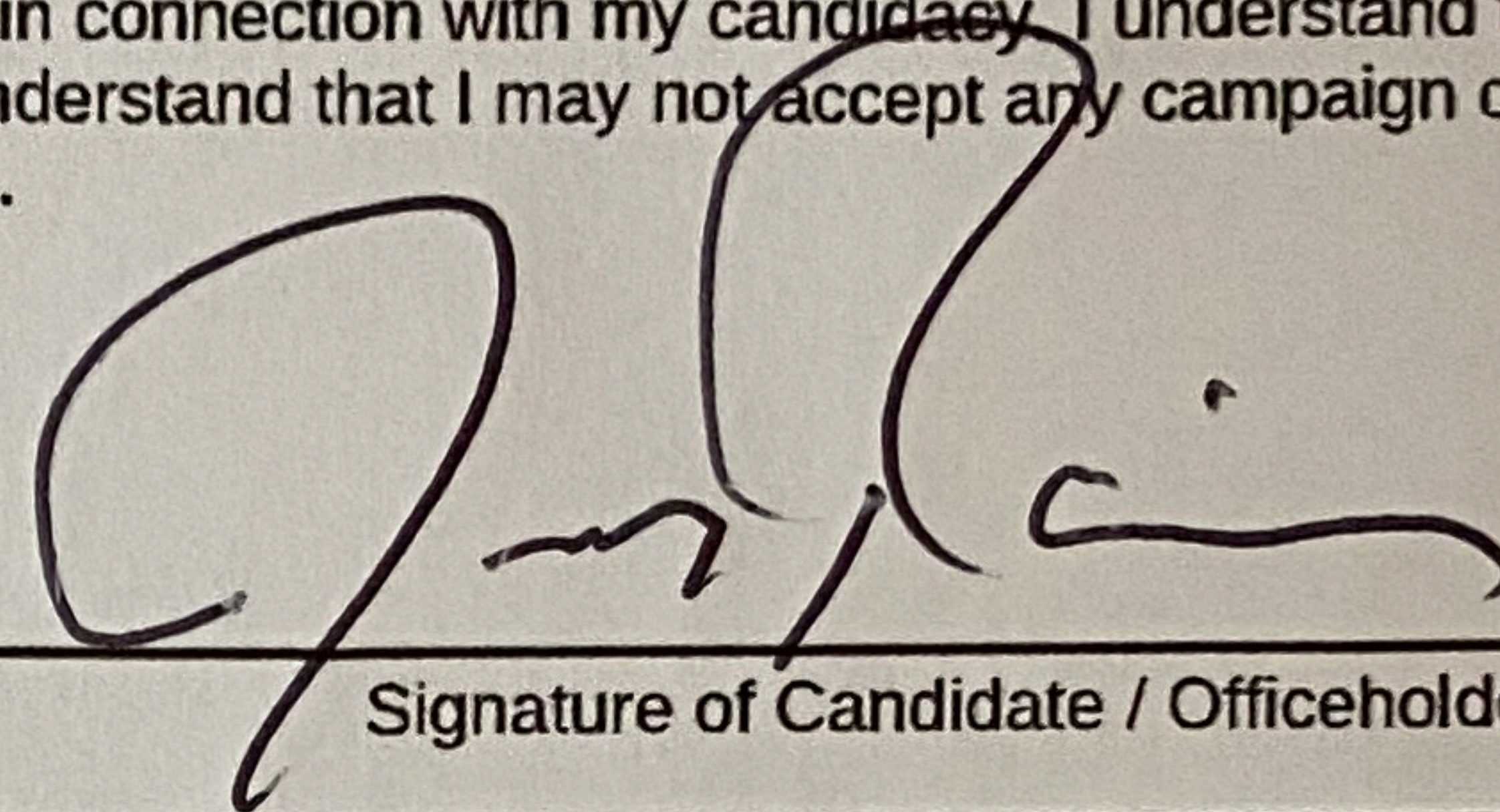
Raines, Jeremy

2 Filer ID

trmmccarty@gmail.com

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

**** Complete A & B below only if you are not an officeholder ****

A CAMPAIGN FUNDS

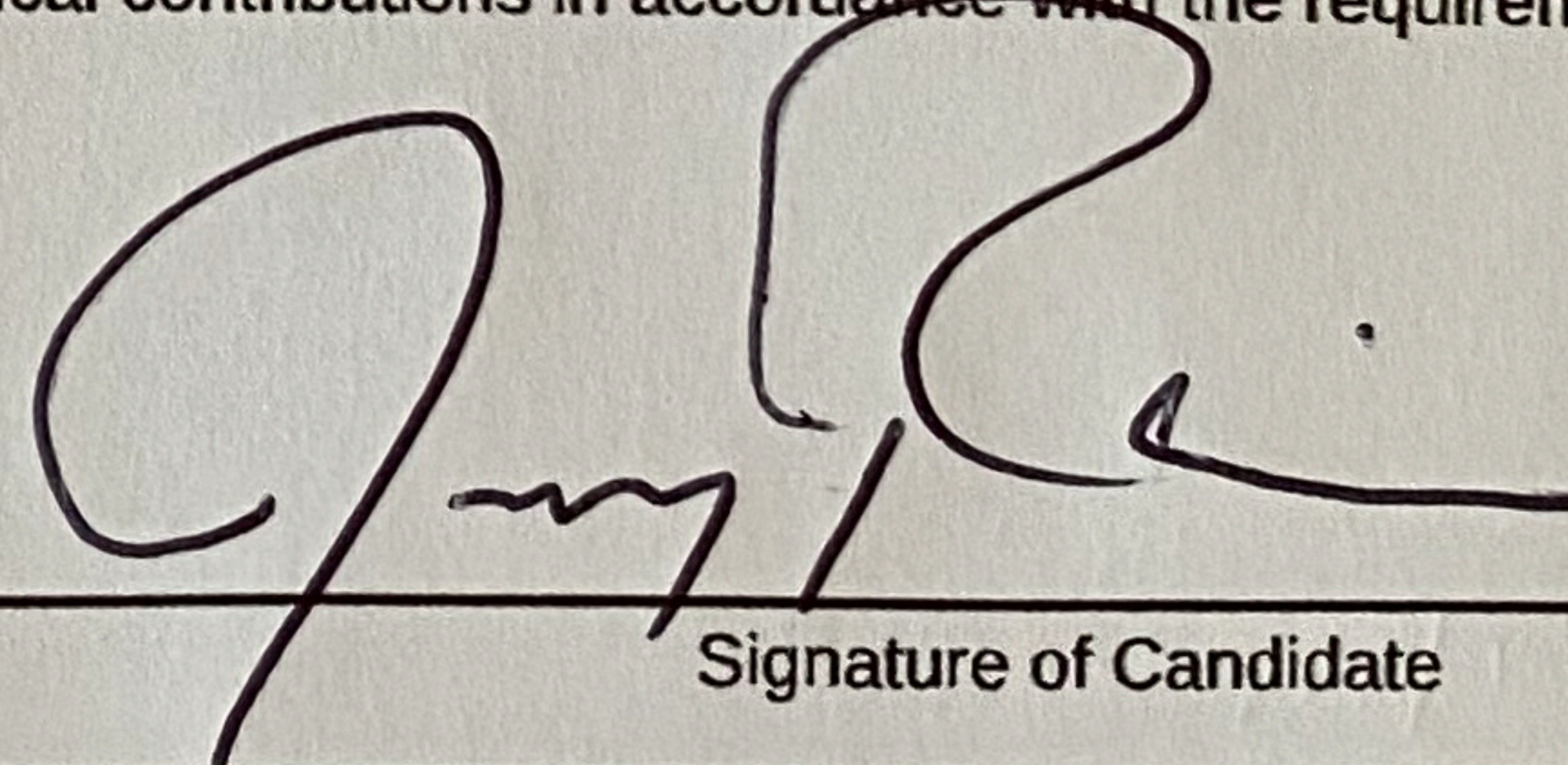
Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.

B ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, 254.204.



Signature of Candidate

5 OFFICEHOLDER

**** Complete this section only if you are an officeholder ****

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder