

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

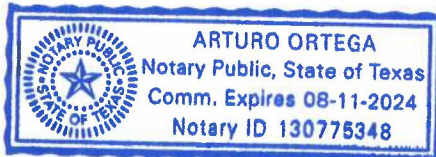
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 22,016.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 54,841.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ (24,840.09)
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,000.00

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.

Jill E. Jester
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by JILL E. JESTER this the 26 day of April, 2024, to certify which, witness my hand and seal of office.

Arturo Ortega ARTURO ORTEGA Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(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

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 22,016.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 35,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 54,841.61
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

LOANS

SCHEDULE E

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 E:

35,000.00

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

4/26/24

7 Name of lender

Jill Jester

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

9 Loan Amount (\$)

10,000.00

6 Is lender a financial institution?
 Y N

8 Lender address;

City;

State;

Zip Code

10 Interest rate

0.00

P.O. Box 280

Denton

TX

76202

11 Maturity date

12 Principal occupation / Job title (See Instructions)

Attorney

13 Employer (See Instructions)

Minor & Jester P.C.

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address;

City;

State;

Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

3/2/24

Name of lender

Jill Jester

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

Loan Amount (\$)

25,000.00

Is lender a financial institution?
 Y N

Lender address;

City;

State;

Zip Code

Interest rate

0.00

P.O. Box 280

Denton

TX

76202

Maturity date

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Minor & Jester P.C.

Description of Collateral

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

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.

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: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 3/26/24	5 Full name of contributor out-of-state PAC (ID#: _____) Lawrence & Linda Miller	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 708 Audra Ln Denton TX 76209		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/24	Full name of contributor out-of-state PAC (ID#: _____) Margaret Seward	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2024 Hollyhill Ln Denton TX 76205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/30/24	Full name of contributor out-of-state PAC (ID#: _____) Erik Clark	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 3913 Andrew Ave Denton TX 76210		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/30/24	Full name of contributor out-of-state PAC (ID#: _____) Tracey Long	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 420 Oaklawn Denton TX 76209		
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 3/30/24	5 Full name of contributor out-of-state PAC (ID# _____) Veronica Beasley	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 3808 Montecito Dr. Denton TX 76205	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/31/24	Full name of contributor out-of-state PAC (ID# _____) Brian Panhof	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 3301 Evening Wind Rd Denton TX 76208	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/24	Full name of contributor out-of-state PAC (ID# _____) Dalton E. Allen	Amount of contribution (\$) 1000.00
	Contributor address; City; State; Zip Code P.O. Box 52100 Denton TX 76206	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/1/24	Full name of contributor out-of-state PAC (ID# _____) Melissa Lenaburg	Amount of contribution (\$) 150.00
	Contributor address; City; State; Zip Code 122 Industrial St Denton TX 76201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/24	5 Full name of contributor out-of-state PAC (ID#: _____) Richard Smith	7 Amount of contribution (\$) 150.00
	6 Contributor address; City; State; Zip Code 721 W. Hobson Denton TX 76205	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/2/24	Full name of contributor out-of-state PAC (ID#: _____) Sheila Brouk	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 1746 Harborside Cir Wellington FL 33414	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/24	Full name of contributor out-of-state PAC (ID#: _____) Peter + Sheila McCleskey	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 301 Lampighter Dr. Denton TX 76210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/24	Full name of contributor out-of-state PAC (ID#: _____) Judy F. Willis	Amount of contribution (\$) 75.00
	Contributor address; City; State; Zip Code 3116 Broken Bow St. Denton TX 76209	
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

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: 18
2 FILER NAME J:11 Jester		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/24	5 Full name of contributor out-of-state PAC (ID# _____) Linda Glass	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 801 Turtle Creek Ave Denton TX 76211	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/20/24	Full name of contributor out-of-state PAC (ID# _____) Barbara P. Russell	Amount of contribution (\$) 50.00
	Contributor address; City; State; Zip Code 1324 Heather Ln Denton TX 76209	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/24	Full name of contributor out-of-state PAC (ID# _____) L.D. Shipman	Amount of contribution (\$) 400.00
	Contributor address; City; State; Zip Code 3004 Destin Dr. Denton TX 76205	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/2/24	Full name of contributor out-of-state PAC (ID# _____) Shercy Shipman	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 3004 Destin Dr. Denton TX 76205	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 18
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2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
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4 Date 4/12/24	5 Full name of contributor Byron + Reanae Berry out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 400.00
6 Contributor address; City; State; Zip Code P.O. Box 5 Rosston TX 76263		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 4/12/24	Full name of contributor Carl Anderson out-of-state PAC (ID#: _____)	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 114 Mustang Trl. Shadyshores TX 76208		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 4/12/24	Full name of contributor Glen T. Carlton out-of-state PAC (ID#: _____)	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 13217 Cashes Mill Rd Sanger TX 76266		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 2/22/24	Full name of contributor Jack L. Witt out-of-state PAC (ID#: _____)	Amount of contribution (\$) 900.00
Contributor address; City; State; Zip Code 8912 Crestview Dr Denton TX 76207		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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:

12

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/12/24

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

Richard D. Hayes

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

1225 Sycamore Bend Rd Hickory Creek TX 75065

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/12/24

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

Kimberly + Weston Thaggard

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

3311 Montecito Dr Denton TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/24

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

Royce + Janie Hull

Amount of contribution (\$)

900.00

Contributor address; City; State; Zip Code

1525 PR 5901 Pender TX 76259

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29/24

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

Stacey + James McClain

Amount of contribution (\$)

900.00

Contributor address; City; State; Zip Code

3770 Sky View Ln Krum TX 76249

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

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: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 4/3/24	5 Full name of contributor Robert Sherman out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 3411 Shadow Brook Ct Denton TX 76210		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/4/24	Full name of contributor Dianne Landry out-of-state PAC (ID#: _____)	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 1817 Redwood Pl Denton TX 76209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/4/24	Full name of contributor Dennis Beattie out-of-state PAC (ID#: _____)	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1319 Greenbriar St. Denton TX 76201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/4/24	Full name of contributor Stephanie Lamb out-of-state PAC (ID#: _____)	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 2209 Harvest Hill Dr. Denton TX 76208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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:
18

2 FILER NAME **J. H. Jester** 3 Filer ID (Ethics Commission Filers)

4 Date 4/14/24	5 Full name of contributor out-of-state PAC (ID#: _____) Elisha Bomar	7 Amount of contribution (\$) 500.00
	6 Contributor address; City; State; Zip Code 1402 Rolling Acres Argyle TX 76226	

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

Date	Full name of contributor out-of-state PAC (ID#: _____) Don White, Jr.	Amount of contribution (\$) 400.00
	Contributor address; City; State; Zip Code 2020 Pembroke Pl Denton TX 76205	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4/15/24	Full name of contributor out-of-state PAC (ID#: _____) Lee Shanklin	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 4000 Thistle Hill Denton TX 76210	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 4/16/24	Full name of contributor out-of-state PAC (ID#: _____) Bernadette Coleman	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 506 Ridgecrest Cir Denton TX 76205	

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

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: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/24	5 Full name of contributor out-of-state PAC (ID#: _____) Jim Horn	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code 1194 Fm 455E. Sanger TX 76266	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/9/24	Full name of contributor out-of-state PAC (ID#: _____) Chris Weatherly	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 1608 Fairway Dr. Corinth TX 76210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/8/24	Full name of contributor out-of-state PAC (ID#: _____) Jay + Carole Ross	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 651 Regency Court Denton TX 76210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/25/24	Full name of contributor out-of-state PAC (ID#: _____) Kent + Cheryl Key	Amount of contribution (\$) 1,000.00
	Contributor address; City; State; Zip Code 2421 Ft. Worth Dr. Denton TX 76205	
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

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: 18
2 FILER NAME Jill Jester		3 Filer ID (Ethics Commission Filers)
4 Date 4/12/24	5 Full name of contributor out-of-state PAC (ID# _____) Marty + Toni Rivers	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 1115 Southmont Dr. Denton TX 76205		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/10/24	Full name of contributor out-of-state PAC (ID# _____) Denton County Republican Lincoln Cabinet	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 4120 Austin Cir. Sanger TX 76266		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/12/24	Full name of contributor out-of-state PAC (ID# _____) Pat Smith	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1417 Cambridge Ln. Denton TX 76209		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/13/24	Full name of contributor out-of-state PAC (ID# _____) John + Sharon Rainey	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 2009 Destin Dr. Denton TX 76205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/14/24

5 Full name of contributor

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

Cindy + Larry Schleinat

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

2228 Hollyh:ll Ln

Denton

TX

76205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/12/24

Full name of contributor

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

Bruce Schneider

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

1116 Southmont Dr.

Denton

TX

76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/24

Full name of contributor

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

Jo. Seaph W. + Brenda C. Holland

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

304 E1 Paseost.

Denton

TX

76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/24

Full name of contributor

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

Gerald J. + Melody S. Kohout

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

2904 Destin Dr.

Denton

TX

76205

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

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/11/24

5 Full name of contributor

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

Patricia Q. Reinke

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State;

Zip Code

21 Timbergreen Circle Denton TX 76205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/12/24

Full name of contributor

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

Gayle Strange

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

1100 Southmont Drive Denton TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/17/24

Full name of contributor

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

Jason + Nicole Adamson

Amount of contribution (\$)

1,000.00

Contributor address;

City;

State;

Zip Code

312 Thistle Rdg Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/17/24

Full name of contributor

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

Tim Shoapman

Amount of contribution (\$)

1,000.00

Contributor address;

City;

State;

Zip Code

5008 Golden Cir Denton TX 76208

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

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/17/24

5 Full name of contributor

Bryan Denny

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

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

708 Chisholm Trail Denton TX 76209

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/24

Full name of contributor

Chad Wick

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

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

610 E University Dr. Denton TX 76209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/21/24

Full name of contributor

American Legion Auxiliary Unit 88

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

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

108 Gotcher Ave Lake Dallas TX 75065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/22/24

Full name of contributor

Lucas Hall

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

Amount of contribution (\$)

75.00

Contributor address;

City;

State;

Zip Code

3621 Bentley Ct. Denton TX 76210

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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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

13

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/24

5 Full name of contributor

out-of-state PAC (ID# _____)

Ronald L. Johnson

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

6025 Sun Ray Dr. Denton TX 76208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/29/24

Full name of contributor

out-of-state PAC (ID# _____)

Michelle Jones

Amount of contribution (\$)

1,000.00

Contributor address;

City;

State;

Zip Code

117 Visalia Ln Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/6/24

Full name of contributor

out-of-state PAC (ID# _____)

Christopher Rasmussen

Amount of contribution (\$)

1.00

Contributor address;

City;

State;

Zip Code

3106 Stonegate Dr. Denton TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/21/24

Full name of contributor

out-of-state PAC (ID# _____)

Sabrina Ball

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

1135 Mistletoe Dr. Ft. Worth TX 76110

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

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:

13

2 FILER NAME

Jill Tester

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/24

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

Stephanie + Ron Reinke

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

3621 Bentley Ct Denton TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/23/24

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

David Arthur

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

3520 Belmont St Denton TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/24

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

Lou M. Carroll

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

7924 Hinkley Oak Ct Denton TX 76208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/24

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

Rob Seay

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2004 Winding Creek Blvd Flower mound, TX 75068

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

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:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/24/24

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

Dena Meek

7 Amount of contribution (\$)

300.00

6 Contributor address; City; State; Zip Code

560 Diamond Point Dr. Oak Point TX 75068

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/23/24

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

Josh White

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

3609 Paint Dr. Denton, TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/24

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

MaryBeth Reinke

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

2112 Pembroke Pl Denton TX 76205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/24

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

Michelle Coughlin

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

3321 Darby Ln Denton TX 76207

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

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:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/23/24

5 Full name of contributor

Dianne Baker

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

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State;

Zip Code

2233 Hollyhill Ln Denton TX 76205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/23/24

Full name of contributor

Leah Harbour

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

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

2306 Regine Dr. Corinth TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/24/24

Full name of contributor

Chris Jones

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

Amount of contribution (\$)

200.00

Contributor address;

City;

State;

Zip Code

2609 Brandi Ln Corinth TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/24/24

Full name of contributor

Arturo Ortega

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

Amount of contribution (\$)

150.00

Contributor address;

City;

State;

Zip Code

573 Concho St Aubrey TX 76227

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

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:

18

2 FILER NAME

Jill Jester

3 Filer ID (Ethics Commission Filers)

4 Date

4/23/24

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

Sawko + Burroughs, P.C.

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

1172 Bent Oaks Dr. Denton TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/11/24

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

Raymond David

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

8834 Highway 377 Pilot Point TX 76258

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/24/24

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

Ricky Grunden

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

515 South Carroll Blvd Denton TX 76201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor 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.

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: 7	2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
4 Date 3/16/24	5 Payee name Print Place	
6 Amount (\$) 50.61	7 Payee address; City; State; Zip Code 1130 Ave H E Arlington TX 76011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other - Business Cards	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/19/24	Payee name Deluxe Business Systems	
Amount (\$) 37.28	Payee address; City; State; Zip Code 3000 Kellway Dr. Carrollton TX 75006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - Office Supplies	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/21/24	Payee name Square Hardware	
Amount (\$) 69.28	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - Contactless Payments	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
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

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: 7	2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
4 Date 3/26/24	5 Payee name Cooper's Copies • Printing	
6 Amount (\$) 393.76	7 Payee address; City; State; Zip Code 1014 Dallas Dr. Denton TX 76205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/26/24	Payee name G11 Ad Group	
Amount (\$) 3,880.76	Payee address; City; State; Zip Code 3005 Lansing Blvd # 126 Wichita Falls TX 76309	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/2/24	Payee name Robson Ranch Republic Club	
Amount (\$) 160.00	Payee address; City; State; Zip Code 8008 American Way Denton TX 76207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
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

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: 7	2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
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4 Date 4/8/24	5 Payee name Robson Publishing
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6 Amount (\$) 679.70	7 Payee address; 9532 E. Riggs Road Sun Lakes, AZ 85248	City; Sun Lakes	State; AZ	Zip Code 85248
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/10/24	Payee name Printplace
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Amount (\$) 740.43	Payee address; 1130 Avenue H E	City; Arlington	State; TX	Zip Code 76011
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising - Door Hangers	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/11/24	Payee name Groggy Dog
------------------------	---------------------------------

Amount (\$) 935.69	Payee address; P.O. Box 1411	City; Denton	State; TX	Zip Code 76202
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - Tee Shirts	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

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: 7	2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
4 Date 4/11/24	5 Payee name Mike Stevens	
6 Amount (\$) 22,000.00	7 Payee address; City; State; Zip Code 6923 Indiana Ave Box 292 Lubbock TX 79413	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/14/24	Payee name Rudy's Country Store		
Amount (\$) 198.88	Payee address; City; State; Zip Code 5205 IH 35 Frontage Road E Denton TX 76205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/24	Payee name Square Inc.		
Amount (\$) 12.23	Payee address; City; State; Zip Code 1955 Broadway, Ste 600 Oakland CA 94612		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description	
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>		

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 | 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: 7	2 FILER NAME Jill Jester	3 Filer ID (Ethics Commission Filers)
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4 Date 4/25/24	5 Payee name Mike Stevens
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6 Amount (\$) 15,455.95	7 Payee address; City; State; Zip Code 6923 Indiana Ave, Box 292 Lubbock TX 79413
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/24	Payee name David Hernandez
------------------------	--------------------------------------

Amount (\$) 1280.00	Payee address; City; State; Zip Code 253 East Round Grove Rd Lewisville TX 75067
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/24	Payee name G11 Ad Group
------------------------	-----------------------------------

Amount (\$) 3,947.83	Payee address; City; State; Zip Code 3005 Lansing Blvd #126 Wichita Falls TX 76309
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

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: <p style="text-align:center;">7</p>	2 FILER NAME <p style="text-align:center;">Jill Jester</p>	3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align:center;">4/25/24</p>	5 Payee name <p style="text-align:center;">Paypal</p>	
6 Amount (\$) <p style="text-align:center;">284.04</p>	7 Payee address; City; State; Zip Code <p style="text-align:center;">2211 N First St. San Jose CA 95131</p>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <p style="text-align:center;">Fees</p>	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date	Payee name	
<p style="text-align:center;">4/15/24</p>	<p style="text-align:center;">Constant Contact</p>	
Amount (\$)	Payee address; City; State; Zip Code	
<p style="text-align:center;">12.79</p>	<p style="text-align:center;">1601 Trapelo Road, Ste 329 Waltham MA 02451</p>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <p style="text-align:center;">Advertising</p>	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a candidate or officeholder who has accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in any calendar year must file all subsequent reports electronically.

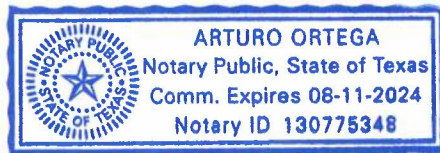
OFFICE USE ONLY	
Date Received	RECEIVED
	APR 26 2024
	City Manager's / City Secretary's Office
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

Filer name	Filer ID #
Jill Jester	

- I swear or affirm that I have not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- I am filing this affidavit with the COA report due on 4/26/2024. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit



Jill E. Jester
Signature of Filer

NOTARY STAMP/SEAL

Sworn to and subscribed before me by JILL E. JESTER this the 26 day of APRIL, 2024, to certify which, witness my hand and seal of office.

<i>[Signature]</i>	<u>ARTURO ORTEGA</u>	<u>NOTARY PUBLIC</u>
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

OR

(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 Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER