



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

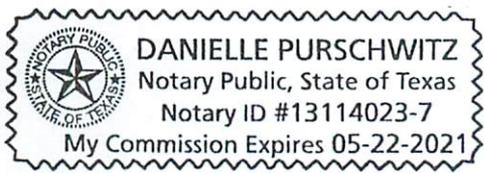
14 C/OH NAME Jay U. Kirkman III 15 Filer ID (Ethics Commission Filers)

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

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ /
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,220 <sup>00</sup> / <del>xy</del>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ /
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,637.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 148.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 165 <sup>00</sup> / <del>xy</del>

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

James U. Kirkman III  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James Kirkman III, this the 26 day of April, 20 19, to certify which, witness my hand and seal of office.

Danielle Purschwitz Signature of officer administering oath  
Danielle Purschwitz Printed name of officer administering oath  
Notary Public Title of officer administering oath

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Jay U. Kirkman III

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

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

7 Amount of contribution (\$)

Teamsters 577 D.RIVE FUND

6 Contributor address; City; State; Zip Code

P.O. Box 1609 Amarillo, TX 79105

\$2,500<sup>00</sup> ~~xx~~

8 Principal occupation / Job title (See Instructions)

Labor Union

9 Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

4/4/19

Raymond Martin / Victoria Thompson

Contributor address; City; State; Zip Code

3205 S. Travis Amarillo, TX 79109

\$100<sup>00</sup> ~~xx~~

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

4/04/19

John/Sally Skaggs

Contributor address; City; State; Zip Code

2601 Bowie Amarillo, TX 79109

\$500<sup>00</sup> ~~xx~~

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

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

Amount of contribution (\$)

04/04/19

Neil/Lisa Veggeberg

Contributor address; City; State; Zip Code

7219 Versailles Amarillo, TX 79121

\$50<sup>00</sup> ~~xx~~

Principal occupation / Job title (See Instructions)

Businessman

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Jay U. Kinkman III

3 Filer ID (Ethics Commission Filers)

4 Date

4/4/19

5 Full name of contributor

Art Spikes

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

7 Amount of contribution (\$)

\$100<sup>00</sup> ~~XX~~

6 Contributor address:

City: State: Zip Code

3800 Lynette Amarillo TX 79109

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

4/19/19

Full name of contributor

Mildred Danton

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

Amount of contribution (\$)

\$100<sup>00</sup> ~~XX~~

Contributor address:

City: State: Zip Code

2005 NW 14th Amarillo TX 79107

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

4/15/19

Full name of contributor

Jan Willis

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

Amount of contribution (\$)

\$30<sup>00</sup> ~~XX~~

Contributor address:

City: State: Zip Code

8101 Progress Amarillo, TX 79119

Principal occupation / Job title (See Instructions)

House wife

Employer (See Instructions)

Date

4/18/19

Full name of contributor

ANNE Northcutt

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

Amount of contribution (\$)

\$40<sup>00</sup> ~~XX~~

Contributor address:

City: State: Zip Code

7601 Sleepy Hollow Amarillo, TX 79121

Principal occupation / Job title (See Instructions)

Housewife

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

3 Total pages Schedule A1:  
3

2 FILER NAME

Jay U. Kirkman III

3 Filer ID (Ethics Commission Filers)

4 Date

4/24/19

5 Full name of contributor

Eric/Callie Pullen

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

7 Amount of contribution (\$)

\$500<sup>00</sup> ~~xx~~

6 Contributor address;

City; State; Zip Code

2903 Georgia Amarillo, TX 79109

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

Date

4/23/19

Full name of contributor

Teamsters 577 DRIVE FUND

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

Amount of contribution (\$)

\$1,500<sup>00</sup> ~~xx~~

Contributor address;

City; State; Zip Code

P.O. Box 1609 Amarillo, TX 79105

Principal occupation / Job title (See Instructions)

Labor Union

Employer (See Instructions)

Date

4/18/19

Full name of contributor

Elisha Demerson

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

Amount of contribution (\$)

\$250<sup>00</sup> ~~xx~~

Contributor address;

City; State; Zip Code

6526 Fulton Amarillo, TX 79109

Principal occupation / Job title (See Instructions)

Retired

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.

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME Jay U. Kirkman III 20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,220 <sup>00</sup>
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	\$ 165 <sup>00</sup>
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,637 <sup>29</sup>
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	\$ 165 <sup>00</sup>
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	\$ /

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Jay U. Kirkman III

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

4/25/19

7 Name of lender

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

Jay U. Kirkman III

9 Loan Amount (\$)

\$165,000

6 Is lender a financial institution?

Y  N

8 Lender address;

City; State; Zip Code

1600 S. Bonham  
Amarillo, TX 79102

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

Business Consultant

13 Employer (See Instructions)

Self

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 (\$)

18 Guarantor address;

City; State; Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

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

Loan Amount (\$)

Is lender a financial institution?

Y N

Lender address;

City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

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

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City; State; Zip Code

not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name <b>Dollar General</b>
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6 Amount (\$) <b>\$19.16</b>	7 Payee address; City; State; Zip Code <b>2726 SW 10th Amarillo, TX 79102</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Jay Kirkman</b>	Office sought <b>Amarillo City Council Place 1</b>	Office held
---	---	---	-------------

Date <b>4/01/19</b>	Payee name <b>Office Depot</b>
------------------------	-----------------------------------

Amount (\$) <b>\$3.38</b>	Payee address; City; State; Zip Code <b>Wolfkin Village, Amarillo, TX 79102</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Jay Kirkman</b>	Office sought <b>Amarillo, City Council, Place 1</b>	Office held
---	---	---	-------------

Date <b>04/01/19</b>	Payee name <b>Dollar Tree</b>
-------------------------	----------------------------------

Amount (\$) <b>\$15.99</b>	Payee address; City; State; Zip Code <b>3405 S. Georgia Amarillo, TX 79109</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Jay Kirkman</b>	Office sought <b>Amarillo, City Council Place 1</b>	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>04/01/19</b>	5 Payee name <b>Dollar General</b>	
6 Amount (\$) <b>\$10.83</b>	7 Payee address; City; State; Zip Code <b>2726 SW 10th Amarillo, TX 79102</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <del>Candidate</del> / <del>Officeholder name</del> <b>Jay Kirkman</b> <del>Office sought</del> <b>Amarillo City Council, Place 1</b> <del>Office held</del>	
Date <b>4/01/19</b>	Payee name <b>Office Depot</b>	
Amount (\$) <b>\$12.98</b>	Payee address; City; State; Zip Code <b>Wolfen Village, Amarillo TX 79102</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <del>Candidate</del> / <del>Officeholder name</del> <b>Jay Kirkman</b> <del>Office sought</del> <b>Amarillo City Council, Place 1</b> <del>Office held</del>	
Date <b>4/03/19</b>	Payee name <b>Office Depot</b>	
Amount (\$) <b>\$5.20</b>	Payee address; City; State; Zip Code <b>Wolfen Village, Amarillo, TX 79102</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <del>Candidate</del> / <del>Officeholder name</del> <b>Jay Kirkman</b> <del>Office sought</del> <b>Amarillo City Council Place 1</b> <del>Office held</del>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES MADE 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
- 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: 13

2 FILER NAME

Day U. Kirkman III

4 Date

04/23/19

5 Payee name

Tuesday Morning

6 Amount (\$)

\$5.40

7 Payee address:

City: State: Zip Code

3415 Ball Amarillo, TX 79109

8

PURPOSE OF EXPENDITURE

Advertising Expenses

(a) Category (See Categories listed at the top of this schedule)

(b) Description

Check if travel outside of Texas. Complete Schedule T.  
 Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Day U. Kirkman III  
Amarillo City Council Place 1

Date

4/24/19

Payee name

Office report

Amount (\$)

\$3.12

Payee address:

City: State: Zip Code

Wolfin Village Amarillo, TX 79102

PURPOSE OF EXPENDITURE

Advertising Expenses

(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 ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Day U. Kirkman III  
Amarillo City Council Place 1

Date

4/21/19

Payee name

Dollar General

Amount (\$)

\$12.99

Payee address:

City: State: Zip Code

3412 S. Georgia Amarillo, TX 79109

PURPOSE OF EXPENDITURE

Advertising Expenses

(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 ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Day U. Kirkman III  
Amarillo City Council Place 1

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>4/4/19</b>	5 Payee name <b>Office Depot</b>
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6 Amount (\$) <b>\$129.88</b>	7 Payee address; City; State; Zip Code <b>Wolfen Village, Amarillo, TX 79102</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> / Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del> <b>Amarillo, City Council Place 4</b>	Office held
---	--	---	-------------

Date <b>4/9/19</b>	Payee name <b>Office Depot</b>
-----------------------	-----------------------------------

Amount (\$) <b>\$16.37</b>	Payee address; City; State; Zip Code <b>Wolfen Village, Amarillo, TX 79102</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> / Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del> <b>Amarillo City Council Place 4</b>	Office held
---	--	--	-------------

Date <b>4/9/19</b>	Payee name <b>Dollar General</b>
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Amount (\$) <b>\$33.23</b>	Payee address; City; State; Zip Code <b>2726 S.W 10th Amarillo, TX 79102</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> / Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del> <b>Amarillo City Council Place 4</b>	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL EXPENDITURES MADE 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
- 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: **13**

2 FILER NAME: **Jay U. Kirkman III**

3 Filer ID (Ethics Commission Filers)

4 Date: **4/11/19**

5 Payee name: **FODEX OFFICE**

6 Amount (\$): **\$ 26.03**

7 Payee address: **3801 OLSEN BLVD #2 AMARILLO, TX 79110**

8

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

**ADVERTISING EXPENSE**

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: **Jay Kirkman**

Office held: **Office sought**

Date: **4/11/19**

Payee name: **U.S. Postmaster**

Amount (\$): **\$550.00\***

Payee address: **505 E 9th Amarillo, Tx. 79105**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)

**ADVERTISING EXPENSE**

Description

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: **Jay Kirkman**

Office held: **Office sought**

Date: **4/11/19**

Payee name: **Dolkr General**

Amount (\$): **\$20.57**

Payee address: **1518 SE 10th Amarillo, Tx 79102**

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule)

**ADVERTISING EXPENSE**

Description

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name: **Jay Kirkman**

Office held: **Office sought**

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**Amarillo City Council Place 3**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By 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: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>4/12/19</b>	5 Payee name <b>FedEx Office</b>	
6 Amount (\$) <b>\$11.94</b>	7 Payee address; City; State; Zip Code <b>3801 Olsen Blvd #2 Amarillo, TX 79110</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> / Officeholder name: <b>Jay U. Kirkman</b> / <u>Office sought</u> : <b>Amarillo City Council Place 4</b> / Office held	
Date <b>4/12/19</b>	Payee name <b>U.S. Postmaster</b>	
Amount (\$) <b>\$550<sup>00</sup></b>	Payee address; City; State; Zip Code <b>505 E 9th Amarillo, TX 79105</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> / Officeholder name: <b>Jay U. Kirkman</b> / <u>Office sought</u> : <b>Amarillo City Council, Place 4</b> / Office held	
Date <b>04/15/19</b>	Payee name <b>U.S. Postmaster</b>	
Amount (\$) <b>\$550<sup>00</sup></b>	Payee address; City; State; Zip Code <b>505 E 9th Amarillo, TX 79105</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> / Officeholder name: <b>Jay Kirkman</b> / <u>Office sought</u> : <b>Amarillo City Council Place 4</b> / Office held	

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**POLITICAL EXPENDITURES MADE 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
- 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: **13**

2 FILER NAME: **Jay U. Kirkman III**

3 Filer ID (Ethics Commission Filers)

4 Date: **4/16/19**

5 Payee name: **U.S. Postmaster**

6 Amount (\$): **\$550.00**

7 Payee address: **505 E 9th Amarillo, TX 79105**

8 (a) Category (See Categories listed at the top of this schedule)

**Advertising Expenses**

(b) Description  
 Check if travel outside of Texas. Complete Schedule T.  
 Check if Austin, TX, officeholder living expense.

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name: **Jay Kirkman Amarillo City Council Place 1**

Office held

Date: **4/17/19**

Payee name: **Dollar General**

Amount (\$): **\$10.83**

Payee address: **4210 SW 45th Amarillo, TX 79109**

Category (See Categories listed at the top of this schedule)

**Advertising Expenses**

Description  
 Check if travel outside of Texas. Complete Schedule T.  
 Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name: **Jay Kirkman Amarillo City Council Place 1**

Office held

Date: **4/18/19**

Payee name: **U.S. Postmaster**

Amount (\$): **\$330.00**

Payee address: **505 E 9th Amarillo, TX 79105**

Category (See Categories listed at the top of this schedule)

**Advertising Expenses**

Description  
 Check if travel outside of Texas. Complete Schedule T.  
 Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name: **Jay Kirkman Amarillo City Council Place 1**

Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By 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: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>4/19/19</b>	5 Payee name <b>FedEx Office</b>	
6 Amount (\$) <b>\$11.54</b>	7 Payee address; City; State; Zip Code <b>3801 Olsen Blvd #2 Amarillo, TX 79110</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> Officeholder name: <b>Jay Kirkman Amarillo City Council, Place 1</b> <u>Office sought</u> Office held	
Date <b>4/19/19</b>	Payee name <b>U.S. Postmaster</b>	
Amount (\$) <b>\$110<sup>00</sup>/<sub>4x</sub></b>	Payee address; City; State; Zip Code <b>5000 Western Amarillo, TX 79109</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> Officeholder name: <b>Jay Kirkman Amarillo City Council Place 1</b> <u>Office sought</u> Office held	
Date <b>4/19/19</b>	Payee name <b>Dollar General</b>	
Amount (\$) <b>\$21.11</b>	Payee address; City; State; Zip Code <b>7126 Bell Amarillo, TX 79109</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <u>Candidate</u> Officeholder name: <b>Jay Kirkman Amarillo City Council Place 1</b> <u>Office sought</u> Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>4/19/19</b>	5 Payee name <b>Zip Print</b>	
6 Amount (\$) <b>\$425.42</b>	7 Payee address; City; State; Zip Code <b>501 S. Jackson Amarillo, Tx 79101</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH: <del>Candidate</del> / Officeholder name <del>Office sought</del> <b>Jay Kirkman Amarillo City Council</b> Office held <b>Place 1</b>	
Date <b>4/21/19</b>	Payee name <b>Dollar General</b>	
Amount (\$) <b>\$7.58</b>	Payee address; City; State; Zip Code <b>1528 SE 10th Amarillo, Tx 79102</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH: <del>Candidate</del> / Officeholder name <del>Office sought</del> <b>Jay Kirkman Amarillo City Council</b> Office held <b>Place 1</b>	
Date <b>4/21/19</b>	Payee name <b>Home Depot</b>	
Amount (\$) <b>\$28.10</b>	Payee address; City; State; Zip Code <b>2410 Georgia Amarillo, TX 79109</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH: <del>Candidate</del> / Officeholder name <del>Office sought</del> <b>Jay Kirkman Amarillo City Council</b> Office held <b>Place 1</b>	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay K. Kirkman III</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>4/21/19</b>	5 Payee name <b>Dollar General</b>
--------------------------	---------------------------------------

6 Amount (\$) <b>\$21.65</b>	7 Payee address; City; State; Zip Code <b>2726 SW 10th Amarillo, TX 79102</b>
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
--------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo, City Council Place 2</b>
---	--	--------------------------	--

Date <b>4/23/19</b>	Payee name <b>Dollar General</b>
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Amount (\$) <b>\$8.66</b>	Payee address; City; State; Zip Code <b>3415 Bell. Amarillo, TX 79109</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo City Council Place 2</b>
---	--	--------------------------	---

Date <b>4/22/19</b>	Payee name <b>Dollar General</b>
------------------------	-------------------------------------

Amount (\$) <b>\$16.24</b>	Payee address; City; State; Zip Code <b>3510 Osage Amarillo, TX 79118</b>
-------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo, City Council Place 2</b>
---	--	--------------------------	--

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**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- Advertising Expense
- Accounting/Banking Consulting Expense
- Contributions/Donations Made By Candidate/Officer/Officer/Political Committee
- Credit Card Payment
- Event Expense
- Fees
- Food/Beverage Expense
- Gift/Awards/Memorials Expense
- Legal Services
- Loan Repayment/Reimbursement
- Office Overhead/Rental Expense
- Solicitation/Fundraising Expense
- Transportation Equipment & Related Expense
- Travel In District
- Travel Out Of District
- Other (enter a category not listed above)
- Salaries/Wages/Contract Labor
- Printing Expense
- Political Expense
- Office Expense

The instruction guide explains how to complete this form.

1 Total pages Schedule F1: 13 2 FILER NAME: Jay H. Kirkman III 3 Filer ID (Ethics Commission Filers)

4 Date: 4/23/19 5 Payee name: Dollar General

6 Amount (\$): \$12.81 7 Payee address: 2950 FM 151 Amarillo, TX 79118

8 PURPOSE OF EXPENDITURE: Advertising Expense  
 (a) Category (See Categories listed at the top of this schedule)  
 (b) Description:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense.

9 Complete ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 2  
 Candidate / Officeholder name: Jay Kirkman Amarillo City Council Place 2  
 Office held:  Office sought

Date: 4/24/19 Payee name: Office Depot

Amount (\$): \$64.94 Payee address: Wolfen Village Amarillo, TX 79102

PURPOSE OF EXPENDITURE: Advertising Expense  
 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 ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 2  
 Candidate / Officeholder name: Jay Kirkman Amarillo City Council Place 2  
 Office held:  Office sought

Date: 4/24/19 Payee name: U.S. Postmaster

Amount (\$): \$825.00 Payee address: 2301 Ross Amarillo, TX 79120

PURPOSE OF EXPENDITURE: Advertising Expense  
 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 ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 2  
 Candidate / Officeholder name: Jay Kirkman Amarillo City Council Place 2  
 Office held:  Office sought

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- Advertising Expense
- Accounting/Banking Consulting Expense
- Contributions/Donations Made By Candidate/Officer/Political Committee
- Credit Card Payment
- Event Expense
- Loan Repayment/Reimbursement
- Office Overhead/Rental Expense
- 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: 13 2 FILER NAME: Jay U. Kirkman III 3 Filer ID (Ethics Commission Filers)

4 Date: 4/24/19 5 Payee name: Dolker General

6 Amount (\$): \$27.82 7 Payee address: 3412 S. Georgia Amarillo, TX 79109

8 (a) Category (See Categories listed at the top of this schedule) Advertising Expense  
 (b) Description:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense.

9 Complete ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 1  
 Office holder name: Jay Kirkman Amarillo City Council Place 1  
 Office held:  Office sought

Date: 4/25/19 Payee name: U.S. Postmaster

Amount (\$): \$55.09 Payee address: 2301 Ross Amarillo, TX 79120

PURPOSE OF EXPENDITURE: Advertising Expense  
 Category (See Categories listed at the top of this schedule): Advertising Expense  
 Description:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 1  
 Office holder name: Jay Kirkman Amarillo City Council Place 1  
 Office held:  Office sought

Date: 4/25/19 Payee name: U.S. Postmaster

Amount (\$): \$55.00 Payee address: 505 E 9th Amarillo, TX 79105

PURPOSE OF EXPENDITURE: Advertising Expense  
 Category (See Categories listed at the top of this schedule): Advertising Expense  
 Description:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense.

Complete ONLY if direct expenditure to benefit C/OH: Jay Kirkman Amarillo City Council Place 1  
 Office holder name: Jay Kirkman Amarillo City Council Place 1  
 Office held:  Office sought

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>13</b>	2 FILER NAME <b>Jay U. Kirkman</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>4/25/19</b>	5 Payee name <b>U.S. Postmaster</b>
--------------------------	--

6 Amount (\$) <b>\$880.00</b>	7 Payee address; City; State; Zip Code <b>505 E 9th Amarillo, TX 79105</b>
----------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo City Council Place 7</b>
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Date <b>4/25/19</b>	Payee name <b>DONUT STOP</b>
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Amount (\$) <b>\$8.50</b>	Payee address; City; State; Zip Code <b>1905 S. Georgia Amarillo TX 79109</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food/Beverage 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
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo City Council Place 7</b>
---	--	--------------------------	---

Date <b>4/18/19</b>	Payee name <b>AMARILLO REPUBLICAN WOMEN</b>
------------------------	--

Amount (\$) <b>\$25.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 3007 Amarillo, TX 79110</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food/Beverage 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
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	<del>Candidate</del> Officeholder name <b>Jay Kirkman</b>	<del>Office sought</del>	Office held <b>Amarillo City Council Place 7</b>
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# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 1	2 FILER NAME Jay U. Kinkman	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 165.00
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5 Date 4/25/19	6 Payee name U.S. Postmaster
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7 Amount (\$) \$ 165.00	8 Payee address; City; State; Zip Code 2301 Ross Amarillo, TX 79120
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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
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11 Complete ONLY if direct expenditure to benefit C/OH	<u>Candidate</u> / Officeholder name Jay Kinkman	<u>Office sought</u> Amarillo City Council Place 1	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <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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