

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

21

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR MR. FIRST Jay MI U.
NICKNAME LAST SUFFIX
Kirkman III

OFFICE USE ONLY

Date Received

RECEIVED

APR 26 2019

CITY SECRETARY'S
CITY OF AMARILLO

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1600 S. Bonham
Amarillo Texas 79102

Change of Address

Date Hand-delivered or Date Postmarked

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(916) 425-4017

6 CAMPAIGN TREASURER NAME

MS / MRS / MR MR. FIRST Jay MI U.
NICKNAME LAST SUFFIX
Kirkman III

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1600 S. Bonham
Amarillo, Texas 79102

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(916) 425-4017

9 REPORT TYPE

- January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year
03 / 31 / 2019 THROUGH 04 / 28 / 2019

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
05 / 04 / 19 General Special City Council

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Amarillo City Council
Place 7

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

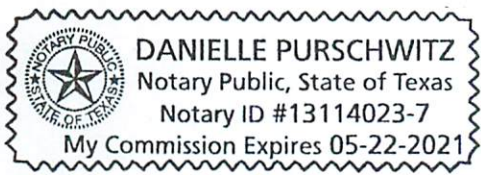
14 C/OH NAME Jay U. Kirkman III 15 Filer ID (Ethics Commission Filers)

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)	\$ 5,220.00 xy
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	\$ 165.00 xy

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 DRIVE FUND

6 Contributor address; City; State; Zip Code

P.O. Box 1609 Amarillo, TX 79105

\$2,500⁰⁰ ~~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

\$100⁰⁰ ~~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

\$500⁰⁰ ~~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

\$50⁰⁰ ~~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 (\$)

\$100⁰⁰ ~~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 (\$)

\$100⁰⁰ ~~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 (\$)

\$30⁰⁰ ~~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 (\$)

\$40⁰⁰ ~~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:

2 FILER NAME

Jay U. Kirkman III

3 Filer ID (Ethics Commission Filers)

4 Date

4/24/19

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

Eric/Callie Pullen

7 Amount of contribution (\$)

\$500⁰⁰ ~~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 out-of-state PAC (ID#: _____)

Teamsters 577 DRIVE FUND

Amount of contribution (\$)

\$1,500⁰⁰ ~~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 out-of-state PAC (ID#: _____)

Elisha Demerson

Amount of contribution (\$)

\$250⁰⁰ ~~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 ⁰⁰
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 ⁰⁰
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,637 ²⁹
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 ⁰⁰
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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name Dollar General
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6 Amount (\$) \$19.16	7 Payee address; City; State; Zip Code 2726 SW 10th Amarillo, TX 79102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Jay Kirkman	Office sought Amarillo City Council Place 1	Office held
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Date 4/01/19	Payee name Office Depot
------------------------	-----------------------------------

Amount (\$) \$3.38	Payee address; City; State; Zip Code Wolfkin Village, Amarillo, TX 79102
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought Amarillo, City Council, Place 1	Office held
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Date 04/01/19	Payee name Dollar Tree
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Amount (\$) \$15.99	Payee address; City; State; Zip Code 3405 S. Georgia Amarillo, TX 79109
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought Amarillo, City Council Place 1	Office held
---	---	--	-------------

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

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 Expense | 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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
4 Date 04/23/19	5 Payee name Tuesday Morning	
6 Amount (\$) \$5.40	7 Payee address; City; State; Zip Code 3415 Bell Amarillo, Tx 79109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expenses	(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 Candidate / Officeholder name: Jay Kirkman Office sought: Amarillo City Council Place 1 Office held:	
Date 4/24/19	Payee name Office Depot	
Amount (\$) \$3.12	Payee address; City; State; Zip Code Wolfen Village Amarillo, Tx 79102	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Candidate / Officeholder name: Jay Kirkman Office sought: Amarillo City Council Place 1 Office held:	
Date 4/26/19	Payee name Dollar General	
Amount (\$) \$12.99	Payee address; City; State; Zip Code 3412 S. Georgia Amarillo, Tx 79109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Candidate / Officeholder name: Jay Kirkman Office sought: Amarillo City Council Place 1 Office held:	

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

Date 4/9/19	Payee name Office Depot
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Amount (\$) \$16.37	Payee address; City; State; Zip Code Wolfen Village, Amarillo, TX 79102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought Amarillo City Council Place 4	Office held
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Date 4/9/19	Payee name Dollar General
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Amount (\$) \$33.23	Payee address; City; State; Zip Code 2726 S.W 10th Amarillo, TX 79102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought Amarillo City Council Place 4	Office held
---	--	--	-------------

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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
---	---	---------------------------------------

4 Date 4/11/19	5 Payee name FedEx Office
--------------------------	-------------------------------------

6 Amount (\$) \$26.03	7 Payee address; City; State; Zip Code 3801 Olsen Blvd #2 Amarillo, TX 79110
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	--	---

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

Date 4/11/19	Payee name U.S. Postmaster
------------------------	--------------------------------------

Amount (\$) \$550.00	Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Office sought	Office held
	Amarillo City Council Place 1	

Date 4/11/19	Payee name Dollar General
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Amount (\$) \$20.57	Payee address; City; State; Zip Code 1518 SE 10th Amarillo, TX 79102
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Office sought	Office held
	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 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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
4 Date 4/12/19	5 Payee name FedEx Office	
6 Amount (\$) \$11.94	7 Payee address; City; State; Zip Code 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 <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 <u>Candidate</u> / Officeholder name: Jay U. Kirkman / Office sought: Amarillo City Council Place 4 / Office held: _____	
Date 4/12/19	Payee name U.S. Postmaster	
Amount (\$) \$550⁰⁰	Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 <u>Candidate</u> / Officeholder name: Jay U. Kirkman / Office sought: Amarillo City Council, Place 4 / Office held: _____	
Date 04/15/19	Payee name U.S. Postmaster	
Amount (\$) \$550⁰⁰	Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 <u>Candidate</u> / Officeholder name: Jay Kirkman / Office sought: Amarillo City Council Place 4 / Office held: _____	

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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
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4 Date 4/16/19	5 Payee name U.S. Postmaster
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6 Amount (\$) \$550⁰⁰ X	7 Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	<u>Candidate</u> Officeholder name Jay Kirkman Amarillo City Council Place 7	<u>Office sought</u>	Office held
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Date 4/17/19	Payee name Dollar General
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Amount (\$) \$10.83	Payee address; City; State; Zip Code 4210 SW 45th Amarillo, TX 79109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 <u>ONLY</u> if direct expenditure to benefit C/OH	<u>Candidate</u> Officeholder name Jay Kirkman Amarillo City Council Place 7	<u>Office sought</u>	Office held
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Date 4/18/19	Payee name U.S. Postmaster
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Amount (\$) \$330⁰⁰ X	Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 <u>ONLY</u> if direct expenditure to benefit C/OH	<u>Candidate</u> Officeholder name Jay Kirkman Amarillo City Council Place 7	<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 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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
4 Date 4/19/19	5 Payee name FedEx Office	
6 Amount (\$) \$11.54	7 Payee address; City; State; Zip Code 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 <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 Candidate/Officeholder name: Jay Kirkman Amarillo City Council, Place 1 Office sought: [] Office held: []	
Date 4/19/19	Payee name U.S. Postmaster	
Amount (\$) \$110.00/x	Payee address; City; State; Zip Code 5000 Western Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Amarillo City Council Place 1 Office sought: [] Office held: []	
Date 4/19/19	Payee name Dollar General	
Amount (\$) \$21.11	Payee address; City; State; Zip Code 7126 Bell Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Amarillo City Council Place 1 Office sought: [] 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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
4 Date 4/19/19	5 Payee name Zip Print	
6 Amount (\$) \$425.42	7 Payee address; City; State; Zip Code 501 S. Jackson Amarillo, Tx 79101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name Office sought Office held Jay Kirkman Amarillo City Council Place 1	
Date 4/21/19	Payee name Dollar General	
Amount (\$) \$7.58	Payee address; City; State; Zip Code 1528 SE 10th Amarillo, Tx 79102	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman Amarillo City Council Place 1	
Date 4/21/19	Payee name Home Depot	
Amount (\$) \$28.10	Payee address; City; State; Zip Code 2410 Georgia Amarillo, TX 79109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman Amarillo City Council Place 1	

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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: 13	2 FILER NAME Jay K. Kirkman III	3 Filer ID (Ethics Commission Filers)
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4 Date 4/21/19	5 Payee name Dollar General
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6 Amount (\$) \$21.65	7 Payee address; City; State; Zip Code 2726 SW 10th Amarillo, TX 79102
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate Officeholder name Jay Kirkman	Office sought	Office held Amarillo City Council Place 2
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Date 4/23/19	Payee name Dollar General
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Amount (\$) \$8.66	Payee address; City; State; Zip Code 3415 Bell. Amarillo, TX 79109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought	Office held Amarillo City Council Place 2
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Date 4/22/19	Payee name Dollar General
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Amount (\$) \$16.24	Payee address; City; State; Zip Code 3510 Osage Amarillo, TX 79118
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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 Jay Kirkman	Office sought	Office held Amarillo City Council Place 2
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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: 13 2 FILER NAME: Jay U. 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; City; State; Zip Code: 2950 FM 1151 Amarillo, TX 79118

8 PURPOSE OF EXPENDITURE: Advertising Expense
 (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 sought: Amarillo City Council Place 1 Office held: Plac 1

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

Amount (\$): \$64.94 Payee address; City; State; Zip Code: Wolflin Village Amarillo, TX 79102

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: Candidate / Officeholder name: Jay Kirkman Office sought: Amarillo City Council Place 1 Office held: Plac 1

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

Amount (\$): \$825.00 Payee address; City; State; Zip Code: 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: Candidate / Officeholder name: Jay Kirkman Office sought: Amarillo City Council Place 1 Office held: Plac 1

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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 Expense	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: 13	2 FILER NAME Jay U. Kirkman III	3 Filer ID (Ethics Commission Filers)
4 Date 4/24/19	5 Payee name Dollar General	
6 Amount (\$) \$27.82	7 Payee address; City; State; Zip Code 3412 S. Georgia Amarillo, TX 79109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate Officeholder name: Jay Kirkman Office sought Office held: Amarillo City Council Place 1	
Date 4/25/19	Payee name U.S. Postmaster	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 2301 Ross Amarillo, TX 79120	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Office sought Office held: Amarillo City Council Place 1	
Date 4/25/19	Payee name U.S. Postmaster	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 505 E 9th Amarillo TX 79105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	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: Jay Kirkman Office sought Office held: Amarillo City Council Place 1	

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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: 13	2 FILER NAME Jay U. Kirkman	3 Filer ID (Ethics Commission Filers)
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4 Date 4/25/19	5 Payee name U.S. Postmaster
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6 Amount (\$) \$880.00	7 Payee address; City; State; Zip Code 505 E 9th Amarillo, TX 79105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate Officeholder name Jay Kirkman	Office sought	Office held Amarillo City Council Place 7
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Date 4/25/19	Payee name DONUT STOP
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Amount (\$) \$8.50	Payee address; City; State; Zip Code 1905 S. Georgia Amarillo TX 79109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	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 Jay Kirkman	Office sought	Office held Amarillo City Council Place 7
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Date 4/18/19	Payee name AMARILLO REPUBLICAN WOMEN
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Amount (\$) \$25.00	Payee address; City; State; Zip Code P.O. Box 3007 Amarillo, TX 79110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	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 Jay Kirkman	Office sought	Office held Amarillo City Council Place 7
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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
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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