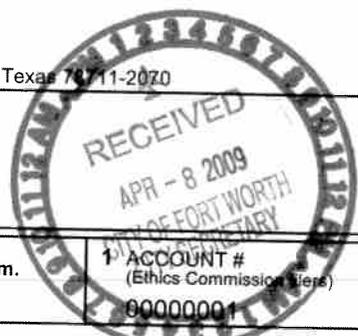


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1



The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission Miers)  
00000001

2 PAGE #  
1 of 24

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Winton B  
NICKNAME LAST SUFFIX  
Zim Zimmerman

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
11400 Northview Drive  
Fort Worth, TX 76008

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Arthur E  
NICKNAME LAST SUFFIX  
Gene Miers

6 CAMPAIGN TREASURER ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
5608 Malvey Ave, Ste 209  
Fort Worth, TX 76107

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(817) 735-1454

8 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)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year  
01/01/2009 03/30/2009

10 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE  
05/09/2009  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)  
Fort Worth City Council District 03

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2



Date Received

Receipt # Amount

Date Processed

Date Imaged

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH  
COVER SHEET PG 2**

14 C/OH NAME Zimmerman, Winton B

15 ACCOUNT # (Ethics Commission filers)  
00000001

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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	\$ 322.00
-----------------------------------------------------------------------------------------------------------------------	-----------

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,497.00
--------------------------------------------------------------------------------------	--------------

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 242.76
------------------------------------------------------------------	-----------

4. TOTAL POLITICAL EXPENDITURES	\$ 16,475.54
---------------------------------	--------------

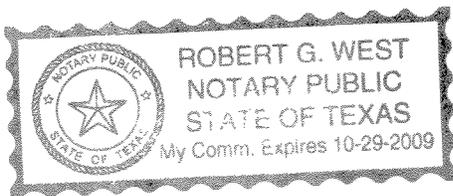
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,113.98
----------------------------------------------------------------------------------------	-------------

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
-----------------------------------------------------------------------------------------------	---------

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.

*W.B. Zimmerman*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said W.B. Zimmerman, this the 8th day of April, 2009, to certify which, witness my hand and seal of office.

*Robert G. West*  
Signature of officer administering oath

Robert G. West  
Print name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/11 Report: 3/24

2 FILER NAME Zimmerman, Winton B

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Bailey, Warner

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

03/22/2009

6 Contributor address; City; State; Zip Code  
4112 Angus Dr  
Fort Worth, TX 76116-8012

\$75.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Brennand, Robert C (Mr.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/06/2009

Contributor address; City; State; Zip Code  
6308 Fershaw Pl  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Campbell, Laura M (Ms.)

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/01/2009

Contributor address; City; State; Zip Code  
760 Jenkins Rd  
Aledo, TX 76008

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Churchill, Mac

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/29/2009

Contributor address; City; State; Zip Code  
325 N Bailey Ave  
Fort Worth, TX 76107

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Cockrell, John

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/12/2009

Contributor address; City; State; Zip Code  
P.O. Box 1568  
Fort Worth, TX 76101

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 4/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  03/21/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Croy, Nancy  6 Contributor address; City; State; Zip Code 6905 Tumbling Trail Fort Worth, TX 76116	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/15/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dagen, D'Ann  Contributor address; City; State; Zip Code 164 Brush Creek Drive Azle, TX 76020-1592	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/27/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Cathie  Contributor address; City; State; Zip Code 7108 Falling Springs Rd Fort Worth, TX 76116	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DeMoss, Margaret  Contributor address; City; State; Zip Code 3451 Green Arbor Court Fort Worth, TX 76109-3111	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  03/29/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dueease, Walter  Contributor address; City; State; Zip Code 205 Evergreen Trl Weatherford, TX 76087-2218	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 3/11 Report: 5/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Emerson, Roy

**7** Amount of contribution (\$)

**8** In-kind contribution description (if applicable)

03/21/2009

**6** Contributor address; City; State; Zip Code  
6913 Tumbling Trail  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Finks, W.S.

Amount of contribution (\$)

In-kind contribution description (if applicable)

01/30/2009

Contributor address; City; State; Zip Code  
928 Kingswood Dr  
Burleson, TX 76028-4072

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Galvan, Robert

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/23/2009

Contributor address; City; State; Zip Code  
P.O. Box 121005  
Fort Worth, TX 76121

\$400.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Guthrie, Sue

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/24/2009

Contributor address; City; State; Zip Code  
3755 Stoney Creek Ct  
Fort Worth, TX 76116-9336

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Hadley, Stephen K

Amount of contribution (\$)

In-kind contribution description (if applicable)

01/21/2009

Contributor address; City; State; Zip Code  
3605 Myrtle Springs Ct  
Fort Worth, TX 76116-9210

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/11 Report: 6/24

2 FILER NAME Zimmerman, Winton B

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Hammer, Bryon

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

03/30/2009

6 Contributor address; City; State; Zip Code  
7000 Riverport Road  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Himmel, Edwin W

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/27/2009

Contributor address; City; State; Zip Code  
11700 Ferndale Lane  
Aledo, TX 76008-3637

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Housewirth, Greg

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/22/2009

Contributor address; City; State; Zip Code  
6137 Locke  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Howeth, Allan

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/24/2009

Contributor address; City; State; Zip Code  
6224 Curzon  
Fort Worth, TX 76116-4603

\$150.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Lowrance, Dan

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/30/2009

Contributor address; City; State; Zip Code  
4051 Modlin Ave  
Fort Worth, TX 76107-1601

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 5/11 Report: 7/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/03/2009 Luckett, Helen

**7** Amount of contribution (\$)

**8** In-kind contribution description (if applicable)

\$100.00

**6** Contributor address; City; State; Zip Code  
6317 Kenwick Ave.  
Fort Worth, TX 76116-4630

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
01/26/2009 Mahaffey, Scott

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$1,000.00

Contributor address; City; State; Zip Code  
3532 Briarhaven Road  
Fort Worth, TX 76109-3128

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
02/23/2009 Marchant, Nancy L

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$100.00

Contributor address; City; State; Zip Code  
2208 Ashland Ave  
Fort Worth, TX 76107

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
01/24/2009 Mather, Richard S

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$200.00

Contributor address; City; State; Zip Code  
8112 Old Tramway Dr  
Melbourne, FL 76107-5108

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/30/2009 McGee, Bruce

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$150.00

Contributor address; City; State; Zip Code  
PO Box 629  
Fort Worth, TX 76101

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/11 Report: 8/24

2 FILER NAME Zimmerman, Winton B

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Merritt, W.D.

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

01/30/2009

6 Contributor address; City; State; Zip Code  
P.O. Box 910  
Fort Worth, TX 76101-0910

\$250.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Miller, Earl

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/06/2009

Contributor address; City; State; Zip Code  
6809 Dwight St  
Fort Worth, TX 76116-8004

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Morris, William W III

Amount of contribution (\$)

In-kind contribution description (if applicable)

01/29/2009

Contributor address; City; State; Zip Code  
4425 Owendale Dr  
Benbrook, TX 76116

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Morris, William W III

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/26/2009

Contributor address; City; State; Zip Code  
4425 Owendale Dr  
Benbrook, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Moynihan, Michael

Amount of contribution (\$)

In-kind contribution description (if applicable)

01/09/2009

Contributor address; City; State; Zip Code  
4813 Bellflower Way  
Fort Worth, TX 76123

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 7/11 Report: 9/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/06/2009 Murrin, Steve

**7** Amount of contribution (\$) **8** In-kind contribution description (if applicable)

03/06/2009

**6** Contributor address; City; State; Zip Code  
4916 Camp Bowie  
Fort Worth, TX 76107

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/27/2009 Ponitz, Ken

Amount of contribution (\$) In-kind contribution description (if applicable)

03/27/2009

Contributor address; City; State; Zip Code  
11324 Northview Drive  
Aledo, TX 76008

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/17/2009 Ramsey, Gordon

Amount of contribution (\$) In-kind contribution description (if applicable)

03/17/2009

Contributor address; City; State; Zip Code  
3728 Cresthaven Terrace  
Fort Worth, TX 76107

\$300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
03/09/2009 Reynolds, Margie

Amount of contribution (\$) In-kind contribution description (if applicable)

03/09/2009

Contributor address; City; State; Zip Code  
5111 Paluxy Hwy  
Granbury, TX 76048

\$1,000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
02/22/2009 Roberts, Clay

Amount of contribution (\$) In-kind contribution description (if applicable)

02/22/2009

Contributor address; City; State; Zip Code  
4009 Edgehill  
Fort Worth, TX 76116

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/11 Report: 10/24

2 FILER NAME Zimmerman, Winton B

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Robinson, Keith

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

03/06/2009

6 Contributor address; City; State; Zip Code  
9112 Camp Bowie W #211  
Fort Worth, TX 76116-6099

\$200.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Scheideman, D.B.

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/18/2009

Contributor address; City; State; Zip Code  
4968 Westbriar Drive  
Fort Worth, TX 76109

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Seath, Donald D

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/01/2009

Contributor address; City; State; Zip Code  
6320 Curzon  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Severson, Mickey

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/14/2009

Contributor address; City; State; Zip Code  
3754 Hollow Crk  
Fort Worth, TX 76116

\$500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Shelton, Ann

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/05/2009

Contributor address; City; State; Zip Code  
3063 Casita Court  
Fort Worth, TX 76116-4707

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 9/11 Report: 11/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Singleton, Jerry

**7** Amount of contribution (\$)

**8** In-kind contribution description (if applicable)

02/09/2009

**6** Contributor address; City; State; Zip Code  
3816 Hickory Springs Rd  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Slate, Ron

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/22/2009

Contributor address; City; State; Zip Code  
7017 Sandalwood Lane  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Melinda W

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/11/2009

Contributor address; City; State; Zip Code  
301 Commerce St, Ste 3500  
Fort Worth, TX 76102

\$250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Stepp, R D

Amount of contribution (\$)

In-kind contribution description (if applicable)

03/27/2009

Contributor address; City; State; Zip Code  
2117 Spanish Trail  
Fort Worth, TX 76107

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Strawser, Laura W

Amount of contribution (\$)

In-kind contribution description (if applicable)

02/07/2009

Contributor address; City; State; Zip Code  
4005 Rothington Rd.  
Fort Worth, TX 76116

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/11 Report: 12/24	
2 FILER NAME Zimmerman, Winton B		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 01/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Don W ..... 6 Contributor address; City; State; Zip Code 825 Boling Ranch Road Azle, TX 76020	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 03/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tidwell, Gail ..... Contributor address; City; State; Zip Code 11712 Wind Creek Ct Aledo, TX 76008	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 02/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tindall, Scott ..... Contributor address; City; State; Zip Code 630 N Freeway, Ste 300 Fort Worth, TX 76102-1715	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/17/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Webb, Ted (Mrs.) ..... Contributor address; City; State; Zip Code 3705 Briarhaven Road Fort Worth, TX 76109	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 03/18/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Witherite, Richard ..... Contributor address; City; State; Zip Code 303 Sapphire Dr College Station, TX 77845-1932	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 11/11 Report: 13/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Zimmerman, Donna

**7** Amount of  
contribution (\$)

**8** In-kind contribution  
description (if applicable)

02/13/2009

**6** Contributor address; City; State; Zip Code  
P.O. Box 1581  
Cleburne, TX 76033

\$100.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 1/10 Report: 14/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date	<b>5</b> Payee name A T & T	<b>7</b> Amount (\$)
03/20/2009	<b>6</b> Payee address; City; State; Zip Code 14575 Presidio Square Room 100-CR Houston, TX 77083	\$91.45

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office telephone	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

Date	Payee name Amazon.com	Amount (\$)
03/04/2009	Payee address; City; State; Zip Code Internet site	\$131.97

Purpose of payment (See instructions regarding type of information required.) Word processing software	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

Date	Payee name Arcos Business Technology Inc	Amount (\$)
02/05/2009	Payee address; City; State; Zip Code 6080 S Hulen St, #360-284 Fort Worth, TX 76132	\$3,200.00

Purpose of payment (See instructions regarding type of information required.) Website design	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

Date	Payee name Bob's Lock & Safe	Amount (\$)
02/09/2009	Payee address; City; State; Zip Code 4912 Camp Bowie Blvd Fort Worth, TX 76107	\$86.60

Purpose of payment (See instructions regarding type of information required.) Office keys	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 2/10 Report: 15/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  03/22/2009	<b>5</b> Payee name Bordelon Foods Catering  <b>6</b> Payee address; City; State; Zip Code 5080 Interstate 20 Willow Park, TX 76087	<b>7</b> Amount (\$)  \$900.00
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**8** Purpose of payment (See instructions regarding type of information required.)  
Food for campaign kick-off

(If travel outside of Texas, complete Schedule T)

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

Date  02/09/2009	Payee name CostCo Wholesale  Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Fort Worth, TX 76132	Amount (\$)  \$363.71
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

Date  02/20/2009	Payee name CostCo Wholesale  Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Fort Worth, TX 76132	Amount (\$)  \$35.43
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

Date  02/14/2009	Payee name Dollar Tree Stores  Payee address; City; State; Zip Code 6397 Camp Bowie Blvd Fort Worth, TX 76116	Amount (\$)  \$20.57
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 3/10 Report: 16/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  02/19/2009	<b>5</b> Payee name Dollar Tree Stores  <b>6</b> Payee address; City; State; Zip Code 6397 Camp Bowie Blvd Fort Worth, TX 76116	<b>7</b> Amount (\$)  \$1.08
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  02/23/2009	Payee name Dollar Tree Stores  Payee address; City; State; Zip Code 6397 Camp Bowie Blvd Fort Worth, TX 76116	Amount (\$)  \$28.15
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Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  03/08/2009	Payee name Dollar Tree Stores  Payee address; City; State; Zip Code 6397 Camp Bowie Blvd Fort Worth, TX 76116	Amount (\$)  \$8.66
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Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  02/26/2009	Payee name FastSigns  Payee address; City; State; Zip Code 6501 Camp Bowie Blvd Fort Worth, TX 76116	Amount (\$)  \$733.36
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Purpose of payment (See instructions regarding type of information required.) Office sign  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 4/10 Report: 17/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

**4** Date  
02/06/2009

**5** Payee name  
FedEx Kinko's

**7** Amount  
(\$)

**6** Payee address; City; State; Zip Code  
6020 Camp Bowie Blvd  
Fort Worth, TX 76116-5620

\$67.03

**8** Purpose of payment (See instructions regarding type of information required.)  
Copying

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  
02/06/2009

Payee name  
FedEx Kinko's

Amount  
(\$)

Payee address; City; State; Zip Code  
6020 Camp Bowie Blvd  
Fort Worth, TX 76116-5620

\$75.39

Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  
02/11/2009

Payee name  
FedEx Kinko's

Amount  
(\$)

Payee address; City; State; Zip Code  
6020 Camp Bowie Blvd  
Fort Worth, TX 76116-5620

\$132.61

Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  
02/18/2009

Payee name  
FedEx Kinko's

Amount  
(\$)

Payee address; City; State; Zip Code  
6020 Camp Bowie Blvd  
Fort Worth, TX 76116-5620

\$425.24

Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 5/10 Report: 18/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  03/01/2009	<b>5</b> Payee name FedEx Kinko's  <b>6</b> Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76116-5620	<b>7</b> Amount (\$)  \$58.04
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**8** Purpose of payment (See instructions regarding type of information required.)  
Copying

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

Date  03/01/2009	Payee name FedEx Kinko's  Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76116-5620	Amount (\$)  \$100.00
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Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

Date  03/08/2009	Payee name FedEx Kinko's  Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76116-5620	Amount (\$)  \$32.21
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Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

Date  03/23/2009	Payee name FedEx Kinko's  Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76116-5620	Amount (\$)  \$166.12
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Purpose of payment (See instructions regarding type of information required.)  
Copying

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 6/10 Report: 19/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date 03/13/2009	<b>5</b> Payee name Fort Worth Water Department  <b>6</b> Payee address; City; State; Zip Code P.O. Box 961003 Fort Worth, TX 76161-0003	<b>7</b> Amount (\$)  \$110.42
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office utilities  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date 03/01/2009	Payee name Fotolia.com  Payee address; City; State; Zip Code Internet site	Amount (\$)  \$70.00
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Purpose of payment (See instructions regarding type of information required.) Images  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date 01/30/2009	Payee name GoDaddy.com  Payee address; City; State; Zip Code Internet site	Amount (\$)  \$114.83
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Purpose of payment (See instructions regarding type of information required.) Domain names  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date 02/24/2009	Payee name Hobby Lobby  Payee address; City; State; Zip Code 5020 S Hulen St Fort Worth, TX 76132	Amount (\$)  \$197.00
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Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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# POLITICAL EXPENDITURES

## SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 7/10 Report: 20/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date	<b>5</b> Payee name Hobby Lobby	<b>7</b> Amount (\$)
02/24/2009	<b>6</b> Payee address; City; State; Zip Code 5020 S Hulen St Fort Worth, TX 76132	\$67.72

**8** Purpose of payment (See instructions regarding type of information required.)  
Office supplies

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

<b>4</b> Date	<b>5</b> Payee name Hobby Lobby	<b>7</b> Amount (\$)
02/28/2009	<b>6</b> Payee address; City; State; Zip Code 5020 S Hulen St Fort Worth, TX 76132	\$144.74

Purpose of payment (See instructions regarding type of information required.)  
Office supplies

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

<b>4</b> Date	<b>5</b> Payee name Hobby Lobby	<b>7</b> Amount (\$)
03/20/2009	<b>6</b> Payee address; City; State; Zip Code 5020 S Hulen St Fort Worth, TX 76132	\$53.09

Purpose of payment (See instructions regarding type of information required.)  
Office supplies

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

<b>4</b> Date	<b>5</b> Payee name Line Printing Company	<b>7</b> Amount (\$)
03/27/2009	<b>6</b> Payee address; City; State; Zip Code 2808 Shamrock Ave, Ste C Fort Worth, TX 76107	\$3,247.50

Purpose of payment (See instructions regarding type of information required.)  
Yard signs

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

# POLITICAL EXPENDITURES

# SCHEDULE F

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 8/10 Report: 21/24
<b>2</b> FILER NAME Zimmerman, Winton B		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001
<b>4</b> Date  02/11/2009	<b>5</b> Payee name RadioShack  <b>6</b> Payee address; City; State; Zip Code ..... 3107 Greene Ave Fort Worth, TX 76109-2319	<b>7</b> Amount (\$)  \$68.19
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  03/10/2009	Payee name Ridglea Post Office  Payee address; City; State; Zip Code ..... 3020 South Cherry Lane Fort Worth, TX 76116	Amount (\$)  \$15.12
Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  03/21/2009	Payee name Ridglea Post Office  Payee address; City; State; Zip Code ..... 3020 South Cherry Lane Fort Worth, TX 76116	Amount (\$)  \$42.00
Purpose of payment (See instructions regarding type of information required.) Postage  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  02/10/2009	Payee name Staples  Payee address; City; State; Zip Code ..... 1600 S University Dr Fort Worth, TX 76107	Amount (\$)  \$25.53
Purpose of payment (See instructions regarding type of information required.) Office supplies  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 9/10 Report: 22/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  02/17/2009	<b>5</b> Payee name Staples  <b>6</b> Payee address; City; State; Zip Code 1600 S University Dr Fort Worth, TX 76107	<b>7</b> Amount (\$)  \$19.44
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**8** Purpose of payment (See instructions regarding type of information required.)  
Office supplies

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  02/24/2009	Payee name Staples  Payee address; City; State; Zip Code 1600 S University Dr Fort Worth, TX 76107	Amount (\$)  \$14.05
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  03/22/2009	Payee name Sullivan, Morgan  Payee address; City; State; Zip Code 2916 Harlanwood Drive Fort Worth, TX 76109	Amount (\$)  \$200.00
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Purpose of payment (See instructions regarding type of information required.)  
Music for campaign kick-off

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

Date  03/06/2009	Payee name Summit Press  Payee address; City; State; Zip Code 2825 Bledsoe Street Fort Worth, TX 76107	Amount (\$)  \$1,407.25
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Purpose of payment (See instructions regarding type of information required.)  
Printing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

# POLITICAL EXPENDITURES

## SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 10/10 Report: 23/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  03/18/2009	<b>5</b> Payee name Summit Press  <b>6</b> Payee address; City; State; Zip Code 2825 Bledsoe Street Fort Worth, TX 76107	<b>7</b> Amount (\$)  \$308.51
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**8** Purpose of payment (See instructions regarding type of information required.)  
Printing

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

Date  02/06/2009	Payee name Village at Camp Bowie  Payee address; City; State; Zip Code 6115 Camp Bowie Blvd Ste 280 Fort Worth, TX 76116	Amount (\$)  \$950.00
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Purpose of payment (See instructions regarding type of information required.)  
Office rent and security deposit

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

Date  03/05/2009	Payee name Village at Camp Bowie  Payee address; City; State; Zip Code 6115 Camp Bowie Blvd Ste 280 Fort Worth, TX 76116	Amount (\$)  \$750.00
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Purpose of payment (See instructions regarding type of information required.)  
Office rent

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
  
Office sought:  
Office held:

(If travel outside of Texas, complete Schedule T)

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/1 Report: 24/24

**2** FILER NAME Zimmerman, Winton B

**3** ACCOUNT # (Ethics Commission filers)  
00000001

4 Date 03/19/2009	5 Payee name FastSigns	8 Amount (\$) \$1,591.28
	6 Payee address; City; State; Zip Code 6501 Camp Bowie Blvd Fort Worth, TX 76116	
7 Purpose of expenditure (See instructions regarding type of information required.) Large Signs  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 03/21/2009	Payee name Goody Goody	Amount (\$) \$97.37
	Payee address; City; State; Zip Code 4047 SW Loop 820 Fort Worth, TX 76107	
Purpose of expenditure (See instructions regarding type of information required.) Refreshments for kick-off  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 03/22/2009	Payee name Tob Thumb	Amount (\$) \$51.80
	Payee address; City; State; Zip Code 6377 Camp Bowie Blvd Fort Worth, TX 76116	
Purpose of expenditure (See instructions regarding type of information required.) Suuplies for kick-off  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 03/22/2009	Payee name Wal Mart	Amount (\$) \$29.32
	Payee address; City; State; Zip Code 6770 Westworth Blvd Fort Worth, TX 76116	
Purpose of expenditure (See instructions regarding type of information required.) Supplies for kick-off  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended