



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14 C/OH NAME**  
Zachariah C. Manning

**15 Filer ID (Ethics Commission Filers)**

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

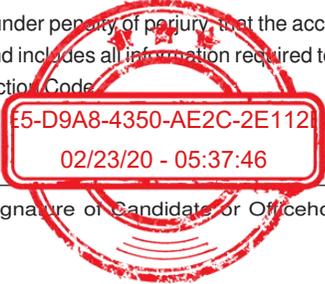
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED 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	

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 86.48
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,146.48
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 516.76
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 4,833.71
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 55.74
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,900.70

**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.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$\$\$1,146.48
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$\$0.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$\$\$0.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$\$\$6,900.70
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$\$1,583.71
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$\$3,250.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$\$\$0.00
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$\$0.00
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$\$0.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$\$\$0.00
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$\$\$0.00
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$\$0.00

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
1

**2** FILER NAME  
Zachariah C. Manning

**3** Filer ID (Ethics Commission Filers)

**4** Date  
02/03/2020

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Marcus Jernigan

**7** Amount of contribution (\$)  
\$500.00

**6** Contributor address; City; State; Zip Code  
3013 Neighbors Lane Del City OK 73115

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

**9** Employer (See Instructions)

Date  
02/10/2020

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
ANR Care, LLC

Amount of contribution (\$)  
\$560.00

Contributor address; City; State; Zip Code  
3210 Admiral Dr. Wylie TX 75098

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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.

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: 3
<b>2</b> FILER NAME Zachariah C. Manning		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$6,425.00
<b>5</b> Date of loan 02/03/2020	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zachariah Manning	<b>9</b> Loan Amount (\$) \$200.00
<b>6</b> Is lender a financial Institution?  <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code 8215 Forest Lane Dallas TX 75243	<b>10</b> Interest rate 18
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor Zach Manning Campaign	<b>19</b> Amount Guaranteed (\$) \$200.00
	<b>18</b> Guarantor address; City; State; Zip Code PO Box 670283 Dallas TX 75367-0283	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)

Date of loan 02/10/2020	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zachariah Manning	Loan Amount (\$) \$100.00
Is lender a financial Institution?  <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 8215 Forest Lane Dallas TX 75243	Interest rate 18
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor Zach Manning Campaign	Amount Guaranteed (\$) \$100.00
	Guarantor address; City; State; Zip Code PO Box 670283 Dallas TX 75367-0283	
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.

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule E:  
3

**2** FILER NAME  
Zachariah C. Manning

**3** Filer ID (Ethics Commission Filers)

**4** TOTAL OF UNITEMIZED LOANS

\$6,425.00

**5** Date of loan  
02/18/2020

**7** Name of lender  out-of-state PAC (ID#: \_\_\_\_\_ )  
Zachariah Manning

**9** Loan Amount (\$)  
\$100.00

**6** Is lender a financial Institution?  
 Y  N

**8** Lender address; City; State; Zip Code  
8215 Forest Lane Dallas TX 75243

**10** Interest rate  
18

**11** Maturity date

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

**13** Employer (See Instructions)

**14** Description of Collateral  
 none

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

**16** GUARANTOR INFORMATION  
 not applicable

**17** Name of guarantor  
Zach Manning Campaign

**18** Guarantor address; City; State; Zip Code  
PO Box 670283 Dallas TX 75367-0283

**19** Amount Guaranteed (\$)  
\$100.00

**20** Principal Occupation (See Instructions)

**21** Employer (See Instructions)

Date of loan  
02/20/2020

Name of lender  out-of-state PAC (ID#: \_\_\_\_\_ )  
Zachariah Manning

Loan Amount (\$)  
\$50.00

Is lender a financial Institution?  
 Y  N

Lender address; City; State; Zip Code  
8215 Forest Lane Dallas TX 75243

Interest rate  
18

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  
 not applicable

Name of guarantor  
Zach Manning Campaign

Guarantor address; City; State; Zip Code  
PO Box 670283 Dallas TX 75367-0283

Amount Guaranteed (\$)  
\$50.00

Principal Occupation (See Instructions)

Employer (See Instructions)

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# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: 3
<b>2</b> FILER NAME Zachariah C. Manning		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$6,425.00
<b>5</b> Date of loan 02/15/2020	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Misty Manning	<b>9</b> Loan Amount (\$) \$25.70
<b>6</b> Is lender a financial Institution?  <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<b>8</b> Lender address; City; State; Zip Code 8215 Forest Lane Dallas TX 75243	<b>10</b> Interest rate 0
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral Pizza Patron for Volunteer Meeting <input type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor Zach Manning Campaign	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code PO Box 670283 Dallas TX 75367-0283	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial Institution?  <input type="checkbox"/> Y <input type="checkbox"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1	<b>2</b> FILER NAME Zachariah C. Manning	<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date 02/03/2020	<b>5</b> Payee name Texas Democratic Party				
<b>6</b> Amount (\$) \$115.00	<b>7</b> Payee address; City; State; Zip Code 1106 Lavaca Suite 100 Austin TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Other	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none; text-align:center;">Candidate / Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 02/11/2020	Payee name Host Gator				
Amount (\$) \$251.95	Payee address; City; State; Zip Code 5005 Mitchelldale Suite 100 Houston TX 77092				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Other	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none; text-align:center;">Candidate / Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date 02/11/2020	Payee name Simple Texting				
Amount (\$) \$700.00	Payee address; City; State; Zip Code 1815 Purdy Ave. Miami Beach FL 33139				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%; border:none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:40%; border:none; text-align:center;">Candidate / Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### 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.

<b>1</b> Total pages Schedule F2: 1	<b>2</b> FILER NAME Zachariah C. Manning	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b> \$0.00
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<b>5</b> Date 02/22/2020	<b>6</b> Payee name Capital Events AV Services
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<b>7</b> Amount (\$) \$3,000.00	<b>8</b> Payee address; City; State; Zip Code 2826 Stonycroft Ct Lancaster TX 75238
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) ConsultingExpense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 02/22/2020	Payee name Watson
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 123 Main St Fort Worth TX 76110
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<b>TYPE OF EXPENDITURE</b>	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) AdvertisingExpense	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	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED