

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Charles	MI J.
	NICKNAME Chuck	LAST Zubarik	SUFFIX Jr.
<b>OFFICE USE ONLY</b>			
<b>RECEIVED</b>			
APR 07 2016			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 13219 Glad Acres Drive  Farmers Branch, TX 75234		ZIP CODE
	Date Hand-delivered or Date Postmarked		Date Processed
Receipt #		Amount	
Date Imaged 4-7-16 A.P.			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Wayne	MI C.
	NICKNAME	LAST Baham	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3620 Cedar Lane		APT / SUITE #; CITY; STATE; ZIP CODE Farmers Branch, TX 75234
	AREA CODE 214	PHONE NUMBER 697-6150	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month    Day    Year 01/15/2016	THROUGH	Month    Day    Year 03/28/2016
10 ELECTION	ELECTION DATE Month    Day    Year 05/07/2016		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Farmers Branch City Council District 4

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2  
2 of 9

13 C / OH NAME Zubarik Jr., Charles (Mr.) 14 Filer ID

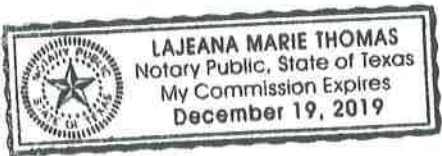
15 NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

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.

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

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,229.85
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,684.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,365.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT



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.

Charles J. Zubarik  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Charles Zubarik, this the 7 day of April, 2016, to certify which, witness my hand and seal of office.

Lajeana M. Thomas Signature of officer administering  
Lajeana M. Thomas Exec. Asst. Printed name of officer administering  
 Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Zubarik Jr., Charles (Mr.)		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,050.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,179.85
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,684.34
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/2 Rpt: 4/9
<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)		<b>3</b> Filer ID
<b>4</b> Date 01/20/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Connally Campaign Fund, Kirk	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>6</b> Contributor address; City; State; Zip Code 3612 Courtdale Dr  Dallas, TX 75234		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Connelly, Serena	Amount of Contribution (\$)  \$2,500.00
Contributor address; City; State; Zip Code 3156 Brookhollow  Dallas, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dingman, Carol L	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 13223 Glad Acres Dr  Dallas, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Steven D	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 13233 Glad Acres Dr  Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McLean III, Charles H	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 3603 Cedar Lane  Farmers Branch , TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 5/9
<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)		<b>3</b> Filer ID
<b>4</b> Date 03/14/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mendias, Michael L	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code 3105 Brookhollow Dr  Farmers Branch, TX 75234		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Penland, Mrs Robert B	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13218 Glad Acres Drive  Dallas, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Alice O	Amount of Contribution (\$) \$3,000.00
Contributor address; City; State; Zip Code 13229 Cedar Lane  Dallas, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woody, Bruce	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3415 Chaparral  Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 6/9	
<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 02/25/2016	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Christopher O	<b>8</b> Amount of contribution (\$) \$1,179.85	<b>9</b> In-kind contribution description Campaign website design, hosting, and maintenance
<b>7</b> Contributor address; City; State; Zip Code 13229 Cedar Lane  Dallas, TX 75234		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES 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: Sch: 1/3 Rpt: 7/9	<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)	<b>3</b> Filer ID
<b>4</b> Date 03/02/2016	<b>5</b> Payee name Flexpress Digital	
<b>6</b> Amount (\$) \$48.71	<b>7</b> Payee address; City; State; Zip Code 4410 Spring Valley  Dallas, TX 75244	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Magnet sign
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 03/02/2016	Payee name Flexpress Digital	
Amount (\$) \$835.69	Payee address; City; State; Zip Code 4410 Spring Valley  Dallas, TX 75244	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Yard signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 03/16/2016	Payee name Flexpress Digital	
Amount (\$) \$213.04	Payee address; City; State; Zip Code 4410 Spring Valley  Dallas, TX 75244	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 4 x 3 signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES 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: Sch: 2/3 Rpt: 8/9	<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)	<b>3</b> Filer ID
<b>4</b> Date 03/19/2016	<b>5</b> Payee name Home Depot	
<b>6</b> Amount (\$) \$14.98	<b>7</b> Payee address; City; State; Zip Code 11468 Grissom  Dallas, TX 75229	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Sign stakes
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 02/26/2016	Payee name Printing Etc.	
Amount (\$) \$131.81	Payee address; City; State; Zip Code 3141 Irving Blvd, Ste 215  Irving, TX 75247	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Business Cards
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held
Date 03/07/2016	Payee name Printing Etc.	
Amount (\$) \$10.87	Payee address; City; State; Zip Code 3141 Irving Blvd, Ste 215  Irving, TX 75247	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Tax on business cards
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought      Office held



# POLITICAL EXPENDITURES 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: Sch: 3/3 Rpt: 9/9	<b>2</b> FILER NAME Zubarik Jr., Charles (Mr.)	<b>3</b> Filer ID
--	---	-------------------

<b>4</b> Date 03/07/2016	<b>5</b> Payee name Printing Etc.
-----------------------------	--------------------------------------

<b>6</b> Amount (\$) \$1,304.75	<b>7</b> Payee address; City; State; Zip Code 3141 Irving Blvd, Ste 215  Irving, TX 75247
------------------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Door hangers
---------------------------------	--	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 03/14/2016	Payee name Printing Etc.
--------------------	-----------------------------

Amount (\$) \$124.49	Payee address; City; State; Zip Code 3141 Irving Blvd, Ste 215  Irving, TX 75247
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Post it notes
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------