## STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT

# FORM SC C/OH COVER SHEET PG 1

			T Files ID		Total mariae fil	- d.				
The SC C/OH Instruction G	Guide explains how to complete	this form.	1 Filer ID (Ethics Commission Filers) 00086488		<ul><li>2 Total pages filed:</li><li>8</li></ul>					
3 CANDIDATE	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY				
NAME		Jennifer			Date Received					
					ELECTRONICA	U V EII ED				
						ALLY FILED				
	NICKNAME	LAST		SUFFIX	01/12/2025					
		Stoddard Ha	ajdu							
					Date Hand-delivered or	Date Postmarked				
4 CANDIDATE	ADDRESS / PO BOX; APT	Γ/SUITE#; C	CITY; STATE; ZIP COD	E						
ADDRESS	6805 Sedgwick Drive				Receipt #	Amount				
Change of Address	Dallas, TX 75231				Date Processed					
Clidinge of Address										
					Date Imaged					
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST			MI					
NAME		Doug								
	NICKNAME	LAST			SUFFIX					
		Deason								
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOY DI EASE)	ADT / SHITE #	CITY;	STATE;	ZIP CODE				
TREASURER	•	J BOX F LLAGE,	), AFT/ JUIL #,	CITT,	JIAIL,	ZIF CODE				
ADDRESS	3953 Maple Avenue									
(Residence or Business)	Suite 150									
	Dallas, TX 75219									
7 CAMPAIGN	AREA CODE	PHONE N	NUMBER		EXTENSION					
TREASURER PHONE	(214) 773-8177									
PHONE										
8 REPORT TYPE	X January 15	30th da	y before convention / electio	on [	Runoff					
			,	ı						
	July 15	8th day	before convention / election	n [	Final report (A	ttach SC C/OH-FR)				
9 PERIOD	Month Day Y	′ear			Month D	oay Year				
COVERED	07/01/2024		THROUGH		12/3	1/2024				
10 CONVENTION /	Month Day Y	'ear	11 OFFICE		STATE CHAI					
ELECTION DATE			SOUGHT		COUNTY CH					
					L COOM I CIT	AIR				
12 POLITICAL	Republican		COUN	ITY (If Applica	able)					
PARTY										
		00	TO DAGE 0							
	GO TO PAGE 2									

#### STATE / COUNTY CHAIR CAMPAIGN FINANCE REPORT: SUPPORT & TOTALS

# FORM SC C/OH COVER SHEET PG 2

2 of 8

13 CANDIDATE NAME	(Ethics Commissi	on Filers)								
15 NOTICE FROM POLITICAL COMMITTEE(S)	mittees to support the candidate. <i>The</i> ndidates are required to report this in									
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME								
radiaona ragos	GENERAL									
		COMMITTEE ADDRESS								
SPECIFIC SPECIFIC										
	COMMITTEE CAMPAIGN TREASURER NAME									
		COMMITTEE CAMPAIGN TREASU	RER ADDRESS							
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS ES OF LOANS, OR CONTRIBUTION		\$	0.00					
		<b>AL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANTE	ES OF LOANS)	\$	0.00					
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00						
	4. TOTAL POLITICAL EXPENDITURES									
CONTRIBUTION BALANCE	5. TOTAL POLITIC. REPORTING PE	AS OF THE LAST DAY OF THE	\$	0.00						
OUTSTANDING LOAN TOTALS										
<b>17</b> AFFADAVIT			under penalty of perjury, that the aco and includes all information required t ection Code.							
			Jennifer Stoddard Hajdu							
			Signature of Candidate							
AFFIX NOT	TARY STAMP / SEAL ABO	OVE								
Sworn to and subsc	cribed before me, by the sa	aid	, this the	da	y					
of	, 20, to ce	rtify which, witness my hand and sea	ll of office.							
Signature of office	eer administering oath	Printed name of officer adminis	tering oath Title of office	r administering oa	nth					

### SUBTOTALS - SC C/OH

# FORM SC C/OH COVER SHEET PG 3

		3 of 8						
18 CANDIDATE NAME Stoddard Hajdu, Jennifer	<b>19</b> Filer ID 00086488	(Ethics Commission Filers)						
20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT							
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTION	. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS							
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICA	L CONTRIBUTIONS	\$						
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
4. SCHEDULE E: LOANS		\$						
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM PO	DLITICAL CONTRIBUTIONS	\$ 7,220.00						
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM	POLITICAL CONTRIBUTIONS	\$						
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CA	ARD	\$						
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PE	RSONAL FUNDS	\$						
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIB	UTIONS TO A BUSINESS OF C/OH	\$						
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM	POLITICAL CONTRIBUTIONS	\$						
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS	5, AND CONTRIBUTIONS RETURNED	\$						

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/5 Rpt: 4/8	Stoddard Hajdu, Jennifer 00086488
4	Date	5 Payee name
	07/02/2024	BancCard of America
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.50	7347 Charlotte Pike
		Nashville, TN 37209
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  ACH Debit Fee
		Non Belli CC
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	<u> </u>	
	Date	Payee name
	08/02/2024	BancCard of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.50	7347 Charlotte Pike
		Nashville, TN 37209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  ACH Debit Fee
		Non Belli CC
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/03/2024	BancCard of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.50	7347 Charlotte Pike
		Nashville, TN 37209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		ACH Debit Fee
_	Operation ONE VIII II	Orandidate (Office leaded as a sure
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	
L		

### 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	<u> </u>							
	Sch: 2/5 Rpt: 5/8	Stoddard Hajdu, Jennifer 00086488							
4	Date	5 Payee name							
	10/02/2024	BancCard of America							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$17.50	7347 Charlotte Pike							
		Nashville, TN 37209							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense							
		Banck Fee							
_	Opening ONLY if allowed	One district Office health are recorded.							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	11/04/2024	BancCard of America							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$17.50	7347 Charlotte Pike							
		Nashville, TN 37209							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.							
	LAPENDITORE	Check if Austin, TX, officeholder living expense							
		ACH Debit Fee							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	12/02/2024	BancCard of America							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$17.50	7347 Charlotte Pike							
		Nashville, TN 37209							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Fees Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		ACH Debit Fee							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	experience to beliefft C/OI	<b>'</b>							

# 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 Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	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 ab Credit Card Payment					
	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 3/5 Rpt: 6/8	Stoddard Hajdu, Jennifer 00086488				
4	Date	5 Payee name				
	07/25/2024	Dallas County Republicans United PAC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
•	\$5,000.00	6805 Sedgwick Drive				
	40,000.00	cood coagnist 2 mo				
		Dollar TV 75221				
		Dallas, TX 75231				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Contribution to Political PAC				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
•	expenditure to benefit C/OI					
	Data					
	Date	Payee name				
	08/30/2024	Oakwood Bank				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$15.00	8411 Preston Road				
		Suit 106				
		Dallas, TX 75225				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	LXI LINDITORL	Check if Austin, TX, officeholder living expense				
		Bank Fee				
	0 1: 0 1: 0					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	<u> </u>					
	Date	Payee name				
	09/30/2024	Oakwood Bank				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$15.00	8411 Preston Road				
		Suit 106				
		Dallas, TX 75225				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITORE	Check if Austin, TX, officeholder living expense				
		Bank Fee				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	experiencies to benefit C/OI	<u> </u>				

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction Gu	Sala		iges	/Contract Labor		OTHER (ent		ategory not listed above)
_	Tatal as a constitute E4.	1_	EU ED MANAE						1_	Eller ID		(Ethina Camminaina Eilana)
1	Total pages Schedule F1:	2							3	Filer ID		(Ethics Commission Filers)
	Sch: 4/5 Rpt: 7/8		Stoddard Ha	ajdu, Jennifer						0008648	38	
4	Date	5	Payee name									
	10/31/2024		Oakwood Ba	ank								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	o Cod	le					
	\$15.00		8411 Presto	n Road								
			Suit 106									
				,E33E								
Ļ		_	Dallas, TX 7	5225								
8	PURPOSE OF	(a)	,	e Categories listed at th	ne top of this schedule)	) [(	b)	Description				
	EXPENDITURE		Fees					Check if travel of Check if Austin				ete Schedule T.
								Bank Fee	, 17,	oniceriolaer i	iving c	хрепас
								Daimer 00				
_	Commission ONLLY if disposit	<u> </u>	Condidate/Offi		Office		la 4			Office	اماء	<b>.</b>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	Οπισε	soug	nt			Office	e nei	
		_										
	Date		Payee name									
	11/29/2024		Oakwood B	ank								
	Amount (\$)		Payee addres	ss; City;	State; Zip	o Cod	le					
	\$15.00		8411 Presto	n Road								
			Suit 106									
			Dallas, TX 7	75225								
		_				1,						
	PURPOSE OF	(a)		e Categories listed at the	ne top of this schedule)	) [	b)	Description	outo:	do of Toyon (	Camal	oto Cobodulo T
	EXPENDITURE		Fees					Check if traver				ete Schedule T.
								Bank Fee	,,		9	.,,
_	Complete ONLY if direct			ceholder name	Office	soug	ht			Office	- heli	<u> </u>
	expenditure to benefit C/OI		Janara actor Onn	soriolaer riame	011100	ooug				Omo	5 1101	
		_										
	Date		Payee name									
	12/31/2024		Oakwood B	ank 								
	Amount (\$)		Payee addres	ss; City;	State; Zip	o Cod	le					
	\$15.00		8411 Presto	n Road								
			Suit 106									
			Dallas, TX 7	'5225								
	PURPOSE	(a)				. 1	h)	Description				
	OF	(۳)	Fees	e Categories listed at th	ne top of this schedule)	)	,	Check if travel	outsi	de of Texas. (	Compl	ete Schedule T.
	EXPENDITURE		1 003					Check if Austin				
								Bank Fee				
	Complete ONLY if direct	_		ceholder name	Office	soug	ht			Office	e hel	d
	expenditure to benefit C/OI					3						

# 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 Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Git/Awards/Memorials in Legal Services  The Instruction Gu	Sa		ages	Contract Labor		OTHER (ente		gory not listed above)
1	Total pages Schedule F1:	12	THED NAME		-		_	1	3	Filer ID	/E1	thics Commission Filers)
1	Sch: 5/5 Rpt: 8/8			ajdu, Jennifer						00086488	•	ulics Collinission Filers)
_	<u> </u>	<u> </u>										
4	Date	5	Payee name									
	07/31/2024		Oakwood Ba	ank 								
6	Amount (\$)	7	Payee addres	s; City;	State; Z	ip Cod	le					
	\$15.00		8411 Presto	n Road								
			Suit 106									
			Dallas, TX 7	5225								
8	PURPOSE	(a)					'h)	Description				
ľ	OF	(۳)	Fees	e Categories listed at th	e top of this schedule	le)	,	Check if travel of	outsio	de of Texas. C	omplete	Schedule T.
	EXPENDITURE		1-663					Check if Austin,				
								Bank Fee				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Offic	ce soug	ht			Office	held	
	experiulture to beliefit C/Oi	1										
	Date		Payee name									
	12/03/2024		Stoddard La	w, PLLC								
	Amount (\$)		Payee addres	s; City;	State; Z	ip Cod	le					
	\$2,025.00		5310 Harves	st Hill Road								
			Suite 229									
			Dallas, TX 7	5230								
	PURPOSE	(a)		e Categories listed at th	o top of this schodul	(a)	(b)	Description				
	OF	``	Legal Servic		e top of this scrieduli	le)	,	Check if travel of	outsio	de of Texas. C	omplete	Schedule T.
	EXPENDITURE		Legal Servic	.03				Check if Austin,	, TX,	officeholder liv	ing expe	ense
								Legal Fees				
	Complete ONLY if direct		Candidate/Offic	eholder name	Offic	ce soug	ht			Office	held	
	expenditure to benefit C/OI	Н										