

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME
Harry "Dale" Clark

15 ACCOUNT # (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.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

DFW Conservative Voters PAC

COMMITTEE ADDRESS

PO Box 173065 Arlington, TX 76003

COMMITTEE CAMPAIGN TREASURER NAME

Stuart Lane

COMMITTEE CAMPAIGN TREASURER ADDRESS

NA

FILED
TARRANT COUNTY
2014 JUL 14 PM 3:51
ELECTIONS ADMINISTRATION
RY:

additional pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 50.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 10,860.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 1,223.86

4. TOTAL POLITICAL EXPENDITURES \$ 10,820.02

**CONTRIBUTION
BALANCE**

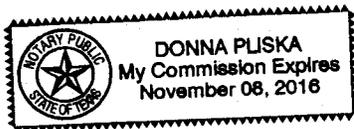
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 39.98

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ -0-

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.



Harry Dale Clark
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Harry "Dale" Clark, this the 14th day of July, 20 14, to certify which, witness my hand and seal of office.

Donna Pliska
Signature of officer administering oath

Donna Pliska
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Harry "Dale" Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/27/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark 6 Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	7 Amount of contribution (\$) \$275.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable) TARRANT COUNTY 2014 JUL 11 ELECTORICS STEVE LAND FOR
9 Principal occupation / Job title (See Instructions) Retired Police Officer		10 Employer (See Instructions)	
Date 11/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions)	
Date 11/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions)	
Date 12/6/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	Amount of contribution (\$) \$2,500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions)	
Date 12/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	Amount of contribution (\$) \$3,000.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Police Officer		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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Harry "Dale" Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/28/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Retired Police Officer		10 Employer (See Instructions)	
Date 1/20/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest E. Reynolds, III	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 314 Main St., Ste 300, Fort Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)	
Date 2/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thanh T. Ha	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4045 East Belknap St., Ste 11, Fort Worth TX 76111		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions)	
Date 2/28/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions)	
Date 6/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvin D. Smith	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7600 Douglas Lane, North Richland Hills, TX 76182		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Property home landlord		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Harry "Dale" Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/13/2012	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark 6 Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	7 Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired Police Officer		10 Employer (See Instructions)	
Date 6/13/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack O. Lewis Contributor address; City; State; Zip Code 4600 Sabelle Haltom City, TX 76117	Amount of contribution (\$) \$35.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Quality Control Mgr. - Howe, Ind.		Employer (See Instructions)	
Date 6/22/2012	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry D. Clark Contributor address; City; State; Zip Code 3208 Haltom Rd. Haltom City, TX 76117	Amount of contribution (\$) \$1,000.00 <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired Police Officer		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
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.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B:	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨			\$
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (if applicable)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

FILED
 TARRANT COUNTY
 2011 JUL 14 PM 5:28
 STEVEN A. HARRIS
 CLERK OF COUNTY CLERK

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

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

FILED
 TARRANT COUNTY
 20 JUL 11 PM 3:52
 STATE ETHICS COMMISSION
 ELECTORAL DIVISION

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

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11/8/2011	5 Payee name Wells Fargo Bank	
6 Amount (\$) \$121.97	7 Payee address; City; State; Zip Code 5604 Broadway, Haltom City, TX 76117	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Banking expense	(b) Description (If travel outside of Texas, complete Schedule T) Checkbook
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/15/2011	Payee name Arturo Camacho	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5612 Bonner Drive, Haltom City, Tx 76148	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign management	Description (If travel outside of Texas, complete Schedule T) Treasurer Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/30/2011	Payee name Watkins Printing	
Amount (\$) \$218.67	Payee address; City; State; Zip Code 3232 Friendly Lane, Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Business cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/23/2011	Payee name Becky Tate	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 633 Reed St., Roanoke, TX 76262	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Website detailing
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

FILED
 TARRANT COUNTY
 2011 JUL 14 PM 3:52
 ELECTIONS ADMINISTRATION
 BY:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Harry D. Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12/9/2011		5 Payee name Lil' Angels Photography (W. Kemper)			
6 Amount (\$) \$35.00		7 Payee address; City; State; Zip Code 3309 Winthrop Ave., Ft. Worth, TX 76116			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) Photos for campaign flier	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/15/2011		Payee name Arturo Camacho			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 5612 Bonner Drive, Haltom City, Tx 76148			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Campaign management		Description (If travel outside of Texas, complete Schedule T) Treasurer Expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/5/2012		Payee name Tarrant County GOP			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 2405 Gravel Rd., Fort Worth, TX 76118			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) Campaign table kiosk-NRH straw poll	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/17/2012		Payee name Arturo Camacho			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 5612 Bonner Dr., Haltom City, TX 76148			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Campaign management		Description (If travel outside of Texas, complete Schedule T) Treasurer expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1/28/2012	5 Payee name Staples	
6 Amount (\$) \$251.01	7 Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Stock paper, printing ink
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/31/2012	Payee name Tarrant County GOP	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 2405 Gravel Rd., Fort Worth, TX 76118	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description (If travel outside of Texas, complete Schedule T) Campaign table kiosk - Pct. Convention
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/31/2012	Payee name Trueprint, USA	
Amount (\$) \$323.67	Payee address; City; State; Zip Code 3301 Cleburne Road, Fort Worth, TX 76110	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign brochure
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/1/2012	Payee name Hightechgrafix	
Amount (\$) \$116.91	Payee address; City; State; Zip Code 8749 Bedford-Euless Road, Hurst, TX 76053	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Yard signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT# (Ethics Commission Filer)
4 Date 2/6/2012	5 Payee name Staples	
6 Amount (\$) \$30.40	7 Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Printing ink
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/7/2012	Payee name U.S. Postal Service	
Amount (\$) \$36.00	Payee address; City; State; Zip Code 5709 Broadway, Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Mailing expense	Description (If travel outside of Texas, complete Schedule T) Stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/13/2012	Payee name Sign Idea	
Amount (\$) \$389.70	Payee address; City; State; Zip Code 3012 NE 28th St., Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Magnetic signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/15/2012	Payee name Arturo Camacho	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5612 Bonner Dr., Haltom City, TX 76148	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign management	Description (If travel outside of Texas, complete Schedule T) Treasurer expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filer)
4 Date 2/15/2012	5 Payee name ATT	
6 Amount (\$) \$280.34	7 Payee address; City; State; Zip Code 6600 North Fwy, Ste 120, Ft. Worth, TX 76137	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Campaign Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign cell phone
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/27/2012	Payee name U.S. Postal Service	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 5709 Broadway Ave., Haltom City, Tx 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Mailing expense	Description (If travel outside of Texas, complete Schedule T) P.O. Box Rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/9/2012	Payee name Radio Shack	
Amount (\$) \$95.24	Payee address; City; State; Zip Code 3901 East Belknap, Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign Expense	Description (If travel outside of Texas, complete Schedule T) Cell phone "Bluetooth"
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/15/2012	Payee name Arturo Camacho	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5612 Bonner Dr., Haltom City, TX 76148	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign management	Description (If travel outside of Texas, complete Schedule T) Treasurer expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/26/2012	5 Payee name Staples	
6 Amount (\$) \$256.35	7 Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Stock paper, printing ink
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/5/2012	Payee name Tarrant County GOP	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2405 Gravel Drive, Fort Worth, TX 76118	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event expense	Description (If travel outside of Texas, complete Schedule T) State delegate (9) Conv. - table kiosk
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/11/2012	Payee name Hightechgrafix	
Amount (\$) \$882.25	Payee address; City; State; Zip Code 8749 Bedford-Eules Rd., Hurst, TX 76053	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Tri-fold mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/16/2012	Payee name Arturo Camacho	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5612 Bonner Dr., Haltom City, TX 76148	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign management	Description (If travel outside of Texas, complete Schedule T) Treasurer expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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 TARRANT COUNTY
 APR 14 11 52 AM
 STEPHEN R. HANCOCK
 CLERK

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/17/2012	5 Payee name Hightechgrafix	
6 Amount (\$) \$135.31	7 Payee address; City; State; Zip Code 8749 Bedford-Eules Rd., Hurst, TX 76053	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) Additional tri-fold mailers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/18/2012	Payee name Watkins Printing	
Amount (\$) \$1342.92	Payee address; City; State; Zip Code 3232 Friendly Lane, Haltom City, Tx 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) 4' x 4' and 2' x 4' signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/20/2012	Payee name Staples	
Amount (\$) \$131.90	Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Stock paper, printing ink
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/25/2012	Payee name Fort Worth Hispanic Chamber of Commerce	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1327 North Main St., Haltom City, TX 76164	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Mailing expense	Description (If travel outside of Texas, complete Schedule T) Mailing list labels
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Harry D. Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/15/2012		5 Payee name Arturo Camacho			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 5612 Bonner Dr., Haltom City, TX 76148			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Campaign management		(b) Description (If travel outside of Texas, complete Schedule T) Treasurer expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 5/16/2012		Payee name Teacher's Tools			
Amount (\$) \$166.23		Payee address; City; State; Zip Code 9982 Grapevine Hwy., Hurst, TX 76054			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Mailing expense		Description (If travel outside of Texas, complete Schedule T) Brochure supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 5/23/2012		Payee name Staples			
Amount (\$) \$34.68		Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Stock paper, printing ink	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 5/24/2012		Payee name U.S. Postal Service			
Amount (\$) \$450.00		Payee address; City; State; Zip Code 5709 Broadway Ave., Haltom City, TX 76117			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Mailing expense		Description (If travel outside of Texas, complete Schedule T) Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10		2 FILER NAME Harry D. Clark		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/11/2012		5 Payee name Staples			
6 Amount (\$) \$41.35		7 Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) Envelopes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/15/2012		Payee name Arturo Camacho			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 5612 Bonner Drive, Haltom City, Tx 76148			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Campaign management		Description (If travel outside of Texas, complete Schedule T) Treasurer Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/19/2012		Payee name Hightechgrafix			
Amount (\$) \$81.19		Payee address; City; State; Zip Code 8749 Bedford-Euleless Rd., Hurst, TX 76053			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Additional mailers for runoff	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/28/2012		Payee name Johnsons Press			
Amount (\$) \$2543.44		Payee address; City; State; Zip Code 3300 S. Freeway, Fort Worth, TX 76110			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Mailing/printing expense		Description (If travel outside of Texas, complete Schedule T) Printing/postage/mailing of mailers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 10	2 FILER NAME Harry D. Clark	3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/13/2012	5 Payee name Saigon Dallas Media, LLC		
6 Amount (\$) \$768.00	7 Payee address; City; State; Zip Code 10935 Estate Lane, #180, Dallas, TX 75238		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Media advertisement	(b) Description (If travel outside of Texas, complete Schedule T) Radio advertisement	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date 7/15/2012	Payee name Arturo Camacho		
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5612 Bonner Drive, Haltom City, Tx 76148		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Campaign management	Description (If travel outside of Texas, complete Schedule T) Treasurer Expense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date 7/18/2012	Payee name Staples		
Amount (\$) \$216.49	Payee address; City; State; Zip Code 6201 NE Loop 820, North Richland Hills, TX 76101		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Brochure material, mailers, misc.	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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 STEVE KAPLAN
 ELECTIONS ADMINISTRATOR
 BY:

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PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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 TARRANT COUNTY
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 BY:

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

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 STEVE RAZOR
 ELECTIONS ADMINISTRATOR

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INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

8

Amount (\$)

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SILVE ANADOLU
ELECTIONS ADMINISTRATOR

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

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IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form. 1 Total pages Schedule T:

2 FILER NAME 3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

6 Dates of travel	7 Name of person(s) traveling
	8 Departure city or name of departure location
	9 Destination city or name of destination location

10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:
 Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation Purpose of travel (including name of conference, seminar, or other event)

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STATE ELECTIONS ADMINISTRATOR

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
-- Complete only if "Report Type" on page 1 is marked "Final Report" --

1 C/OH NAME

2 ACCOUNT # (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

-- Complete this section only if you are an officeholder --

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder