CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this fo	rm. 1 Filer ID		2 Total pages filed: 10
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRS Sha NICKNAME LAS	ren T	MI	OFFICE USE ONLY Date Receiped LECTIONS FRANK FRANK TARRA
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUIT		ZIP CODE	Date Hand-delivered a Mate Podmarked Receipt # SS Amount Date Professed Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRS Ma NICKNAME LAST	rk	MI SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX I		T / SUITE #; CITY;	STATE; ZIP CODE
8 REPORT TYPE		th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2015	THROUGH	Month Day 06/30/2015	Year 5
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	Primary X General	ELECTION TYPE Runoff Special	Other
11 OFFICE	OFFICE HELD (if any) Criminal District Attorney District	t Tarrant Cty	12 OFFICE SOUGHT	(if known)
	nyas Ethias Commission	GO TO PAGE 2		Varsion VI 0 2773

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

					2 of 10
13 C / OH NAME	Wilson, Sharen		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without of officeholders are required to report this information	the candidate's or of	ficeholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	l [*]		7 A
	GENERAL				ARRA
		COMMITTEE ADDRESS		で美し	
	SPECIFIC			PHILLIPS ADMINISTRATOR	500 ED
i .		COMMITTEE CAMPAIGN TREASURER NAME		TOR	5 4
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00
	2. TOTAL POLITIC (OTHER THAN F	\$	500.00		
EXPENDITURE TOTALS	3. TOTAL POLITIC	\$	415.24		
·	4. TOTAL POLITIC	\$	13,712.73		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	12,607.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFADAVIT	TONYA BLAKESLEY Notary Public, State of Te My Commission Expire July 20, 2016	Fall		d to be reporte	
	cribed before me, by the so	Change () to	, this the	14th	day
Signature of offi	cer administering	Printed Name of officer administering	Title of offi	cer administeri	ng oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 10
18 FILER NA Wilson, S		19 Filer ID		
20 SCHEDUL NAME OF		SUE	BTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	500.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	13,712.73
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
10.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
11.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	
			ELECTIONS ADMINISTRATOR	

MONET	ARY POLITICAL CONTRIBUTION	ONS			SCHEDULE	A1
The Instruc	tion Guide explains how to complete this form	1.	1			
			3	Filer ID		
	McDonald Sanders PC	7	Amount of	f Contribution (\$)	\$500.00	
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	is)			
					 	
	The Instruction of the Instructi	The Instruction Guide explains how to complete this form FILER NAME Milson, Sharen Date 5 Full name of contributor out-of-state PAC (ID# McDonald Sanders PC 6 Contributor address; City; State; Zip Code 777 Main Street, Ste #1300 Fort Worth, TX 76102 Principal occupation / Job title (See Instructions)	Mison, Sharen Date 35 Full name of contributor out-of-state PAC (ID#:	The Instruction Guide explains how to complete this form. Comparison Compariso	The Instruction Guide explains how to complete this form. 1 Total page	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/10

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.	ter a category not listed a	above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
	Sch: 1/6 Rpt: 5/10	Wilson, Sharen		
4	Date	5 Payee name		
L	05/06/2015	Alliance for Children		
6	Amount (\$)	7 Payee address; City; State; Zip Code	, E 2)
	\$1,500.00	908 Southland Ave	ZOIS ELEC	Ā
l		·	2015 JUL	. R
L		Fort Worth, TX 76104	- 55€ C	
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. Check if Austin, TX, officeholder		200
1		Contribution	STF	; ;
			χ ₁ :	COUNTY
9	Complete ONLY if direct		held 🕏	,
L	expenditure to benefit C/O	1		
Γ	Date	Payee name		
	01/12/2015	Chip Pierce Photography		
Г	Amount (\$)	Payee address; City; State; Zip Code		
	\$775.00	1608 Steinburg Lane		
ĺ				
		Fort Worth, TX 76134		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Event Expense Check if travel outside of Texas. C		
		Photography Oath Cerem	l,	
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held	
L	expenditure to benefit C/OI	1		
Г	Date	Payee name		
	02/26/2015	Fort Worth Chamber of Commerce		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$150.00	777 Taylor St, Ste 900	in the state of th	
L		Fort Worth, TX 76102	-	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Fees Check if travel outside of Texas. C		
l		Tarrant County day State		
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held	
L	expenditure to benefit C/OI	1		
Г				
ŀ				

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Travel in District Office Overhead/Rental Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 2/6 Rpt: 6/10 Wilson, Sharen 4 Date Payee name 02/24/2015 Isom, Cheryl Amount (\$) Payee address; City; State; Zip Code \$170.00 113 View Point Court Aledo, TX 76008 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimburse State Bar of Texas CLE application fee for CDA offce Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/06/2015 Laser Graphic Press Co Amount (\$) Payee address; City; State; Zip Code \$167.79 5352 Wedgmont Cir N Fort Worth, TX 76133 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Printing Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/20/2015 Lili's Bistro Amount (\$) Payee address; State; Zip Code \$215.00 1310 W. Magnolia Ave Fort Worth, TX 76104 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.28029

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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 Sch: 3/6 Rpt: 7/10 Wilson, Sharen Date Payee name 04/08/2015 Name Tag Country 6 Amount (\$) Payee address; State; Zip Code PO Box 15068 \$1,120.14 Chattanooga, TN 37405 **PURPOSE** 8 (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Co Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Desk name plates for CDA office staff Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 05/04/2015 Pappadeaux Seafood Restaurant Payee address; City; Amount (\$) State; Zip Code \$149.00 1304 Copeland Rd Arlingto, TX 76011 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense EXPENDITURE Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/01/2015 SH Media, LLC Payee address; State; Zip Code City; Amount (\$) \$1,200.00 1 Red Bluff Ct Mansfield, TX 76063 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Contract Labor semi-annual social media Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/f	Political Committee	Legal Services The Instruction Guide e			his form.	OTHER (en	ter a category not	listed abov	∕e)
1 Total pages Schedule Sch: 4/6 Rpt: 8/1						3 Filer ID			
4 Date 06/21/2015	5 Payee nam SH Media								
6 Amount (\$) \$1,500		-	State; Zip C	ode					
8 PURPOSE OF EXPENDITURE		See Categories listed at the to Vages/Contract Labo		(b)	Check if Austi	I outside of Texas. n, TX, officeholder DOT SEMI-ANN	living expense		
Complete ONLY if dire expenditure to benefit		fficeholder name	Office so	ught		Office	e held		
Date 02/06/2015 Amount (\$) \$180	Payee addr	nergy Expo	State; Zip C	ode					
		ı, TX 76196						:	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	p of this schedule)	(ф)	므	l outside of Texas. n, TX, officeholder l nty Expo exh	iving expense		DA office
Complete ONLY if dire expenditure to benefit		fficeholder name	Office so	ught		Office	meld CTF)r 5102	TARR
Date 04/07/2015	Payee nam Square Ev	e rent Technologies					S AD	-	AF
Amount (\$) \$2,258.	Payee addr 10 901 Termi	ess; City; al Rd, Ste 600	State; Zip C	ode			LLIPS	PH 2:	COUNT
	Fort Worth	, TX 76106					OR.	0	- <
PURPOSE OF EXPENDITURE	(a) Category (Event Exp	See Categories listed at the topenSe	p of this schedule)	(b)		outside of Texas, on, TX, officeholder I	iving expense	eT.	
Complete ONLY if dire expenditure to benefit		ficeholder name	Office so	<u>I</u> ught		Office	e held		
	-							:	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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.								
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID						
Sch: 5/6 Rpt: 9/10	Wilson, Sharen							
4 Date	5 Payee name							
04/22/2015	Starbucks							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$165.86	141 W. 3rd St	TAI 2015 ELEC						
		TARRA 2015 JUL FRA BY:						
	Fort Worth, TX 76102	Description Check if travel outside of Texas. Complete State Check if Austin, TX, officeholder living experience Gift cards for CDA office staff						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description > = = =						
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Selectule 1.						
		Check if Austin, TX, officeholder living experience Gift cards for CDA office staff						
		Silicalus III CDA VIII CBA VII						
9 Complete ONLY if direct	Candidate/Officeholder name Office sought							
expenditure to benefit C/O		2						
Date	Payee name							
03/15/2015	Tarrant County Jr Livestock Association							
Amount (\$)	Payee address; City; State; Zip Code	<u> </u>						
\$250.00	1923 Lost Creek Dr							
Ψ230.00	1929 1931 61631 51							
	Arlington, TX 76006							
PURPOSE		Description						
OF	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense						
	·	Contribution						
On the Other Kinds	0	Office held						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held						
Date	Payee name							
01/17/2015	Tarrany County GOP							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,500.00	2405 Gravel Dr							
	F-4346-45-77/70440							
	Fort Worth, TX 76118							
PURPOSE OF	the state of the s	Description Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense						
		Lincoln Day dinner tickets, membership						
	·							
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
expenditure to benefit C/O	Н							
	H							

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made B Candidate/Officeholder/Politica		Gift/Awards/Memorials E Legal Services	xpense Prin Sala	ting Expens	e /Contract Labor		t of District enter a category no	ot listed abo	ove)
			The Instruction Guide	explains how to	complete t	his form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID			
1	Sch: 6/6 Rpt: 10/10	Wilson, Sh	aren							
4	Date	5 Payee name	>				•			
	06/01/2015	The Fort V	orth Club							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip	Code					
	\$996.60	307 W. 7th	St							
		Fort Worth	, TX 76102							
8	PURPOSE	(a) Category (See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe	ense			느		s. Complete Sched	ule T.	
						Lawyer even	n, TX, officeholde it	er living expense		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office	sought		Offi	ce held		
	expenditure to benefit C/O	H ·								
	Date	Payee name)							
	03/15/2015	USS Fort \	Worth Commission	ing Support C	ommitte	ee				
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$1,000.00	PO Box 24	6							
		Fort Worth	, TX 76101							
	PURPOSE	(a) Category (s	See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees					outside of Texas a, TX, officeholde	s. Complete Sched	ule T.	
						Dues	i, 1A, onicenoide	i iiving expense		
_	Complete ONLY if direct		ficeholder name	Office	sought		Offi	ce held		
	expenditure to benefit C/O	Н								
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							I		<u>C.</u>	FILED ARRANT COUNTY
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								FRANK PHILLIPS CTIONS ADMINISTRATOR	5 JUL 14 PM 2: 10	~<
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