# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

# FORM C/OH COVER SHEET PG 1

The	The C/OH INSTRUCTION GUIDE explains how to complete this form.  1 ACCOUNT # (Ethics Commission fillers) 00012345				2 PAGE # 1 of 32			
	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST		MI		GOFFICE U	SE-QNLY	
	NAME	Mr. Roy Charle	es			Date Received	discount Services	
		NICKNAME LAST Brooks		SUF	FIX	SIEVE PM PM		
N	CANDIDATE / DFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE; ZIP	CODE	Date Hand-delivered	a 59	
	Change of Address					īgs	52	
5 (	CAMPAIGN	MS / MRS / MR FIRST		MI		Receipt #	Amount	
T	TREASURER NAME	Ms. Norma				Date Processed  Date Imaged		
ļ '	V/ MVICE	NICKNAME LAST		SUF	 FIX	Date imaged		
		Roby						
7	CAMPAIGN TREASURER ADDRESS Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STA	TE;	ZIP CODE		
7	CAMPAIGN FREASURER PHONE	AREA CODE PHONE NUMBER		EXTENSION				
8 F	REPORT TYPE	X January 15 30th day bet	fore election	Runoff		15th day after cappointment (of	ampaign treasurer ficeholder only)	
		July 15 8th day befo	ore election	Exceeded \$50	00 limit	Final report (Att	ach C/OH - FR)	
9 F	PERIOD COVERED	Month Day Year		Month	Day	Year		
		07/01/2013	THROUGH	12	2/31/201	3		
10 E	ELECTION	ELECTION DATE ELEC  Month Day Year	CTION TYPE Primary	Runoff		General	Special	
11 (	OFFICE	OFFICE HELD (if any)  Commissioner Pct.	1	12 OFFICE SOUGH	HT (if known)		4.	
	GO TO PAGE 2							

## **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME Brook	s, Roy Charles (Mr	-)	14 ACCOUNT 00012345	
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca out the candidate's or officeholder's knowledge or consent. Candidat y receive notice of such expenditures		
POLITICAL COMMITTEE TYPE COMMITTEE NAME			· ·	E 20 T
	GENERAL	COMMITTEE ADDRESS	<del></del>	TO SEE TO
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	A STATE OF THE STA	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
additional pages	:	COMMITTEE CAMPAIGN TREASURER ADDRESS	The state of the s	AM 9: 52
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	45,600.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS			\$	2,797.85
	4. TOTAL I	POLITICAL EXPENDITURES	\$	30,535.09
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	47,702.97
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD	\$	0.00
AFFIX NOTARY S	JEANETTE MARTINE Y COMMISSION EXPIR January 28, 2017	Signature of C	all information rele.	equired to be reported by
) \		ne said Roy Charle's Brooks tify which, witness my hand and seal of office.	, this the	day
Signature of officer admi	nistering oath	Print name of officer administering oath	Notary Title of officer a	Public administering oath

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1	8 Report: 3/32
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Alley, Gerald (Mr.)	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/30/2013	6 Contributor address; City; State; Zip Code 1900 Ballpark Way, Suite 110 Arlington, TX 76006		\$1,000.00	TARRE Complete Scheduler T
				(ii traver outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Con-Real	structions)	DE C
	Date	Full name of contributor  out-of-state PAC (ID# Austin, Jim and Gloria (Mr. and Mrs.)	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/03/2013	Contributor address; City; State; Zip Code 2017 Teakwood Fort Worth, TX 76112		\$150.00	0 0 2 1
		*		(If travel outside of	Texas, complete Schedule T)
_	Principal assura	sation / Joh title (See Instructions)	Employer (See In		, , , , , , , , , , , , , , , , , , , ,
		eation / Job title (See Instructions)		,	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/05/2013	Contributor address; City; State; Zip Code 103 Parker Ridge Road Palmer, TX 75152		\$1,000.00	1 
				(If travel outside of	Texas, complete Schedule T)
-	Principal accur	pation / Joh title (See Instructions)	Employer (See In		
	rincipal occup	eation / Job title (See Instructions)	Five Star Corre		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/01/2013	Contributor address; City; State; Zip Code 3100 W. 7th Street, Suite 200 Fort Worth, TX 76107		\$150.00	1 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/24/2013	Contributor address; City; State; Zip Code 3701 Black Canyon Road Fort Worth, TX 76109		\$300.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	L .	

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/	18 Report: 4/32
2 FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bass, Edward (Mr.)	<del>;</del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/31/2013	6 Contributor address; City; State; Zip Code 201 Main Street Suite 2700 Fort Worth, TX 76102		\$5,000.00	Texas, periplete sanedule 1)
<u> </u>		E		
9 Principal occup Owner	pation / Job title (See Instructions)	10 Employer (See In Bass Company		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution Codescription (if applicable)
08/26/2013	Contributor address; City; State; Zip Code 5705 Azteca Drive Fort Worth, TX 76112		\$500.00	ATOR
			(If travel outside of	Texas, complete Schedule T)
Principal occup Principal and	coo	Employer (See In Bennett Benner		
			1	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/29/2013	Contributor address; City; State; Zip Code 2429 Rogers Avenue Fort Worth, TX 76109		\$500.00	1 
			(if travel outside of	Texas, complete Schedule T)
Principal occup Principal & C	Dation / Job title (See Instructions) EO	Employer (See In Bennett Benner	structions)	
Date	Full name of contributor	4	Amount of	In-kind contribution
Date	Benson, Johnnie (Ms.)	/	contribution (\$)	description (if applicable)
09/03/2013	Contributor address; City; State; Zip Code 1704 Martel Avenue Fort Worth, TX 76103		\$200.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2013	Contributor address; City; State; Zip Code 3825 Canyon Pass Trail Burleson, TX 76028		\$200.00	] 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See in		reads, complete schedule 1)

	The Instruction	on Guide explains how to complete this form.		1 PAGE#			
				T	18 Report: 5/32		
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT#	(Ethics Commission filers)		
_				00012345			
4	Date	5 Full name of contributor	)	7 Amount of contribution (\$)	8 In-kind contribution despription (if applicable)		
		• • • • • • • • • • • • • • • • • • • •		-	E S		
	07/31/2013	6 Contributor address; City; State; Zip Code 4013 Martin Luther King Fwy.		\$100.00			
		Fort Worth, TX 76119			1 Constant		
				(If travel outside of	Texas, complete Schedule T		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	1 84 5 E		
					12 0		
	Date	Full name of contributor	)	Amount of	In kind contribution		
		Brender, Art & Lynda (Mr. and Mrs.)		contribution (\$)	description (if applicable)		
	09/03/2013	Contributor address; City; State; Zip Code		\$150.00	1		
		4121 Hampshire Blvd. Fort Worth, TX 76103		, "	! !		
				// // // // // // // // // // // // //	'		
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
		,		,			
	Date	Full name of contributor	)	Amount of	In-kind contribution		
		Brooks, Gloria (Ms.)		contribution (\$)	description (if applicable)		
	09/05/2013	Contributor address; City; State; Zip Code		\$150.00	1		
	04/06/2010	609 Fiesta Circle Irving, TX 75063		<b>\$100.00</b>	1		
					-		
	Principal occur	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)		
	r incipal occup	ation 7 300 title (See instructions)	Employer (See in	structions)			
	Date	Full name of contributor	)	Amount of	In-kind contribution		
		Brooks, Ralph (Dr.)		contribution (\$)	description (if applicable)		
	09/05/2013	Contributor address; City; State; Zip Code		\$150.00	1		
	09/03/2013	909 9th Avenue		\$150.00	!		
		Fort Worth, TX 76104			_		
	Dia da da			-	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
	Date	Full name of contributor	)	Amount of	In-kind contribution		
		Brooks, Renee (Ms.)	,	contribution (\$)	description (if applicable)		
	00/05/0040	Contributor address: City State: 75-0-4-		Ф000 00			
	09/05/2013	Contributor address; City; State; Zip Code 308 Canyon Creek		\$300.00	  -		
		Fort Worth, TX 76112					
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			

The instru	ICTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/1	18 Report: 6/32
2 FILER NAM	ME Brooks, Roy Charles (Mr.)		3 ACCOUNT# 00012345	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Carter, Nancy and Tim (Mr. and Mrs.)	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/03/201	6 Contributor address; City; State; Zip Code 3408 Rustwood Ct. Fort Worth, TX 76109		\$150.00	Texas, complete Schedule T
• Principal or	ccupation / Job title (See Instructions)	10 Employer (See In:	<u> </u>	Texas, configuration of the co
9 Filliopal o			structions)	## R 60
Date	Full name of contributor	<del> </del> )	Amount of contribution (\$)	In-kind contribution description (if applicable).
08/15/201	Contributor address; City; State; Zip Code 2440 Northglen Drive Fort Worth, TX 76119		\$100.00	`\   
			(If travel outside of	Texas, complete Schedule T)
Principal or	ccupation / Job title (See Instructions)	Employer (See In:		
			·	
Date	Full name of contributor	<b>#)</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/24/201	Contributor address; City; State; Zip Code 3601 Overton Park Dr. E. Fort Worth, TX 76109		\$750.00	 
	· · · · · · · · · · · · · · · · · · ·		(If travel outside of	Texas, complete Schedule T)
Principal od Retired	ccupation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of	In-kind contribution
	Chriss, Alcee Jr. (Mr.)		contribution (\$)	description (if applicable)
09/05/201	Contributor address; City; State; Zip Code 8101 Fm 2738 Burleson,, TX 76028		\$150.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal or	ccupation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<del> </del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/30/201	Contributor address; City; State; Zip Code 2101 Flemming Drive Fort Worth, TX 76112		\$150.00	 
		,	(If travel outside of	Texas, complete Schedule T)
Principal or	ccupation / Job title (See Instructions)	Employer (See In:	structions)	
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	The Instruction	סא Guide explains how to complete this form.		1 PAGE # Schedule: 5/	18 Report: 7/32		
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dean, Randal (Mr.)	<del>‡</del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	08/06/2013	6 Contributor address; City; State; Zip Code 201 Main Street Suite 801 Fort Worth, TX 76102		\$300.00	Texas, complete Schedulery		
9	Principal occup	nation / Job title (See Instructions)	10 Employer (See In	structions)	25 O O		
	Date 08/05/2013	Full name of contributor Out-of-state PAC (ID# Dunkins, Dennis (Mr.)  Contributor address; City; State; Zip Code 4421 Wilhelm Street Fort Worth, TX 76119	<b>*</b> )	Amount of contribution (\$)	In-third contribution description (if applicable)		
1				(If travel outside of	Texas, complete Schedule T)		
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	1			
		,		,			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/05/2013	Contributor address; City; State; Zip Code 1251 West Magnolia Avenue Fort Worth, TX 76104		\$150.00	│ │ │ Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/01/2013	Contributor address; City; State; Zip Code 3800 Trailwood Lane Fort Worth, TX 76109		\$150.00	! ! !		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/11/2013	Contributor address; City; State; Zip Code 300 Owl Creek Drive, Apt. 12205 Arlington, TX 76018		\$150.00	I		
-	Principal occur	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	,		
	r illicipai occup	nation , doo and took institutions	Employor (000 III				

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/	18 Report: 8/32
2 FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT#	(Ethics Commission filers)
			00012345	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Frazier, William & Veronica (Dr. and Mrs.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/03/2013	6 Contributor address; City; State; Zip Code P.O. Box 670989 Dallas, TX 75367		\$250.00	Texas, complete Schedule 1)
			l	Texas, cumpleta scriedule 1)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	ST E ST
Date	Full name of contributor  ut-of-state PAC (ID#	:	Amount of	In-kind contribution
Juli	Freeman, Michael & Cari (Mr. and Mrs.)	/	contribution (\$)	description (if applicable)
09/05/2013	Contributor address; City; State; Zip Code		\$1,000.00	1 8 8 7 T
	Fort Worth, TX 76131		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In Steele and Free		and the late of th
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/03/2013	Contributor address; City; State; Zip Code 4055 International Plaza. Ste 200 Fort Worth, TX 76109		\$500.00	 
		•	(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In Freese and Nic		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/12/2013	Contributor address; City; State; Zip Code 2200 Ross Avenue Suite 2800 Dallas, TX 75201		\$1,000.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	Lation / Job title (See Instructions)	Employer (See In Fulbright & Jaw		
			<del></del>	1
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/11/2013	Contributor address; City; State; Zip Code 1229 Shady Oaks Lane		\$200.00	 
	Fort Worth, TX 76107		(If travel outside of	Texas, complete Schedule T)
	L	F		, ,
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

The Instruction Guide explains how to complete this	form.	1 PAGE # Schedule: 7/1	18 Report: 9/32				
2 FILER NAME Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)				
4 Date 5 Full name of contributor □ out-o Gandy, Taylor and Shirlee (Mr. and	,	7 Amount of contribution (\$)	8 In-kind Contribution description (if applicable)				
09/05/2013 6 Contributor address; City; Sta 4250 Sarita Ct. Fort Worth, TX 76109	te; Zip Code	\$1,000.00	AN 15 A				
		(If travel outside of	Texas, complete Schedule 1				
Principal occupation / Job title (See Instructions)     Attorney at law	10 Employer (S	See Instructions)	9: 52 A				
Date Full name of contributor out-o	f-state PAC (ID#	_) Amount of contribution (\$)	In-kind contribution description (if applicable)				
08/09/2013 Contributor address; City; Sta 5485 Beltline Road, #300 Dallas, TX 75254	ate; Zip Code	\$2,500.00	   				
		(if travel outside of	Texas, complete Schedule T)				
Principal occupation / Job title (See Instructions)	Employer (S	See Instructions)	A CONTRACTOR OF THE PROPERTY O				
Housing Developer		evelopment, Ltd.					
Date Full name of contributor out-o	f-state PAC (ID#	_) Amount of contribution (\$)	In-kind contribution description (if applicable)				
09/05/2013 Contributor address; City; Sta 2209 Briardale Road Fort Worth, TX 76119	ate; Zip Code	\$150.00	 				
		(if travel outside of	Texas, complete Schedule T)				
Principal occupation / Job title (See Instructions)	Employer (S	See Instructions)					
Date Full name of contributor out-o	f-state PAC (ID#	_) Amount of contribution (\$)	In-kind contribution description (if applicable)				
09/10/2013 Contributor address; City; Sta 201 Main Street Fort Worth, TX 76102	ate; Zip Code	\$1,250.00	 				
		(If travel outside of	Texas, complete Schedule T)				
Principal occupation / Job title (See Instructions)		See Instructions) ernment Fund					
Date Full name of contributor out-o	f-state PAC (ID#	_) Amount of contribution (\$)	In-kind contribution description (if applicable)				
07/29/2013 Contributor address; City; Sta 4000 Western Center Fort Worth, TX 76137	ate; Zip Code	\$500.00	1   				
		(if traval autolds of	Texas, complete Schedule T)				
			Texas, complete schedule 1)				
Principal occupation / Job title (See Instructions) Engineering Company	Employer (S Halff Associ	See Instructions) ciates					

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#			
$\vdash$				Schedule: 8	/18 Report: 10/32		
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)		
4	Date	5 Full name of contributor  out-of-state PAC (ID#	)	7 Amount of	→8 rth-kind contribution		
		Heiskell, Michael (Mr.)		contribution (\$)	description (iPapplicable)		
1		· · · · · · · · · · · · · · · · · · ·			1 3, 5		
	08/15/2013	6 Contributor address; City; State; Zip Code		\$150.00			
		5601 Bridge Street Ste. 220 Fort Worth, TX 76112			2011		
1		Tott Worth, TX 70112					
l				(If travel outside o	f Texas, complete Schedule T)		
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	72 0 2		
⊨	Data	Full name of contributor  ut-of-state PAC (ID#		Amount of	In-kind contribution		
	Date	Full name of contributor	)	contribution (\$)	description (if applicable)		
		riolaria, Barroy (Mr.)			1		
1	09/05/2013	Contributor address; City; State; Zip Code		\$150.00	1		
l	09/03/2013	3647 Encanto Drive		ψ130.00	T.		
l		Fort Worth, TX 76109			1		
l		·		(If travel outside o	f Texas, complete Schedule T)		
├─	Principal occur	eation / Job title (See Instructions)	Employer (See In				
l				•			
<u> </u>				<u></u>			
	Date	Full name of contributor  ut-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		James, Adelene (Ms.)		00/11/20110/11 (0)	T document (in approache)		
1		Octobrilla de la Citata		#100.00	, I		
1	08/30/2013	Contributor address; City; State; Zip Code 1821 Carverly Drive		\$100.00	Ί.		
1		Fort Worth, TX 76112			1		
		•		(If travel outside o	of Texas, complete Schedule T)		
┝	Principal occur	pation / Job title (See Instructions)	Employer (See In	L .	r rexus, complete constant i		
	1 molpar occup	and the loss mandalons,	Employer (GGG III	ou doublie)			
F	Date	Full name of contributor  ut-of-state PAC (ID#	<u>;                                    </u>	Amount of	In-kind contribution		
		Jenkins, Kristin (Ms.)		contribution (\$)	description (if applicable)		
ĺ		[			i		
	08/05/2013	Contributor address; City; State; Zip Code		\$150.00	) <b>i</b>		
		800 Hillmont Ranch Road Aledo, TX 76008			1		
		Aledo, 1X 76006			1		
				(if travel outside o	of Texas, complete Schedule T)		
Г	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
				-			
Г	Date	Full name of contributor  ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution		
		Jennings, DeVoyd (Mr.)		contribution (\$)	description (if applicable)		
					i I		
	09/03/2013	Contributor address; City; State; Zip Code		\$150.00	) <del>i</del>		
		4551 Parkwood Drive					
		Forrest Hill, TX 76140			I		
				(If travel outside o	of Texas, complete Schedule T)		
T	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			

	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 9/	18 Report: 11/32		
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jewett, Don Alvin Sr. (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	08/14/2013	6 Contributor address; City; State; Zip Code 4259 Stardust Lane Fort Worth, TX 76119		\$50.00	TECTIONS Sphedule T		
_	Deignigal	-4' /   4'	10 FI (O I				
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/05/2013	Contributor address; City; State; Zip Code 701 E. Davis Avenue Fort Worth, TX 76104		\$150.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	,	,		,			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/05/2013	Contributor address; City; State; Zip Code 4417 Chesapeake Bay Drive Fort Worth, TX 76123		\$150.00			
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Judith, Carrier (Ms.)	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/24/2013	Contributor address; City; State; Zip Code 3720 Wooten Drive Fort Worth, TX 76133		\$150.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	37-7-1		
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/17/2013	Contributor address; City; State; Zip Code 601 Samuels Avenue Townhome 304 Fort Worth, TX 76102		\$400.00			
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

The	INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 10	0/18 Report: 12/32	
2 FILE	R NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)	
<b>4</b> D	ate	5 Full name of contributor ☐ out-of-state PAC (ID: Keyes, Katrinia (Ms.)	<u> </u>	7 Amount of contribution (\$)	8 In kind communication description (if applicable)	
08/2	20/2013	6 Contributor address; City; State; Zip Code 3003 State Street Dallas, TX 75204		\$1,000.00	A THE CO.	
				(If travel outside of	Texas, complete Schedule T)	
9 Princ	cipal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	32 0	
Mar	keting		K Strategies		3 3	
Da	ate	Full name of contributor	<u> </u>	Amount of contribution (\$)	n-kind contribution description (if applicable)	
08/1	4/2013	Contributor address; City; State; Zip Code 1610 Valley View Drive Joshua, TX 76053		\$500.00	I I	
Drine	inal annun	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	ninistrator		Employer (See In: ABODE Treatm			
Da	ate	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/2	0/2013	Contributor address; City; State; Zip Code 3420 Potomac Avenue Dallas, TX 75205		\$150.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Princ	cipal occup	ation / Job title (See Instructions)	Employer (See In			
			,			
Di	ate	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/2	6/2013	Contributor address; City; State; Zip Code 1411 Shady Oaks Lane Fort Worth, TX 76107		\$150.00	 	
				(If travel outside of	Texas, complete Schedule T)	
Princ	cipal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
Da	ate	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/2	9/2013	Contributor address; City; State; Zip Code 2300 Race Street Fort Worth, TX 76111-1225		\$150.00	 	
-				(if travel outside of	Texas, complete Schedule T)	
Princ	cipal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	,					

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/18 Report: 13/32					
2	FILER NAME	Brooks, Roy Charles (Mr.)	3 ACCOUNT # 00012345	(Ethics Commission filers)					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID#, Linebarger Goggan Blair & Sampson	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	07/29/2013	6 Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760		\$5,000.00   	ARRAH JAN I IL JAN I				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Attorneys at L	ation / Job title (See Instructions) .aw	10 Employer (See In:	structions)	NA CONT				
	Date	Full name of contributor  ut-of-state PAC (ID# Lockheed Martin PAC	)	Amount of contribution (\$)	Inskind contribution description (if applicable)				
	08/22/2013	Contributor address; City; State; Zip Code 2121 Crystal Drive Suite 100		\$500.00	3				
		Arlington, VA 22202			Tayon nomplote Schodule T)				
			Employer (See In		Texas, complete Schedule T)				
	Principal occup	eation / Job title (See Instructions)	Lockheed Marti						
	Date	Full name of contributor ☐ out-of-state PAC (ID# Lon Burnam Campaign	±)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	07/31/2013	Contributor address; City; State; Zip Code P.O. Box 1894		\$150.00					
		Fort Worth, TX 76101			Texas, complete Schedule T)				
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	nstructions)					
	Date	Full name of contributor  ut-of-state PAC (ID-	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/08/2013	Contributor address; City; State; Zip Code 1942 Cedar Crest Blvd. dallas, TX 75203		\$150.00	   				
					Texas, complete Schedule T)				
	Principal occu	pation / Job title (See Instructions)	Employer (See l	nstructions)					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	09/30/2013	Contributor address; City; State; Zip Code 201 Main Street Suite 2500		\$2,500.00	   				
		Fort Worth, TX 76102		(if travel outside of	Texas, complete Schedule T)				
	Principal occu	pation / Job title (See Instructions)	Employer (See I Kelly Hart & H	nstructions)					
			<u> </u>		Electronic Filing Version 3.4				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	2/18 Report: 14/32
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC McEwing, Andre (Ms.)	(ID#)	7 Amount of contribution (\$)	8 -in-kind contribution description (if applicable)
	09/05/2013	6 Contributor address; City; State; Zip Cor 3301 Chancellorsville Drive Forest Hill, TX 76140	de	\$50.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In		1
	Date	Full name of contributor	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(	07/25/2013	Contributor address; City; State; Zip Coo 3904 Hamilton Avenue Fort Worth, TX 76107	de	\$250.00	 
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	·	
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
. (	09/04/2013	Contributor address; City; State; Zip Coo 3816 Walton Avenue Fort Worth, TX 76133	de	\$150.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	1	, <u> </u>
	т ппорагосоар	and it is a second of the seco	Employor (coo iii		
	Date	Full name of contributor  ut-of-state PAC (	ID#)	Amount of	In-kind contribution description (if applicable)
		Mitchell, Vaughn (Mr.)		contribution (\$)	description (ii applicable)
(	08/30/2013	Contributor address; City; State; Zip Coo 801 E. Avenue H, #120 Arlington, TX 76011	de	\$1,000.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In		
		eveloper & Owner	Southwest Send	dero	
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
. (	08/05/2013	Contributor address; City; State; Zip Coo 777 Taylor Street, Ste. 1030 Fort Worth, TX 76102	de	\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 13/18 Report: 15/32					
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00012345					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Odom-Wesley, Barbara (Dr.)	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	09/05/2013	6 Contributor address; City; State; Zip Code 1100 Ascott Street Arlington, TX 76012		\$150.00	Texas, Somplete Schedule T)				
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
	Date 09/05/2013	Full name of contributor  out-of-state PAC (ID# Pace, Milton & Shirlee (Mr. and Mrs.)  Contributor address; City; State; Zip Code	)	Amount of contribution (\$)	in kind contribution description (if applicable)				
		4232 Wichita Fort Worth, TX 76119							
					Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	07/26/2013	Contributor address; City; State; Zip Code 2409 Winton Terrace West Fort Worth, TX 76109		\$150.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/14/2013	Contributor address; City; State; Zip Code 2509 Fox Glenn Circle Bedford, TX 76021		\$25.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/28/2013	Contributor address; City; State; Zip Code 7913 Blenheim Place Fort Worth, TX 76120		\$1,000.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Medical Exam	ation / Job title (See Instructions) niner	Employer (See In	structions)					

The Instruct	non Guide explains how to complete this form.		1 PAGE # Schedule: 14	/18 Report: 16/32
2 FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)
4 Date	5 Full name of contributor  out-of-state PAC (ID: Pettit, David (Mr.)	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/10/2013	6 Contributor address; City; State; Zip Code 1201 Clover Lane Fort Worth, TX 76107		\$200.00	Texas, complete segredule 10
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In		AS A STEE
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if-applicable)
08/25/2013	Contributor address; City; State; Zip Code P.O. Box 444 Hurst, TX 76053		\$150.00	N 20 1
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor  ut-of-state PAC (ID: PSEL PAC	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2013	Contributor address; City; State; Zip Code 201 Main Street Fort Worth, TX 76102		\$1,250.00	:   
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In PSEL PAC	estructions)	
Date	Full name of contributor  ut-of-state PAC (ID: Rice, Ann (Ms.)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/15/2013	Contributor address; City; State; Zip Code 3900 Westcliff Rd. S. Fort Worth, TX 76109		\$150.00	1 
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	estructions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/22/2013	Contributor address; City; State; Zip Code 14531 Hwy 377 S. Fort Worth, TX 76126		\$5,000.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Owner	pation / Job title (See Instructions)	Employer (See In RNR Production	nstructions) n Land and Cattle	Co.

The Instruction	אס Guide explains how to complete this form.	1 PAGE # Schedule: 15/18 Report: 17/32				
2 FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # 00012345	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#Robinson, Theresa (Ms.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
09/04/2013	6 Contributor address; City; State; Zip Code 2129 Briardale Road Fort Worth, TX 76119		\$50.00	Texas, complete softendule T		
			(ii travel outside of	rexas, complete schedule ()		
9 Principal occup	eation / Job title (See Instructions)	10 Employer (See In:	structions)	55 5		
Date	Full name of contributor	<del>;</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/02/2013	Contributor address; City; State; Zip Code 201 Main Street, Suite 700 Fort Worth, TX 76102		\$1,000.00	52 ×		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Management	Dation / Job title (See Instructions) Company	Employer (See In:	Employer (See Instructions)			
D-1-	Г. Б. И		A-va-val of	la kind contribution		
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/19/2013	Contributor address; City; State; Zip Code 4708 LaFayette Ave Fort Worth, TX 76107		\$300.00	 		
				Texas, complete Schedule T)		
Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	<del>;</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/22/2013	Contributor address; City; State; Zip Code 117 Shady Lake Ct. Hurst, TX 76054		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor  ut-of-state PAC (ID# Tesmer, David (Mr.)	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/06/2013	Contributor address; City; State; Zip Code 644 Divot Ct. Grand Prairie, TX 75052		\$150.00	 		
			/If traval autolds of	Texas, complete Schedule T)		
		F (0		rexas, complete schedule 1)		
Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 16	5/18 Report: 18/32				
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00012345					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Thompson, Glenda (Ms.)	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	07/25/2013	6 Contributor address; City; State; Zip Code 5623 Helmick Fort Worth, TX 76107		\$150.00	 				
				1	Texas, complete Schedules				
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	REST SE REST				
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	description (if applicable)				
	08/10/2013	Contributor address; City; State; Zip Code 2212 W. Magnolia Avenue Fort Worth, TX 76110		\$150.00	9: 52				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	07/29/2013	Contributor address; City; State; Zip Code 341 Nursery Lane Fort Worth, TX 76114-4336		\$150.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete conceder 17				
	Date	Full name of contributor	<del>‡)</del>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	10/12/2013	Contributor address; City; State; Zip Code 341 Nursery Lane Fort Worth, TX 76114-4336		\$200.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In						
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/12/2013	Contributor address; City; State; Zip Code 3241 Lookout Drive Forest Hill, TX 76140		\$50.00	 				
				(if travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In		,				

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/18 Report: 19/32			
2	FILER NAME	Brooks, Roy Charles (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00012345			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Watson, Bettye (Ms.)	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	08/01/2013	6 Contributor address; City; State; Zip Code 5637 Wainwright Drive Fort Worth, TX 76112		\$150.00	TARRAL 2011, JAN		
				(if travel outside of	Texas, complete Schedule TI		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Webster, T.C. (Dr.)	)	Amount of contribution (\$)	In kind contribution description (if applicable)		
	08/30/2013	Contributor address; City; State; Zip Code 4817 Panola Avenue Fort Worth, TX 76103		\$150.00	OR L		
				<u> L`</u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
		·					
	Date	Full name of contributor  ut-of-state PAC (ID#	)	Amount of	In-kind contribution		
		White, Frederic & Phyllis (Mr. and Mrs.)	,	contribution (\$)	description (if applicable)		
	08/02/2013	Contributor address; City; State; Zip Code 801 Sunrise Drive		\$300.00	1 1		
		Kennedale, TX 76060		(If travel outside of	Texas, complete Schedule T)		
	Dringing again	ation / Job title (See Instructions)	Employer (See In	L	, _		
	Principal occup	ation / Job title (See instructions)	Employer (See in	structions)			
	Date	Full name of contributor	)	Amount of	In-kind contribution		
		Williams, Ann (Ms.)		contribution (\$)	description (if applicable)		
	09/03/2013	Contributor address; City; State; Zip Code 2040 Argyle Avenue Dallas, TX 75203		\$150.00	 		
		Dallas, 17 /3203			-		
	D: :-	(1)	E	<u></u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	)	Amount of	In-kind contribution		
		Williams, Bert (Mr.)		contribution (\$)	description (if applicable)		
	10/11/2013	Contributor address; City; State; Zip Code		\$250.00	l I		
		1700 Ellington Drive Fort Worth, TX 76112			I		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>		

# **POLITICAL CONTRIBUTIONS**

-	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE #
				Schedule: 18/18 Report: 20/32
2	FILER NAME	Brooks, Roy Charles (Mr.)	3 ACCOUNT # (Ethics Commission filers) 00012345	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wright, RJ and MA (Dr. and Mrs.)	)	7 Amount of   8 In-kind contribution contribution (\$)   description (if applicable)
	09/15/2013	6 Contributor address; City; State; Zip Code 5644 Hensley Drive Fort Worth, TX 76134		\$100.00   
				(If travel outside of Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)
				TARRANT COUNTY  2014 JAN 15 AN 9: 53  ELECTIONS ADMINISTRATOR  BY:

SCHEDULE F

#### **EXPENDITURE CATEGORIES**

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

Travel Out Of District
Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Brooks, Roy Charles (Mr.) 00012345 Schedule: 1/12 Report: 21/32 5 Payee name 4 Date Brighter Outlook, Inc. 10/30/2013 6 Amount (\$) Payee address City; State; Zip Code 4910 Dunbar \$500.00 Fort Worth, TX 76105 (b) Description (If travel outside of Texas, complete Schedule 1) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Contributions/Donations Made By Contribution 另 OF Candidate/Officeholder/Political Committee EXPENDITURE Office held Candidate / Officeholder name Office sought: 9 Complete ONLY if direct expenditure to benefit C/OH Date Pavee name O 11/01/2013 Brooks, Roy C. (Mr.) VO. Amount (\$) Payee address City; State; Zip Code CA 5032 Highland Meadow Drive \$750.00 Fort Worth, TX 76132 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Travel Out Of District NACo Conference OF **EXPENDITURE** Office held: Complete ONLY if Office sought: Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Brooks, Roy C. (Mr.) 12/04/2013 Amount (\$) Payee address City; State; Zip Code 5032 Highland Meadow Drive \$300.00 Fort Worth, TX 76132 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Travel Out Of District Cedar Rapids - NACo Board of Directors Meeting **EXPENDITURE** Office sought: Complete ONLY if Candidate / Officeholder name Office held: direct expenditure to benefit C/OH Date Payee name Brooks, Roy C. (Mr.) 12/10/2013 Amount (\$) Payee address City; State; Zip Code 5032 Highland Meadow Drive \$500.00 Fort Worth, TX 76132 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Travel Out Of District LUCC Board of Directors Meeting OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

**EXPENDITURE CATEGORIES** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Brooks, Roy Charles (Mr.) 00012345 Schedule: 2/12 Report: 22/32 4 Date 5 Payee name Crowley Area Chamber of Commerce 09/16/2013 Amount (\$) Payee address City; State; Zip Code 201 N. Hampton Road \$110.00 Crowley, TX 76036 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Membership Dues OTHER - Membership Dues OF EXPENDITURE Office hele 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name Crowley Area Chamber of Commerce 12/12/2013 の言葉 Payee address City; State; Zip Code Amount (\$) 201 N. Hampton Road \$40.00 Crowley, TX 76036 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By 4th Quarter Luncheon Candidate/Officeholder/Political Committee OF EXPENDITURE Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 11/22/2013 Dunn, Beverly (Ms.) City; Amount (\$) Payee address State: Zip Code 1201 E. Maddox \$150.00 Fort Worth, TX 76104 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Contributions/Donations Made By Thanksgiving Dinner for Community Center OF Candidate/Officeholder/Political Committee **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name East Fort Worth Business Association 09/16/2013 City; State; Zip Code Payee address Amount (\$) P.O. Box 8861 \$115.00 Fort Worth, TX 76124 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE Membership Dues OTHER - Membership Dues OF **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

to benefit C/OH

#### POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

**Event Expense** Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Brooks, Roy Charles (Mr.) Schedule: 3/12 Report: 23/32 00012345 4 Date 5 Payee name 10/01/2013 East Fort Worth Business Association 6 Amount (\$) Payee address City; State; Zip Code P.O. Box 8861 \$300.00 Fort Worth, TX 76124 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE Event Expense** Table OF **EXPENDITURE** Office held: 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name 11/22/2013 Fletcher, Shannon (Ms.) TRATOR Amount (\$) Payee address City; State; Zip Code Ö 3500 Miller Avenue \$124.20 (17 Fort Worth, TX 76119 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE Event Expense** Lunch for Volunteers - ACA Event OF **EXPENDITURE** Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Pavee name 12/20/2013 Fletcher, Shannon (Ms.) Amount (\$) Payee address City; State; Zip Code 3500 Miller Avenue \$150.00 Fort Worth, TX 76119 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Gifts/Awards/Memorials Expense Christmas OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Fort Worth Club 11/13/2013 Payee address City; State; Zip Code Amount (\$) 306 West Seventh Street \$2,581.35 Fort Worth, TX 76102 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE Event Expense** Community Meetings **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

OTHER (enter a category not listed above) Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Brooks, Roy Charles (Mr.) 00012345 Schedule: 4/12 Report: 24/32 4 Date 5 Payee name Fort Worth Tarrant County NAACP 10/24/2013 Amount (\$) Payee address City; State; Zip Code 1063 Evans Avenue \$500.00 Fort worth, TX 76104 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Contributions/Donations Made By Candidate/Officeholder/Political Committee Freedom Fund Banquet OF EXPENDITURE Office held Candidate / Officeholder name Office sought: 9 Complete ONLY if direct expenditure to benefit C/OH Π 200 Date Pavee name 17 Gifts by Gail 09/16/2013 Amount (\$) Payee address City; State; Zip Code P.O. Box 122771 \$146.13 Fort Worth, TX 76121 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Thomas Knowles and Joyce Brown OTHER - Floral Arrangements OF **EXPENDITURE** Office held: Office sought: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date 10/03/2013 Gifts by Gail Amount (\$) Payee address City; State; Zip Code P.O. Box 122771 \$154.80 Fort Worth, TX 76121 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** OTHER - Floral Arrangement Floral Arrangement OF EXPENDITURE Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Gifts by Gail 12/04/2013 Payee address City; State; Zip Code Amount (\$) P.O. Box 122771 \$88.22 Fort Worth, TX 76121 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** OTHER - Arrangements Constituents - Tabor OF **EXPENDITURE** Office held: Office sought: Complete ONLY if Candidate / Officeholder name direct expenditure

SCHEDULE F

#### **EXPENDITURE CATEGORIES**

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

Fees	Printing Expense Travel Out Of Dis Printing Expense Office Overhead/  The Instruction Guide explains how	Rental Expense OTHER (ente	Officeholder/Political Committee r a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 5/12 F	Report: 25/32 Brooks, Roy Charles (Mr.)		00012345
4 Date	5 Payee name		
10/11/2013	Horton, J.B.		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1,000.00	7864 Grassland Drive Fort Worth, TX 76133		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	pof Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	Consulting	が写るころ
EXPENDITURE			5° 3 2 2 7
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		omos coag.m	22 27
Date	Payee name		1 0 E
10/03/2013	Jubilee Theatre		w/987
Amount (\$)	Payee address City; State; Zip Code		100
\$180.00	506 Main Street Fort Worth, TX 76102		700
			1
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE OF	Contributions/Donations Made By	Contribution	
EXPENDITURE	Candidate/Officeholder/Political Committee		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
08/01/2013	Kwik Kopy Printing		
Amount (\$)	Payee address City; State; Zip Code		
\$163.57	1850 Handley Drive		
	Fort Worth, TX 76112		
	0.1		/ T
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside 2013 Jazz Luncheon - Pr	e of Texas, complete Schedule T)
OF	Finding Expense	2013 Jazz Luncheon - Fi	mang
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
08/13/2013	Kwik Kopy Printing		
Amount (\$)	Payee address City; State; Zip Code		
\$560.13			
\$500.13	Fort Worth, TX 76112		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	2013 Jazz Luncheon - Inv	vitations
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Polling Expense Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Brooks, Roy Charles (Mr.) Schedule: 6/12 Report: 26/32 00012345 Date 5 Payee name 10/25/2013 Line Printing Company 6 Amount (\$) Payee address City; State; Zip Code 2808 Shamrock Avenue \$162.38 Fort Worth, TX 76107 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense Printing - 820 Corridor Meeting OF **EXPENDITURE** Office held: 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 10/30/2013 Mark Greene Campaign Amount (\$) Payee address City; State; Zip Code P.O. Box 34774 \$500.00 Fort Worth, TX 76162 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 09/16/2013 Modern Art Museum of Fort Worth Amount (\$) Payee address City; State; Zip Code 3200 Darnell Street \$112.50 Fort Worth, TX 76107 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution Candidate/Officeholder/Political Committee **EXPENDITURE** Candidate / Officeholder name Office sought: Complete ONLY if Office held: direct expenditure to benefit C/OH Date Pavee name 12/24/2013 Moore, Pam (Ms.) Payee address Amount (\$) City; State; Zip Code 3205 Highpoint Drive \$245.00 Flower Mound, TX 75022 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Event Expense Catering - Community Event OF **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH

## SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

1 PAGE # Schodule: 7/12 Report: 27/32   2 FILER NAME Brooks, Roy Charles (Mr.)   3 ACCOUNT # (TEC liers)		The Instruction Guide explains ho	w to complete this form.	,,			
4 Date 09/25/2013 5 Paye name 09/25/2013 6 Amount (S) 8 PURPOSE EXPENDITURE Complete ONLY if direct expenditure Complete ONLY if the despenditure Complete ONLY if the despendit	1 PAGE#	<del>-</del>		3 ACCOUNT # (TEC filers)			
Oyl		.opon. 27702		00012345			
Samount (S)   7   Payee address   City   State; Zip Code	1	<del>-</del>					
### Suppose Category (See Categories listed at the top of this schedule) Contribution - Full Page Ad Contributions-Conations Made By Candidate/Officeholder/Pollicial Committee  ### Purpose Expenditure  ### Complete ONLY if Candidate / Officeholder name    Condidate / Officeholder name							
Fort Worth, TX 76104	, ,	, , , , , , , , , , , , , , , , , , , ,					
Sample Contribution	\$150.00						
## Candidate/Officeholder/Political Committee    Candidate/Officeholder name		Foll Worth, 12 78104					
## Candidate/Officeholder/Political Committee    Candidate/Officeholder name		(6) Coto (8- Otto Indiana (4- otto	(Ib) Description (It to a large	7.7.2			
## Candidate/Officeholder/Political Committee    Candidate/Officeholder name	PURPOSE		Contribution - Full Page 7	or rexas, complete schedule 1)			
Candidate / Officeholder name   Office sought:   Office held:   Officeholder name   Office sought:   Officeholder name   Officeholder			Contribution 1 diri age				
Date   10/01/2013   Payee name   Open Channels Group, LLC   Open Channels	EXPENDITURE			皇帝 主 27			
Date   Payee name   Open Channels Group, LLC   Description (if travel outside of Texas, complete Schedule T)   Purpose   Category (See Categories listed at the top of this schedule)   Description (if travel outside of Texas, complete Schedule T)   Office held:   Office held:		Candidate / Officeholder name	Office sought:	Office held:			
Date 10/01/2013 Open Channels Group, LLC  Amount (8)							
Date   Purpose   Payee name   Office sought:   Office held:				7 7 11			
Amount (\$) \$1,500.00	1	•		1 6/2 500			
Suite 208 Fort Worth, TX 76102  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Candy for Como Parade  Candy for Como Parade  Office sought:  Candidate / Officeholder name  Office sought:  Office held:  Candy for Como Parade  Office held:  Candidate / Officeholder name  Office sought:  Office held:  Cardgory (See Categories listed at the top of this schedule)  Date 10/11/2013  Amount (\$)  \$am's Club  Payee name \$am's Club  Payee name \$am's Club  Cardgory (See Categories listed at the top of this schedule)  Payee name  10/11/2013  Amount (\$)  \$am's Club  Cardgory (See Categories listed at the top of this schedule)  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132   Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Community Meeting - Food  Office held:  Community Meeting - Food				72			
Suite 208 Fort Worth, TX 76102  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Payee name Office sought:  Cardgory (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Candy for Como Parade  Candy for Como Parade  Office sought:  Candidate / Officeholder name  Office sought:  Office held:  Candy for Como Parade  Office held:  Candidate / Officeholder name  Office sought:  Office held:  Cardgory (See Categories listed at the top of this schedule)  Date 10/11/2013  Amount (\$)  \$am's Club  Payee name \$am's Club  Payee name \$am's Club  Cardgory (See Categories listed at the top of this schedule)  Payee name  10/11/2013  Amount (\$)  \$am's Club  Cardgory (See Categories listed at the top of this schedule)  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132   Category (See Categories listed at the top of this schedule)  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Community Meeting - Food  Office held:  Community Meeting - Food	. ` '			7 53			
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit CiOH  Date OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Event Expense  Candidate / Officeholder name  Office sought:  Office sought:  Office held:  Office sought:  Office held:  Office held:  Office sought:  Office held:  Office held:  Office held:  Office sought:  Office held:  Office held:  Office held:  Office held:  Office held:  Office sought:  Office held:	\$1,500.00			70			
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH to				•			
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH to		Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)			
Complete ONLY if direct expenditure to benefit C/OH  Date OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date Office Sought: Office held:  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132  Category (See Categories listed at the top of this schedule)  Description (if travel outside of Texas, complete Schedule T) Candy for Como Parade  Office sought: Office held:  Office held:  Office held:  Payee name Office Sought: Office held:  Category (See Categories listed at the top of this schedule)  Payee name Office Sought: Office held:  Category (See Categories listed at the top of this schedule)  Event Expense  Category (See Categories listed at the top of this schedule)  Event Expense  Category (See Categories listed at the top of this schedule)  Event Expense  Complete ONLY if direct expenditure to Candidate / Officeholder name  Office sought: Office held:		• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , , ,				
Complete ONLY if direct expenditure to benefit C/OH  Date 07/02/2013  Amount (\$)							
direct expenditure to benefit C/OH  Date	LAFERDITORE						
Date 07/02/2013 Payee name Sam's Club  Amount (\$) Payee address City; State; Zip Code 4400 Bryant Invin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/11/2013 Payee andress City; State; Zip Code 4400 Bryant Invin Road Fort Worth, TX 76132  Date 10/11/2013 Payee name Sam's Club  Amount (\$) Payee name Sam's Club  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule) City; State; Zip Code 4400 Bryant Invin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Community Meeting - Food  Community Meeting - Food  Office sought: Office held:		Candidate / Officeholder name	Office sought:	Office held:			
O7/02/2013   Sam's Club							
O7/02/2013   Sam's Club	Date	Pavee name					
Amount (\$) \$216.07  Amount (\$) \$216.07  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132  Category (See Categories listed at the top of this schedule) Event Expense  Candy for Como Parade  Candy for Como Parade  Candy for Como Parade  Candy for Como Parade  Office sought:  Office held:  Date 10/11/2013  Amount (\$) \$190.17  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Event Expense  Category (See Categories listed at the top of this schedule)  Community Meeting - Food  Office held:  Office held:  Office held:  Community Meeting - Food							
\$216.07 \$216.07 \$4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Complete ONLY it direct expenditure to benefit C/OH  Date 10/11/2013  Amount (\$) \$190.17  Purpose OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Candy for Como Parade  Office sought:  Office sought:  Office held:  Office held:  Description (If travel outside of Texas, complete Schedule T)  Candy for Como Parade  Office sought:  Office held:  Office held:  Description (If travel outside of Texas, complete Schedule T)  Complete ONLY it direct expenditure  Complete ONLY it direct expenditure  Office sought:  Office held:  Office held:  Office held:		Pavee address City: State: Zip Code					
Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/11/2013  Amount (\$) Payee address City; State; Zip Code 4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Date 10/11/2013  Candidate / Office hold:  Date 10/11/2013  Date 10/11/2013  Date 10/11/2013  Date 10/11/2013  Description (If travel outside of Texas, complete Schedule T)  Date 10/11/2013  Description (If travel outside of Texas, complete Schedule T)  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought: Office held:							
PURPOSE OF EXPENDITURE  Event Expense  Event Expense  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy for Candy for Candy for Candy	Ψ210.07	Fort Worth, TX 76132					
PURPOSE OF EXPENDITURE  Event Expense  Event Expense  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Como Parade  Candy for Complete ONLY if direct expenditure  Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy for Candy if direct expenditure  Candy for Candy for Candy for Candy for Candy for Candy							
OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/11/2013		Category (See Categories listed at the top of this schedule)	<u> </u>				
EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/11/2013 Sam's Club  Amount (\$) Payee address City; State; Zip Code 4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought: Office held:  Office sought: Office held:  Office sought: Office held:	1	Event Expense	Candy for Como Parade				
direct expenditure to benefit C/OH  Date							
direct expenditure to benefit C/OH  Date				Office held.			
Date 10/11/2013 Sam's Club  Amount (\$) Payee address City; State; Zip Code 4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure  Candidate / Officeholder name  Candidate / Officeholder name  City; State; Zip Code 4400 Bryant Irvin Road Fort Worth, TX 76132  Description (If travel outside of Texas, complete Schedule T) Community Meeting - Food  Community Meeting - Food  Office sought: Office held:		Candidate / Officeholder name	Office sought:	Office neid:			
Amount (\$) \$190.17  Payee address City; State; Zip Code 4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  City; State; Zip Code  Description (If travel outside of Texas, complete Schedule T) Community Meeting - Food  Office sought:  Office held:	to benefit C/OH						
Amount (\$) \$190.17  Payee address City; State; Zip Code  4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  City; State; Zip Code  Description (If travel outside of Texas, complete Schedule T) Community Meeting - Food  Office sought:  Office held:							
\$190.17  4400 Bryant Irvin Road Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Event Expense  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought:  Office held:	10/11/2013	Sam's Club					
Fort Worth, TX 76132  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  Complete ONLY if direct expenditure	Amount (\$)	Payee address City; State; Zip Code					
PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Complete ONLY if direct expenditure  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Community Meeting - Food  Community Meeting - Food  Office sought:  Office held:	\$190.17						
PURPOSE OF EXPENDITURE  Event Expense  Community Meeting - Food  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure		FOR WORD, 1Χ /6132					
PURPOSE OF EXPENDITURE  Event Expense  Community Meeting - Food  Complete ONLY if direct expenditure  Complete ONLY if direct expenditure			T Description (V)	of Towns complete Oaks date To CT			
OF EXPENDITURE  Complete ONLY if direct expenditure  Candidate / Officeholder name  Office sought:  Office held:	PURPOSE	, , , , ,					
Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure	OF	Event Expense	Community Meeting - Foo	Ju			
direct expenditure	EXPENDITURE		· ·				
direct expenditure	Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:			
	direct expenditure		-				

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By 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 PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Brooks, Roy Charles (Mr.) Schedule: 8/12 Report: 28/32 00012345 4 Date 5 Payee name 12/18/2013 Save A lot 6 Amount (\$) Payee address City; State; Zip Code 4621 E. Lancaster \$447.44 Fort Worth, TX 76103 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Event Expense** Maintenance Facility Christmas Food 70 EXPENDITURE 3 9 Complete ONLY if Candidate / Officeholder name ✓Office held: Office sought: direct expenditure to benefit C/OH "53# ¥ ال Date Pavee name **Tarrant County** 10/25/2013 ROTE Payee address Amount (\$) City; State; Zip Code CI 100 E. Weatherford \$149.89 w Fort Worth, TX 76196 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** OTHER - Tarrant County Flag Contribution to the League of Women Voters OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Tarrant County Democratic Party 09/16/2013 Amount (\$) Payee address City; State; Zip Code 2806 Race Street \$200.00 Fort Worth, TX 76011 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name Tarrant County Democratic Party 09/25/2013 Payee address Amount (\$) City; State; Zip Code 2806 Race Street \$2,000.00 Fort Worth, TX 76011 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contribution Contributions/Donations Made By OF Candidate/Officeholder/Political Committee **EXPENDITURE** Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure

SCHEDULE F

**EXPENDITURE CATEGORIES** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

rees	The Instruction Guide explains ho	, , , , , , , , , , , , , , , , , , , ,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/12 F	Report: 29/32 Brooks, Roy Charles (Mr.)	00012345
4 Date	5 Payee name	- 12 -1
11/22/2013	Tesfay, Meri (Ms.)	TARRI ZUL JA ELECTI
6 Amount (\$)	7 Payee address City; State; Zip Code	NA STORY
\$34.42	3500 Miller Avenue Fort Worth, TX 76119	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule I)
OF	Event Expense	Tarrant County Black Historical and Genediogical
EXPENDITURE		9: 7
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: W
Date	Payee name	· ·
12/20/2013	Tesfay, Meri (Ms.)	
Amount (\$)	Payee address City; State; Zip Code	
\$100.00	6067 Milton Street Dallas, TX 75206	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Gifts/Awards/Memorials Expense	Christmas
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
09/04/2013	The Ashton Depot	
Amount (\$)	Payee address City; State; Zip Code	
\$10,543.76	1401 Jones Street Fort Worth, TX 76102	
DUDD007	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Event Expense	Venue for Jazz Luncheon - Fundraising Event
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/18/2013	The Tyson Organization, Inc.	
Amount (\$)	Payee address City; State; Zip Code	
\$1,270.63	1351 Mistletoe Drive Fort Worth, TX 76110	
BUBEAG	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	OTHER - Automated Calls	Automated Calls
EXPENDITURE		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

**EXPENDITURE CATEGORIES** 

#### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

Office Overhead/Rental Expense Fees Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Brooks, Roy Charles (Mr.) 00012345 Schedule: 10/12 Report: 30/32 4 Date 5 Payee name THR Foundation 11/25/2013 6 Amount (\$) Payee address City; State; Zip Code LECT 612 E. Lamar Blvd. \$500.00 Arlington, TX 76011 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas) complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee **EXPENDITURE** Office held 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name United Way of Tarrant County 10/18/2013 Amount (\$) Payee address City; State; Zip Code \$40.00 TΧ (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name United Way of Tarrant County 10/28/2013 Amount (\$) Payee address City; State; Zip Code 1500 North Main \$45.00 Suite 200 Fort Worth, TX 76164 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contributions/Donations Made By Contribution Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name United Way of Tarrant County 10/31/2013 Payee address City; State; Zip Code Amount (\$) 1500 North Main \$30.00 Suite 200 Fort Worth, TX 76164 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Contributions/Donations Made By Contribution OF Candidate/Officeholder/Political Committee EXPENDITURE Office held: Candidate / Officeholder name Complete ONLY if Office sought: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Printing Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) 2 FILER NAME Brooks, Roy Charles (Mr.) 00012345 Schedule: 11/12 Report: 31/32 4 Date 5 Payee name **United Way of Tarrant County** 11/01/2013 Payee address 6 Amount (\$) City; State; Zip Code \$32.00 1500 North Main Suite 200  $\mathbb{F}$ Fort Worth, TX 76164 (b) Description (If travel outside of Texas complete Schedule 7) 8 (a) Category (See Categories listed at the top of this schedule) SHOL **PURPOSE** Contributions/Donations Made By Contribution Candidate/Officeholder/Political Committee EXPENDITURE 70-17 Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Ų, 艺艺 Date Payee name who **UTA Jazz Band** വ 09/04/2013 Amount (\$) Payee address City; State; Zip Code **UTA Box 19105** \$500.00 Arlington, TX 76019 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Music for Jazz Luncheon - Fundraiser **Event Expense** EXPENDITURE Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/20/2013 Webster, T.C. (Mr.) Amount (\$) Payee address City; State; Zip Code 4817 Panola Avenue \$150.00 Fort Worth, TX 76103 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Christmas Gifts/Awards/Memorials Expense **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/22/2013 Young, Catherine (Ms.) Payee address City; State; Zip Code Amount (\$) 6551 Granbury Road \$54.58 Fort Worth, TX 76133 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Food for Volunteers - ACA Event **Event Expense** EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

6

8

**PURPOSE** 

OF EXPENDITURE

9 Complete ONLY if direct expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Gifts/Awards/Memorials Expense

Candidate / Officeholder name

(If travel outside of Texas, complete Schedule T)

Office held:

POLITIC	POLITICAL EXPENDITURES SCHEDULE F										
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees  Advertising Expense  Accounting/Banking Consulting Expense Event Expense Frinting Expense Frinting Expense  Transportation Fallang Expense Frinting Expense Frinting Expense Frinting Expense  Transportation Fallang Expense Frinting Expense Frinting Expense Frinting Expense  Transportation Frinting Expense Frinting Expense Frinting Expense Frinting Expense  EXPENDITURE CATEGORIES  Salaries/Wages/Contract Labor Foolicitation/Fundraising Expense Frinting							ommittee				
PAGE # hedule: 12/12	Re	port: 32/32	2	FILER NAME Brooks, Roy	Charles	(Mr.)			3	ACCOUNT # 00012345	(TEC filers)
Date 12/20/2013	5	Payee name Young, Cath	eri	ne (Ms.)			-				
Amount (\$) \$150.00	7	Payee address 6551 Granbu Fort Worth,	ıry	Road	State;	Zip Code					

(b) Description

Christmas

Office sought: