


OFFICIAL RECORD HOLDER
CAMPAIGN FINANCE REPORT
CITY SECRETARY

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTIONS GUIDE explains how to complete this form. **1 ACCOUNT #** (Ethics Commission filers) **2 PAGE #**
 00000001 1 of 20

3 CANDIDATE / OFFICEHOLDER NAME
 MS / MRS / MR Mrs. FIRST KELLY MI
 NICKNAME LAST ALLEN GRAY SUFFIX

OFFICE USE ONLY
 Date Received: 
 Date Hand Delivered: _____ Date Postmarked: _____
 Receipt # _____ Amount _____
 Date Processed _____
 Date Imaged _____

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 2820 GALVEZ FORT, TX 76111
 Change of Address

5 CAMPAIGN TREASURER NAME
 MS / MRS / MR Mr. FIRST JOHNNIE MI
 NICKNAME LAST WELBORNE SUFFIX

6 CAMPAIGN TREASURER ADDRESS
 (Residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
 301 WOODHAVEN DRIVE DESOTO, TX 75115

7 CAMPAIGN TREASURER PHONE
 AREA CODE PHONE NUMBER EXTENSION
 (469) 831-0801

8 REPORT TYPE
 January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED
 Month Day Year Month Day Year
 05/03/2012 THROUGH 06/13/2012

10 ELECTION
 ELECTION DATE: Month Day Year 06/23/2012
 ELECTION TYPE: Primary Runoff General Special

11 OFFICE OFFICE HELD (if any) **12 OFFICE SOUGHT (if known)**
 District 08

GO TO PAGE 2

2012-06-15 P. 2:57 PM

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME ALLEN GRAY, KELLY (Mrs.)

14 ACCOUNT # (Ethics Commission filers)
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED **\$ 4,674.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 10,824.00**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. TOTAL POLITICAL EXPENDITURES **\$ 10,050.56**

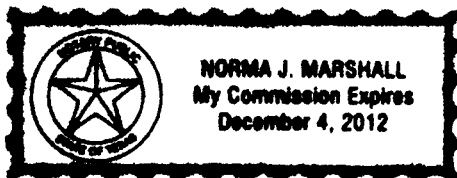
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 3,673.70**

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 0.00**

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kelly Allen Gray
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Kelly Allen Gray*, this the 14 day of Jan, 2012, to certify which, witness my hand and seal of office.

Norma Marshall
Signature of officer administering oath

NORMA J MARSHALL
Print name of officer administering oath

NOTARY
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/3 Report: 3/20

2 FILER NAME ALLEN GRAY, KELLY (Mrs.)**3** ACCOUNT # (Ethics Commission filers)
00000001**4** Date

05/15/2012**5** Full name of contributor out-of-state PAC (ID# _____)
BOWENS, PRISCILLA**6** Contributor address; City; State; Zip Code
8740 THISTLE RIDGE DRIV
FORTH WORTH, TX 76123**7** Amount of
contribution (\$)

\$250.00**8** In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) **9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
FORT WORTH FIREFIGHTERS ASSOCIATIONSContributor address; City; State; Zip Code
1617 TIERNY ROAD
FORT WORTH, TX 76112Amount of
contribution (\$)

\$3,000.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
GRAY, BILLYContributor address; City; State; Zip Code
2820 GALVEZ
FORT WORTH, TX 76111Amount of
contribution (\$)

\$1,250.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
GRAY, BILLYContributor address; City; State; Zip Code
2820 GALVEZ
FORT WORTH, TX 76111Amount of
contribution (\$)

\$250.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
HANDLEY, ERMAContributor address; City; State; Zip Code
2362 FAETT COURT
FORT WORTH, TX 76119Amount of
contribution (\$)

\$200.00In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/3 Report: 4/20

2 FILER NAME ALLEN GRAY, KELLY (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
06/03/2012

5 Full name of contributor out-of-state PAC (ID# _____)
LEWIS, JOHNNY

6 Contributor address; City; State; Zip Code
953 E. TERRELL AVENUE
FORT WORTH, TX 76104

7 Amount of contribution (\$)
\$150.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
LINEBARGER, GOGAN, BLAIR, & SAMPSON LLC

Contributor address; City; State; Zip Code
PO BOX 17428
AUSTIN, TX 78760

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
MIDDLETON, KATHY

Contributor address; City; State; Zip Code
1076 DIXON ROAD
BELLEVUE, TX 76228

Amount of contribution (\$)
\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
SESSION, COREY

Contributor address; City; State; Zip Code
2901 E. 4TH STREET
FORT WORTH, TX 76111

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID# _____)
SMITH, CHARLIE

Contributor address; City; State; Zip Code
4444 FAIR PARK BLVD
FORT WORTH, TX 76115

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/3 Report: 5/20

2 FILER NAME ALLEN GRAY, KELLY (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date
5 Full name of contributor out-of-state PAC (ID# _____)
05/15/2012 STALLWORTH, ABBIE

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
2620 GALVEZ
FORT WORTH, TX 76119

\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 1/14 Report: 6/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/08/2012	5 Payee name ACURA GROUP
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6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 8028 COLFAX LANE FORT WORTH, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL ADVERTISING
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/12/2012	Payee name ACURA GROUP
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Amount (\$) \$250.00	Payee address City; State; Zip Code 8028 COLFAX LANE FORT WORTH, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL ADVERTISING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/10/2012	Payee name BASSHAM FOODS
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Amount (\$) \$68.38	Payee address City; State; Zip Code 5409 HEMPHILL STREET FORT WORTH, TX 76115
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FOOD/BEVERAGE EXPENSE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name CAKES BY DELESSA
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Amount (\$) \$36.00	Payee address City; State; Zip Code 1417 EVANS STREET FORT WORTH, TX 76104
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FOOD/BEVERAGE EXPENSE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/14 Report: 7/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/04/2012	5 Payee name CAREY, DOROTHY
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name CAREY, DOROTHY
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Amount (\$) \$260.00	Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/23/2012	Payee name CAREY, DOROTHY
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Amount (\$) \$160.00	Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2012	Payee name CAREY, DOROTHY
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Amount (\$) \$105.00	Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/14 Report: 8/20		2 FILER NAME ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 06/09/2012	5 Payee name CAREY, DOROTHY				
6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE		
	Candidate / Officeholder name		Office sought:	Office held:	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 05/31/2012	Payee name CHASE BANK				
Amount (\$) \$13.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> BANK SERVICE FEE		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/09/2012	Payee name CHASE BANK				
Amount (\$) \$5.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FEE FOR CASHIERS CHECK		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					
Date 06/10/2012	Payee name CHASE BANK				
Amount (\$) \$150.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE		
	Candidate / Officeholder name		Office sought:	Office held:	
Complete ONLY if direct expenditure to benefit C/OH					

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/14 Report: 9/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/04/2012	5 Payee name CLARK, JOHN
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6 Amount (\$) \$240.00	7 Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name CLARK, JOHN
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Amount (\$) \$260.00	Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/23/2012	Payee name CLARK, JOHN
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Amount (\$) \$120.00	Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2012	Payee name CLARK, JOHN
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Amount (\$) \$120.00	Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION Guide explains how to complete this form.

1 PAGE # Schedule: 5/14 Report: 10/20		2 FILER NAME ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 06/09/2012		5 Payee name CLARK, JOHN			
6 Amount (\$) \$160.00		7 Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/25/2012		Payee name COX'S LITHO			
Amount (\$) \$162.38		Payee address City; State; Zip Code 2704 E. BELKNAP FORT WORTH, TX 76111			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/04/2012		Payee name DAVIDSON, MARY			
Amount (\$) \$290.00		Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/12/2012		Payee name DAVIDSON, MARY			
Amount (\$) \$312.00		Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/14 Report: 11/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/23/2012	5 Payee name DAVIDSON, MARY
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2012	Payee name DAVIDSON, MARY
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Amount (\$) \$144.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/09/2012	Payee name DAVIDSON, MARY
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Amount (\$) \$200.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/12/2012	Payee name DAVIS, ALEX
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Amount (\$) \$30.00	Payee address City; State; Zip Code 4917 OLD MANSFIELD FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/14 Report: 12/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/04/2012	5 Payee name GREEN, CARRIE
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6 Amount (\$) \$225.00	7 Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name GREEN, CARRIE
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Amount (\$) \$245.00	Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/23/2012	Payee name GREEN, CARRIE
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Amount (\$) \$160.00	Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2012	Payee name GREEN, CARRIE
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Amount (\$) \$105.00	Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/14 Report: 13/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/09/2012	5 Payee name GREEN, CARRIE
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6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/09/2012	Payee name KHAVN RADIO STATION
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Amount (\$) \$720.00	Payee address City; State; Zip Code 5787 S. HAMPTON RD DALLAS, TX 75232
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL ADVERTISING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name MARSHALL, NOVELLA
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Amount (\$) \$35.00	Payee address City; State; Zip Code 204 S JUDKINS FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/03/2012	Payee name METRO MAILER
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Amount (\$) \$1,292.64	Payee address City; State; Zip Code 5719 E. ROSEDALE SUITE 809 FORT WORTH, TX 76101
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL ADVERTISING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/14 Report: 14/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/12/2012	5 Payee name METRO MAILER
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6 Amount (\$) \$570.00	7 Payee address City; State; Zip Code 5719 E. ROSEDALE SUITE 809 FORT WORTH, TX 76101
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> POLITICAL ADVERTISING
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/07/2012	Payee name METRO PCS
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Amount (\$) \$140.00	Payee address City; State; Zip Code 3031 S FREEWAY FORT WORTH, TX 76104
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PHONES SERVICE FOR PHONE BANK
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/09/2012	Payee name METRO PCS
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Amount (\$) \$140.00	Payee address City; State; Zip Code 3031 S FREEWAY FORT WORTH, TX 76104
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PHONES SERVICE FOR PHONE BANK
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/20/2012	Payee name OFFICE DEPOT
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Amount (\$) \$99.19	Payee address City; State; Zip Code 401 CARROL STREET FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/14 Report: 15/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/18/2012	5 Payee name OK PAPER CENTER
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6 Amount (\$) \$11.26	7 Payee address City; State; Zip Code 5700 AIRPORT FRWY HALTOM CITY, TX 76117
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/04/2012	Payee name PARISH, EVELYN
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Amount (\$) \$200.00	Payee address City; State; Zip Code 5305 CARRIER DRIVE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name PARISH, EVELYN
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Amount (\$) \$260.00	Payee address City; State; Zip Code 5305 CARRIER DRIVE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/12/2012	Payee name PARISH, EVELYN
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Amount (\$) \$260.00	Payee address City; State; Zip Code 5305 CARRIER DRIVE FORT WORTH, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/14 Report: 16/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/09/2012	5 Payee name PARISH, EVELYN
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6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 5305 CARRIER DRIVE FORT WORTH, TX 76107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/10/2012	Payee name PC RESOURCES
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Amount (\$) \$173.82	Payee address City; State; Zip Code 5434 BRENTWOOD STAIR RD FORT WORTH, TX 76112
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> COMPUTER REPAIR SERVICE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/04/2012	Payee name QUIKTRIP
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Amount (\$) \$30.01	Payee address City; State; Zip Code 2321 BEACH STREET HALTOM CITY, TX 76101
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GAS FOR CAMPAIGN MEETING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/09/2012	Payee name QUIKTRIP
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Amount (\$) \$30.00	Payee address City; State; Zip Code 2321 BEACH STREET HALTOM CITY, TX 76101
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GAS FOR CAMPAIGN MEETING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/14 Report: 17/20		2 FILER NAME ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/04/2012		5 Payee name SHANNON, JANICE			
6 Amount (\$) \$40.00		7 Payee address City; State; Zip Code 4405 ABBEY COURT FORT WORTH, TX 76119			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CONTRACT LABOR FOR CAMPAIGN SERVICE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/25/2012		Payee name SIGNS ETC			
Amount (\$) \$393.76		Payee address City; State; Zip Code 1804 PARK PLACE AVENUE FORT WORTH, TX 76010			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/10/2012		Payee name US POST OFFICE			
Amount (\$) \$27.00		Payee address City; State; Zip Code RIVERSIDE STATION FORT WORTH, TX 76111			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LETTERS TO CONSTITUENTS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/31/2012		Payee name US POST OFFICE			
Amount (\$) \$90.00		Payee address City; State; Zip Code RIVERSIDE STATION FORT WORTH, TX 76111			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LETTERS TO CONSTITUENTS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/14 Report: 18/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/09/2012	5 Payee name US POST OFFICE
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6 Amount (\$) \$135.00	7 Payee address City; State; Zip Code RIVERSIDE STATION FORT WORTH, TX 76111
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> LETTERS TO CONSTITUENTS
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/03/2012	Payee name WALMART
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Amount (\$) \$14.60	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FOOD/BEVERAGE EXPENSE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/07/2012	Payee name WALMART
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Amount (\$) \$25.00	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GAS FOR CAMPAIGN MEETING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/31/2012	Payee name WALMART
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Amount (\$) \$9.71	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/14 Report: 19/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/31/2012	5 Payee name WALMART
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6 Amount (\$) \$35.85	7 Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FOOD/BEVERAGE EXPENSE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/03/2012	Payee name WALMART
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Amount (\$) \$34.61	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> FOOD/BEVERAGE EXPENSE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/12/2012	Payee name WALMART
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Amount (\$) \$30.00	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> GAS FOR CAMPAIGN MEETING
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 20/20	2 FILER NAME ALLEN GRAY, KELLY (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/11/2012	5 Payee name TARRANT COUNT VOTER REGISTRATION
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6 Amount (\$) \$25.01 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 100 E WEATHERFORD FORT WORTH, TX 76193
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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Date 05/08/2012	Payee name WALMART
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Amount (\$) \$16.08 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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Date 05/18/2012	Payee name WALMART
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Amount (\$) \$11.26 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> CAMPAIGN OFFICE SUPPLIES
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