

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TX**

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

CHRIS  
NETTLES

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

P.O. Box 15132  
Fort Worth, Tx 76119

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

791-6676

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

SHAKIA  
NETTLES

7 CAMPAIGN  
TREASURER  
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

1121 E. Bowie  
FORT WORTH, TX 76104

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

874-4576

9 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)

10 PERIOD  
COVERED

Month

Day

Year

Month

Day

Year

3 / 26 / 19

THROUGH

4 / 24 / 19

11 ELECTION

ELECTION DATE

Month

Day

Year

5 / 4 / 19

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

FORT WORTH  
CITY COUNCIL DISTRICT 8

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

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

\$ 1,660.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 8,027.00

EXPENDITURE  
TOTALS

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

\$

4. TOTAL POLITICAL EXPENDITURES

\$ 9,866.85

CONTRIBUTION  
BALANCE

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

\$ 6,049.85

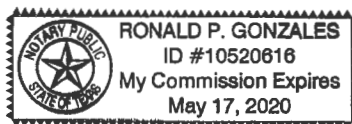
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

18 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

*Chris Nettles*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Chris Nettles, this the 26th  
day of April, 2019, to certify which, witness my hand and seal of office.

*Ronald P. Gonzales*  
Signature of officer administering oath

*Ronald P. Gonzales*  
Printed name of officer administering oath

*Notary*  
Title of officer administering oath



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME <div style="font-size: 1.2em;">CHRIS NETTLES</div>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <div style="font-size: 1.2em;">4/24</div>		<b>5</b> Payee name <div style="font-size: 1.2em;">Family Dollar</div>			
<b>6</b> Amount (\$) <div style="font-size: 1.2em;">\$37.35</div>		<b>7</b> Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Fort Worth, Tx</div>			
<b>8</b> <div style="text-align: center;">PURPOSE OF EXPENDITURE</div>		<b>(a)</b> Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Supplies Expense</div>		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date <div style="font-size: 1.2em;">4/12</div>		Payee name <div style="font-size: 1.2em;">Bankem Printing</div>			
Amount (\$) <div style="font-size: 1.2em;">\$635.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">2357 S. Collins St FTW TX 76014</div>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Advertising Expense</div>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date <div style="font-size: 1.2em;">4/17</div>		Payee name <div style="font-size: 1.2em;">Bankem Printing</div>			
Amount (\$) <div style="font-size: 1.2em;">\$180.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">2357 S. Collins St FTW TX 76014</div>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">advertising Expense</div>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>CHRIS NETTLES</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>4/18</b>		5 Payee name <b>Commack Direct</b>			
6 Amount (\$) <b>\$1200.00</b>		7 Payee address; City; State; Zip Code <b>507 S. Main St FTW TX 76104</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>Mailing Expense</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>4/22</b>		Payee name <b>Office Depot</b>			
Amount (\$) <b>\$86.34</b>		Payee address; City; State; Zip Code <b>FTW, TX</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>advertising Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>4/23</b>		Payee name <b>7-Eleven</b>			
Amount (\$) <b>\$ 43.20</b>		Payee address; City; State; Zip Code <b>Fort Worth, TX</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Gas Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>CHRIS NETILES</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>4/10</b>		5 Payee name <b>Anthony Deininger</b>			
6 Amount (\$) <b>\$200.00</b>		7 Payee address; City; State; Zip Code <b>3201 S. University DR. FTW, TX 76109</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/18</b>		Payee name <b>Ride share</b>			
Amount (\$) <b>\$333.00</b>		Payee address; City; State; Zip Code <b>Dallas, TX</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Assist Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/18</b>		Payee name <b>Commack Direct</b>			
Amount (\$) <b>\$1200.00</b>		Payee address; City; State; Zip Code <b>507. S. Main St FTW TX 76104</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>mailing Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>CHRIS NETTLES</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>4/8</b>		5 Payee name <b>Dewanye (video)</b>			
6 Amount (\$) <b>\$ 325.00</b>		7 Payee address; City; State; Zip Code <b>FTW, TX</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>advertising Expense</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/11</b>		Payee name <b>KHVN Radio</b>			
Amount (\$) <b>\$ 600.00</b>		Payee address; City; State; Zip Code <b>Dallas, TX</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>advertising Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/12</b>		Payee name <b>Comark Direct</b>			
Amount (\$) <b>\$ 3,798.00</b>		Payee address; City; State; Zip Code <b>507 S. Main St FTW, TX 76104</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>mailing Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <b>CHRIS NETTLES</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/1</b>	5 Payee name <b>Dewanye (video)</b>		
6 Amount (\$) <b>\$325.00</b>	7 Payee address; City; State; Zip Code <b>FTW, TX</b>		
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>advertising Expense</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
Date <b>4/3</b>	Payee name <b>USPS</b>		
Amount (\$) <b>\$275.00</b>	Payee address; City; State; Zip Code <b>Fort Worth, TX 76119</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Mailing Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
Date <b>4/8</b>	Payee name <b>Quick Trip (Gas)</b>		
Amount (\$) <b>\$39.90</b>	Payee address; City; State; Zip Code <b>FTW, TX 76119</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Gas Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>CHRIS NETTLES</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>3/27</b>		5 Payee name <b>Metro PCS</b>			
6 Amount (\$) <b>\$120.00</b>		7 Payee address; City; State; Zip Code <b>FTW, TX 76165</b>			
8 <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) <b>Phone Bank Expense</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/1</b>		Payee name <b>Face Book</b>			
Amount (\$) <b>\$64.94</b>		Payee address; City; State; Zip Code <b>—</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4/1</b>		Payee name <b>USPS</b>			
Amount (\$) <b>\$53.00</b>		Payee address; City; State; Zip Code <b>FORT WORTH, TX 76119</b>			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) <b>Mailing Expense</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME  <div style="font-size: 1.2em; font-family: cursive;">CHRIS NETTLES</div>		3 Filer ID (Ethics Commission Filers)
4 Date  <div style="font-size: 1.2em; font-family: cursive;">4/24</div>	<div> <div>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div style="font-size: 1.2em; font-family: cursive;">Randolph Norris</div> <div>6 Contributor address; City; State; Zip Code</div> <div style="font-size: 1.2em; font-family: cursive;">FTW, TX</div> </div>	7 Amount of contribution (\$)  <div style="font-size: 1.2em; font-family: cursive;">\$ 250.00</div>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	<div> <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code</div> </div>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	<div> <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code</div> </div>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	<div> <div>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)</div> <div>Contributor address; City; State; Zip Code</div> </div>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

CHRIS NETTLES

3 Filer ID (Ethics Commission Filers)

4 Date

4/20

5 Full name of contributor

☐ out-of-state PAC (ID#:

Kathy Rock-Gee

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address;

City; State; Zip Code

FTW, Tx 76123

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20

Full name of contributor

☐ out-of-state PAC (ID#:

Post L Group, LLC

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

6015 Harris Pkwy FTW Tx

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20

Full name of contributor

☐ out-of-state PAC (ID#:

Gerald Alley

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

606 Loch Chalet Ct Arlington Tx

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/20

Full name of contributor

☐ out-of-state PAC (ID#:

Jim Austin

Amount of contribution (\$)

\$1,000.00

Contributor address;

City; State; Zip Code

2401 Scott Ave FTW Tx 76103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

CHRIS NETTLES

3 Filer ID (Ethics Commission Filers)

4 Date

4/14

5 Full name of contributor

☐ out-of-state PAC (ID#:

Marla Mosby

7 Amount of contribution (\$)

\$ 70.00

6 Contributor address;

City; State; Zip Code

FTW, Tx

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/14

Full name of contributor

☐ out-of-state PAC (ID#:

Marvin Smith

Amount of contribution (\$)

\$ 70.00

Contributor address;

City; State; Zip Code

Forest Hill, Tx

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/18

Full name of contributor

☐ out-of-state PAC (ID#:

Charles Strand

Amount of contribution (\$)

\$ 2,000.00

Contributor address;

City; State; Zip Code

467 Brycen Ave FTW Tx

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19

Full name of contributor

☐ out-of-state PAC (ID#:

Nisa Hill

Amount of contribution (\$)

\$ 42.00

Contributor address;

City; State; Zip Code

Fort Worth, Tx

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

CHRIS NETTLES

3 Filer ID (Ethics Commission Filers)

4 Date

4/8

5 Full name of contributor

☐ out-of-state PAC (ID#:

Brodrick Rockwell

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address;

City; State; Zip Code

FTW, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/10

Full name of contributor

☐ out-of-state PAC (ID#:

Jim Austin

Amount of contribution (\$)

1,000.00

Contributor address;

City; State; Zip Code

2401 Scott Ave FTW TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/11

Full name of contributor

☐ out-of-state PAC (ID#:

Brian Dixon

Amount of contribution (\$)

\$ 250.00

Contributor address;

City; State; Zip Code

FTW, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/13

Full name of contributor

☐ out-of-state PAC (ID#:

Van Alexander

Amount of contribution (\$)

\$ 70.00

Contributor address;

City; State; Zip Code

FTW, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <b>CHRIS NETILES</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/1</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Greg Hughes</b> 6 Contributor address; City; State; Zip Code <b>FTW TX</b>	7 Amount of contribution (\$) <b>\$ 250.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>4/6</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Darren Keyes</b> Contributor address; City; State; Zip Code <b>FTW, TX</b>	Amount of contribution (\$) <b>\$ 100.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/7</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Walter Williams</b> Contributor address; City; State; Zip Code <b>FTW, TX</b>	Amount of contribution (\$) <b>\$ 25.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>4/8</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Elriha Rogers</b> Contributor address; City; State; Zip Code <b>FTW TX</b>	Amount of contribution (\$) <b>\$ 50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

CHRIS NETILES

3 Filer ID (Ethics Commission Filers)

4 Date

3/29

5 Full name of contributor

☐ out-of-state PAC (ID#:

Jennife Shalts

7 Amount of contribution (\$)

\$25.00

6 Contributor address;

City; State; Zip Code

FTW TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/29

Full name of contributor

☐ out-of-state PAC (ID#:

Andrew Sims

Amount of contribution (\$)

\$125.00

Contributor address;

City; State; Zip Code

FTW TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/29

Full name of contributor

☐ out-of-state PAC (ID#:

Gerald Ailey

Amount of contribution (\$)

\$500.00

Contributor address;

City; State; Zip Code

6006 Loch Chalet Ct FTW TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/30

Full name of contributor

☐ out-of-state PAC (ID#:

Edy Mayfield

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

FTW TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8027. <sup>00</sup>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 9,866.85
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$