			CEHOLDER SE REPORT	OFFICIAL RECORD	FORM C/OH COVER SHEET PG 1		
	The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Fiers)	2 Total pages filed: 9		
3	CANDIDATE / OFFICEHOLDER	Ms/MRs/MR	FIRST Richard "Rick"	В	OFFICE USE ONLY		
	NAME	NICKNAME	LAST Herring	SUFFIX	Date Received		
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 7243, Fort Worth, TX 76111  CSD REC'D APR 28 '23 PM4:59				
	Change of Address				]		
5	CANDIDATE/ OFFICEHOLDER PHONE	(817 )	201-4789	EXTENSION	Date Hand-delivered or Date Postmarked		
6	CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Recelpt # Amount \$		
	NAME	Mr. NICKNAME	Francisco	SUFFIX	Date Processed		
			Hernandez	<b>3</b> 17.117	Date Imaged		
7	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 800 W. Weatherford, Fort Worth, TX 76102					
(F	Residence or Business)						
8	CAMPAIGN TREASURER PHONE	( 817 )	PHONE NUMBER 854-2223	EXTENSION			
9	REPORT TYPE	January 15	30th day before ele	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
		July 15	8th day before elec	tion Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10	PERIOD COVERED	Month 4	Day Year 7 / 23	THROUGH 4	Day Year  / 26 / 23		
11	ELECTION	ELECTION DA	TE	ELECTION TYPE			
		Month Day  5 / 6	Year Primary  ✓ 23 ■ General	Runoff Other Description Special			
12	OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	n)		
		n/a		City Council Dis	strict 11		
14	NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAN	MADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE(S)	COMMITTEE TYPE   COMMITTEE NAME					
	Additional Pages	GENERAL	COMMITTEE ADDRESS				
		SPECIFIC	COMMITTEE CAMPAIGN TREA	SURER NAME			
		:	COMMITTEE CAMPAIGN TRE	ASURER ADDRESS			
			GO TO I	PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME Richard "Rick" Herring	·	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAT PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,485.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,684.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LA OF REPORTING PERIOD	ST DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS O LAST DAY OF THE REPORTING PERIOD	\$ 30,100.00
	wear, or affirm, under penalty of perjury, that the accompanying report is tru	e and correct and includes all information
rec	uired to be reported by me under Title 15, Election Code.  Signature of Ca	Dick Herring and date or Officeholder
·	Please complete either option below	w:
	000000000000000000000000000000000000000	
(1) Affidavit	KATHERINE L CENICOLA NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 06/21/2025 NOTARY ID 13118229-0	
		00 0 - 1
_	,	<u> 18</u> day of <u>April</u> ,
	which, witness my hand and seal of office.	0 12 1
Signature of officer administe	ring oath Printed name of officer administering oath	a Coordinaty  Title of officer administering oath
olgitator of omoor autimitate	OR	This of officer daminicating call
(2) Unsworn Declarati		
(2) 0110110111 200141411		
My name is	, and my date of birth is	s
My address is		
Evenued in		(state) (zip code) (country)
Executed in	County, State of , on the day of (mont	, 20 (year)
	Signature of Cand	idate/Officeholder (Declarant)

### **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

	19 FILER NAME Richard "Rick" Herring		mmis	sion Filers)
	HEDULE SUBTOTALS ME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	14,705.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	780.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	30.10
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	19,684.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	JNDS	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBL TO FILER	JTIONS RETURNED	\$	
				· ·

### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.** 

The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: 2
<sup>2</sup> FILER NAME Richard "F	Rick" Herring		3 Filer ID (Ethics Commission Filers)
4 Date	see attached spreadsheet	#:) State; Zlp Code	7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	)#:)	Amount of contribution (\$)
	Contributor address; City;	į .	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	·	D#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zlp Code	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL CODIES OF	THIS SCHEDIII E AS NE	EDED

Revised 8/17/2020

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

	Rick Herring City Council District 11 campaign contributions	incil Distr	ict 11 campaign c	contribut	ons	and e	and expenditures	
Date	Name	Amount	Address	į	Stat	Zin	Fmplover	
4/6/2023	Martha Linnartz	200	2128 Primrose	Fort Worth	"\ <u>`</u>	76111	Self Employed	
4/7/2023	A. Shivji	20	1945 8th Avenue	Fort Worth	ĭ	76110	Self Employed	
4/10/2023	Ryan Catala	100	600 Harold St 644	Fort Worth	X	76107	FWISD	
4/10/2023	Edward Perkins	25	16524 Cowboy Trail	Fort Worth	ΤX	76247		
4/11/2023	Jose Luna	10		Fort Worth	ΤX		Self Employed	
4/12/2023	Joyce Farmer	1000	2321 Aster	Fort Worth	ΤX	76111	Self Employed	
4/16/2023	Kathryn Omarkhail	250	2055 Lotus	Fort Worth	TX	76111	Mental Health	
4/16/2023	Jane and Gary Cumbie	50	400 Willow Ridge Road	Fort Worth	X	76103	Retired	
	William Urban and Samantha			:				
4/16/2023	Newman	50	1737 Martel Ave	Fort Worth	Т	76103		
4/18/2023	Holly and Bill Schur	50		Fort Worth	T	76107	Retired	
4/18/2023	Megan Lasch	250	on Circle	Austin	×	78731	Developer	į
4/20/2023	Hayley Morrison	250	2100 Daisy Lane	Fort Worth		76111		.
4/23/2023	Edward Perkins	25	16524 Cowboy Trail	Fort Worth		76247		
4/24/2023	Lynn Wiseman	100	507 Bermuda Court	Arlington	×	76011	Retired	
4/25/2023	Brad Roberts	150	2200 Marigold	Fort Worth	ĭ	76111		
4/25/2023	Libby and Doyle Willis	1000	PO Box 7119	Fort Worth	ĭ	76111	Self-employed	
4/26/2023	Steve Laird	250	2305 Yucca	Fort Worth	ĭ	76111	Attorney	
4/26/2023	Rey and Kaye Moreno	50	1213 Kelpie Court	Fort Worth	×	76111		
4/26/2023	Kelly Allen Gray	100	2820 Galvez	Fort Worth	X	76111		
4/27/2023	Brent Lane	25	3313 W 6th Street	Fort Worth	X	76107		
4/7/2023		200	1755 Martel	Fort Worth	TX	76103	self-employed	
4/25/2023	Joe Don Conger	125	3854 Tulsa Way	Fort Worth	×	76107	self-employed	
			4150 International Plaza,		,		Creative Solutions	
4/25/2023	Gary Blake	10,000	Ste. 600	Fort Worth	×	76109	76109 in Healthcare	
4/26/2023	Sue Jones	200	2301 Yucca	Fort Worth	×	76111	retired	
4/26/2023	Robin Ayala	100	1810 8th Avenue	Fort Worth	ĭ	76110		
4/26/2023	Karen Gambrell and John Suggs	125	2504 Marigold	Fort Worth	X	76111	refired	

## NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

Th	ne Instruction Guide explains how to complete this form	1.	1 Total pages Sched	ıle A2: 1	
2 FILER NAME	E		3 Filer ID (Ethics Co	mmission Filers)	
Richard "	Rick" Herring		·		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 780.00	,	
5 Date	6 Full name of contributor	)	8 Amount of	9 In-kind contribution	
	Francisco Hernandez		Contribution \$	description	
04/07/2023	7 Contributor address; City; State;	Zip Code	780.00	banners	
	800 W. Weatherford, Fort Worth, TX 7610	•			
	Sileskii litarei satsias si i		de of Texas. Complete Schedule T.		
	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)		•		
Attorney	principal occupation (FOR JUDICIAL)	_	cisco Hernandez San Roman ntributor's Job title (FOR JUDICIAL) (See Instructions)		
12 Contributors	principal decupation (FOR JUDICIAL)	13 Contribu	dors job title (FOR Ju	DICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date Full name of contributor			Amount of	In-kind contribution	
Date	Contributor address; City; State; Zip Co		Contribution \$	description	
		l Check If travel outside of Texas. Comple		de of Texas, Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	le (FOR NON-JUDICIAL) (See Instructions) Employer (FOR NON-JUDICIAL) (See Instructions)			
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JL	DICIAL) (See Instructions)	
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	·			
<u> </u>			<del>'</del>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED if contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### LOANS SCHEDULE E

If the requested information is not applicable, DO NOT include this page in the report.

<u> </u>				
The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule E:	
<sup>2</sup> FILER NAME Richard"Rick'	'Herring		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UN	IITEMIZED LOANS		\$	
5 Date of loan 12/30/2022	Rick Herring	PAC (ID#:)	9 Loan Amount (\$) 25,100.00	
6 Is lender a financial Institution?	8 Lender address; City; 1801 Bolton, Fort Worth, TX 76	State; Zip Code	10 Interest rate	
Y N		11 Maturity date		
	on / Job title (See Instructions)	13 Employer (See Instructions)		
ERISA Consu	iltant	Principal Financial C	<del>S</del> roup	
14 Description of Colling	ateral	Check if personal function account (See Instruction	ls were deposited into political ons)	
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)	
<b>∳</b> not applicable	<b>18</b> Guarantor address; City;	State; Zlp Code		
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)	
04/07/2023	Rick Herring		5,000.00	
ls lender a financial Institution?	Lender address; City; 1801 Bolton, Fort Worth, TX 76	State; Zip Code	Interest rate	
Y N	,		Maturity date	
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)		
ERISA Consu	ıltant	Principal Financial C	<b>3</b> roup	
Description of Colla	ateral	Check if personal func account (See Instructi	ds were deposited into political ons)	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)	
	Guarantor address; City;	State; Zip Code	·	
not applicable			<u> </u>	
Principal Occupati	on (See Instructions)	Employer (See Instructions)		
If le	ATTACH ADDITIONAL COP	IES OF THIS SCHEDULE AS NEE		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Credit Card Payment	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Richard "Rick" Herring		3 Filer ID (Ethlo	s Commission Filers)	
4 Date	5 Payee name see attached spreadsheet		1		
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		g expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	ght Office held		
Date	Payee name				
Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	g expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		Office held	
Date	Payee name				
Amount (\$)	Payee address;	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas, Complete Schedule T.	Check if Aust	stin, 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 NEI	EDED		

Rick Herring Campaign Expenditures

4/21/2023 4/25/2023	4/13/2023 4/14/2023 4/18/2023 4/21/2023	4/11/2023	4/10/2023	<u>Date</u> A
3,600 Phyllis W. Allen 828.65 Print Place	3,600 Phyllis W. Allen 5,000 Compete Digital 1,305.49 Metro Mailer 2800.75 Metro Mailer	2,500 Travis Parmer	49.08 Tommy's Grill	Amount Name
2717 Ennis 2904 Cullen	2717 Ennis 1317 Potomac 5719 E. Rosedale 5719 E. Rosedale	6532 Genoa Rd	Forest Park Blvd	Address
Fort Worth Fort Worth	Fort Worth Washington Fort Worth Fort Worth	Fort Worth	Fort Worth	City
ᅻ ᅻ	코 코 ႙ 코	¥	⇉	State Zip
76111 Office Overhead 76107 Printing Expense	76111 Office Overhead 20003 Printing Expense 76112 Printing Expense 76112 Printing Expense	76116 Office Overhead	76109 Event Expense	Zip <u>Category</u>
Consulting Expense Print Materials	Consulting Expense Print Materials Print Materials Print Materials	Consulting Expense	Food/Beverage	Description