# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

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

				FI. WORTH, IA		
The C/OH Instruction G	uide explains how to	complete this form.	1 1	Filer ID (Ethics Commission Filers)	2 Total pages file	ed: 8
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR MR.	FIRST Chris		мі	OFFICE	USE ONLY
NAME	NICKNAME	LAST Nettles		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE: ZIP CODE	050 JUL 16	REC'D '24 PK5:09
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		or Date Postmarked
6 CAMPAIGN TREASURER	Ms/MRS/MR Mrs.	<sub>FIRST</sub> Shakia		МІ	Receipt #	Amount \$
NAME	NICKNAME	LAST		SUFFIX	Date Processed	
		Nettles			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO	O PO BOX PLEASE); APT / S	UITE #;	CITY;	STATE;	ZIP CODE
(Residence or Business)						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		
9 REPORT TYPE	January 15  July 15	30th day before el		Runoff  Exceeded Modified Reporting Limit	treasurer ap (Officeholde	
10 PERIOD COVERED	Month 1	Day Year / 1 / 24		THROUGH 6	Day Year / 30 / 24	
11 ELECTION	Month Day	Year Primary General		Runoff Other Description  Special		
12 OFFICE	Fort Worth C	ity Council Distri	ict 8	13 OFFICE SOUGHT (if know	m)	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE CONSENT. CANDIDATES A	HOLDER. THESE EXPENDITURE	SMAY	TED OR POLITICAL EXPENDITURES IAVE BEEN MADE WITHOUT THE CAP REPORT THIS INFORMATION ONLY IF	IDIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
NV 19190	COMMITTEE TIPE	OOMMITTEE WAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURE	R NAME		
		COMMITTEE CAMPAIGN TR	EASUR	ER ADDRESS		
GO TO PAGE 2						

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME Chris Nettles	16 Filer	ID (Ethics Commission Filers)		
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 27,200.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00		
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 85,269.44		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$		
	wear, or affirm, under penalty of perjury, that the accompanying report is true and co juired to be reported by me under Title 15, Election Code.	rrect and includes all information		
rec	dured to be reported by the under Title 15, Election Code.			
	01 -110-			
	Miss /	Marine and the state of the sta		
	Signature of Candidate	or Officeholder		
	Please complete either option below:			
r lease complete ettiler option below.				
(1) Affidavit	ELISA WINTERROWD Notary Public, State of Texas Comm. Expires 01-11-2027 Notary ID 13413861-8			
NOTARY STAMP/SEAL				
Sworn to and subscribed	before me by Chris Nettles this the 10	day of July,		
20 d to certify	which, witness my hand and seal of office.	Admin Assis!		
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath		
THE STATE OF THE S	OR			
(2) Unsworn Declaration				
My name is	, and my date of birth is			
My address is				
	(street) (city) (state)	(zip code) (country)		
Executed in	County, State of , on the day of			
	(month)	(year)		
	Signature of Candidate/Offic	eholder (Declarant)		

## SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

FILER NAME	20 Filer ID (Ethics Commission Filers)
nris Nettles	
SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 27,200.00
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
SCHEDULE E: LOANS	\$
SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	CONTRIBUTIONS \$
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS \$
SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH \$
SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	TIONS RETURNED \$
	SCHEDULE SUBTOTALS NAME OF SCHEDULE  SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUR  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS

#### SCHEDULE A1

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

		*		
The I	nstruction Guide explains how to complete this form.	1 Total pages Schedule A1:		
2 FILER NAME	hris Nettles	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Richard Roby III 6 Contributor address; City; State; Zip Code 6234 Skylark Gr MRJ 7x 74180	7 Amount of contribution (\$) 500.00		
8 Principal occup	eation / Job title (See Instructions)  9 Employer (See Instructions)	tions)		
Date	Full name of contributor  Ore goy  Contributor address;  Out-of-state PAC (ID#:)  Contributor address;  City;  State; Zip Code	Amount of contribution (\$)		
1/11/129	Contributor address; City; State; Zip Code 724 Pennsy Vania Age FAV TX 7614	250.00		
Principal occupa	ation / Job title (See Instructions) Employer (See Instructions)	tions)		
Date	Full name of contributor out-of-state PAC (ID#:)  Robert Hunt  Contributor address; City; State; Zip Code  80 4 KARbuy Ct. Foullala K	Amount of contribution (\$)		
	80 4 KARbry Ct. Forth ala K ation / Job title (See Instructions)  Employer (See Instruc			
Employer (See Instructions)				
Date	Full name of contributor  Out-of-state PAC (ID#:)  Out-of-state PAC (ID#:)	Amount of contribution (\$)		
Principal occupa	ation / Job title (See Instructions) Employer (See Instruc	tions)		
	ATTACH ADDITIONAL CODIES OF THE COLUMN FACE	FEREN		

ATTACHADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

#### 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 form.	1 Total pages Schedule A1:		
2 FILER NAME	Chris Nettles	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor  To by  City; State; Zip Code	7 Amount of contribution (\$)		
	2400 Cypus For Th			
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	tions)		
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
111/24	Linda Plyilk  Contributor address; City; State; Zip Code  1200 Summit Aug Flu TX	250,00		
1700 - 10	ation / Job title (See Instructions) Employer (See Instructions)	ions)		
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
111/24	Jonah Murray Contributor address; City; State; Zip Code	100.00		
	1700 Pacific Are Pullas TX			
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
11/124	FW Fire fighters  Contributor address; City; State; Zip Code  3855 Tulsa Way FRW I	5,000.00		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				

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#### SCHEDULE A1

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	N 2	E		
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:		
2 FILER NAME	Chris Netlles	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor  Javed Williams  6 Contributor address;  City; State; Zip Code  U731 Trail Claff FAU TK	7 Amount of contribution (\$)		
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instruc	ctions)		
Date   (	Full name of contributor  Jeanelle Oavis  Contributor address;  City; State; Zip Code  3650 Chicara Ct. Fyw TX	Amount of contribution (\$)		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				
Date	Full name of contributor  Rayna Classe  Contributor address;  City; State; Zip Code  5004 Mel bourne Pr Tx	Amount of contribution (\$)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor  Brinton  Payne  Contributor address;  City;  State; Zip Code  W321  Tuneau  Rd  FN  K	Amount of contribution (\$)		
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				

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### SCHEDULE A1

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		27 700 11 700 40	
The	Instruction Guide explains how to complete this	1 Total pages Schedule A1:	
2 FILER NAME	Chris Nettles		3 Filer ID (Ethics Commission Filers)
5 Full name of contributor      1   24   5 Full name of contributor   out-of-state PAC (ID#:			7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 1/11   24		State; Zip Code	Amount of contribution (\$)
Principal occup	932 East Tevell Age pation / Job title (See Instructions)	Employer (See Instruct	ions)
11 9 24	Full name of contributor out-of-state PAC  **Lub Bak**  Contributor address; City;  **TTU	State; Zip Code	Amount of contribution (\$)  5, ODU,
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 4   8   24	Full name of contributor  Billy Bob  Contributor address;  City;	State; Zip Code	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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#### SCHEDULE A1

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The	nstruction 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  GT (24)	5 Full name of contributor out-of-state PAC Accountable Government 6 Contributor address; City; 430 Old Fitzhugh	State; Zip Code  9 Employer (See Instruction	7 Amount of contribution (\$)  5,000,600	
	· · · · · · · · · · · · · · · · · · ·		,	
Date	Full name of contributor out-of-state PAC	3	Amount of contribution (\$)	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
		State; Zip Code		
Principal occup	Principal occupation / Job title (See Instructions)  Employer (See Instructions)			
Date	Full name of contributor out-of-state PAC  Contributor address; City;		Amount of contribution (\$)	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
		,		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

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