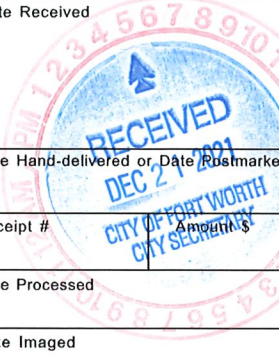


CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <u>46</u>	OFFICE USE ONLY 	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <u>Chris</u>		MI
	NICKNAME	LAST <u>Nettles</u>		SUFFIX
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff		<input type="checkbox"/> Final report
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit		Other (specify)
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)		
	<input type="checkbox"/> 8th day before election			
5 ORIGINAL PERIOD COVERED		Month Day Year <u>04 / 22 / 2021</u> THROUGH <u>06 / 30 / 2021</u>	Date Hand-delivered or Date Postmarked Receipt # Date Processed Date Imaged	

6 EXPLANATION OF CORRECTION

Adding addresses to monetary political contributions

7 SIGNATURE I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

- ☐ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.
- ☐ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Chris Nettles

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Chris Nettles this the 21st day of December

2021 to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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 _____, 20____.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

Chris Nettles

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,025.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 150.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 43,483.94
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	\$

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 form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 4/22/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Alley 6 Contributor address; City; State; Zip Code Fort Worth, TX	7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Hibbler Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominique Alexander Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/25/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pamela Young Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
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**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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jessica Jones 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/28/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacque Backwell Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$340.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/1/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuell Jones Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antje Crawford Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$25.00
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**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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/2/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon L. Ford	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal Nealy	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Jenkins	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aquanna Barnes	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code Ft. 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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/2/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiesa Leggett	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carla Morton	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Austin	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Russell	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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**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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chakina Watkins 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanya Gree Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Schultes Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil Collier Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$10.00
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

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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grea Hughes 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Fountain Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory Franklin Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shonda Dews Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$500.00
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

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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Rockwell 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/5/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nan Miller Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crystal Allaway Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$2,300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trent Gilley Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$1,000.00
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

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:

17

2 FILER NAME

Chris Nettles

3 Filer ID (Ethics Commission Filers)

4 Date

5/8/21

5 Full name of contributor

Billie Dorado

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/9/21

Full name of contributor

Huyen Pham

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/21

Full name of contributor

Elrita Rogers

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/10/21

Full name of contributor

Curtis Brown

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$1,500.00

Contributor address;

City;

State;

Zip Code

Ft. 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

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 17

2 FILER NAME

Chris Nettles

3 Filer ID (Ethics Commission Filers)

4 Date

5/10/21

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Sweet

6 Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

7 Amount of contribution (\$)

\$200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/11/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mary Bockwell

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$325.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Delya Phillips

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jonathan Rubio

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$50.00

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

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: 17

2 FILER NAME

Chris Nettles

3 Filer ID (Ethics Commission Filers)

4 Date

5/12/21

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kenny McGree

6 Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/12/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Bell

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/12/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerald Alley

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/12/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Gice

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Amount of contribution (\$)

\$200.00

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**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: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/12/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrie Black	7 Amount of contribution (\$) \$3,000.00
6 Contributor address; City; State; Zip Code Ft. Worth, Tx		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jill Darden	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ft. Worth, Tx		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roderick Butcher	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/14/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Austin	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code Ft. 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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/14/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Burton 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$ 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/14/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Anderson Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/16/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew Pope Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/17/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elrita Rogers Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 50.00
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/17/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Dixon 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$ 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny A. Tucker Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huyen Pham Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack West Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 15.00
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/20/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keisha Jones 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$ 3,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broderick Backwell Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 2,400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krista Daniels Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/21/20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Smith Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$ 20.00
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/23/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marty Taylor 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Bookwell Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gwenn Burud Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton Becnel Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$100.00
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

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: 17

2 FILER NAME

Chris Nettles

3 Filer ID (Ethics Commission Filers)

4 Date

5/28/21

5 Full name of contributor

Domingo Garcia

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 1,000.00

6 Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

5/28/21

Full name of contributor

Sharric Hickman

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 115.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/29/21

Full name of contributor

Eddie Griffin

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 50.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/31/21

Full name of contributor

Jack West

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 25.00

Contributor address;

City;

State;

Zip Code

Ft. 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**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: 17

2 FILER NAME

Chris Nettles

3 Filer ID (Ethics Commission Filers)

4 Date

6/4/21

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Knight

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/14/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathy Bockwell

Amount of contribution (\$)

\$300.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/15/21

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathy Andersson

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2:	
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 6/5/21	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramon Romero Campaign	8 Amount of Contribution \$ \$150.00	9 In-kind contribution description Advertising
7 Contributor address; City; State; Zip Code PO Box 181 Ft. Worth, TX 76101		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(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 <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

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	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 <div style="font-size: 1.2em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">4/23/21</div>	5 Payee name <div style="font-size: 1.2em;">Dollar Tree</div>		
6 Amount (\$) <div style="font-size: 1.2em;">\$50.62</div>	7 Payee address; City; State; Zip Code <div style="font-size: 1.2em; text-align: center;">FTW, TX</div>		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Event expense</div>		(b) Description <div style="font-size: 1.2em;">Supplies</div>
	(c) <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 <div style="font-size: 1.2em;">4/23/21</div>	Payee name <div style="font-size: 1.2em;">Walmart</div>		
Amount (\$) <div style="font-size: 1.2em;">\$12.54</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em; text-align: center;">FTW, TX</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Event expense</div>		Description <div style="font-size: 1.2em;">Supplies</div>
	<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;">4/28/21</div>	Payee name <div style="font-size: 1.2em;">ActBlue - RideShare 2Vote</div>		
Amount (\$) <div style="font-size: 1.2em;">\$50.00</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em; text-align: center;">FTW, TX</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Other</div>		Description <div style="font-size: 1.2em;">N/A</div>
	<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

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
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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 4/28/21	5 Payee name Harland Clarke	
6 Amount (\$) \$50.88	7 Payee address; City; State; Zip Code FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) banking expense	(b) Description Checks
	(c) <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 4/30/21	Payee name Facebook	
Amount (\$) \$337.93	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Ads
	<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 4/29/21	Payee name Comark Direct	
Amount (\$) \$2,639.96	Payee address; City; State; Zip Code Main St. Ft. Worth, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description Printing
	<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		

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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
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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 5/3/21		5 Payee name Cousin's BBQ			
6 Amount (\$) \$46.56		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food		(b) Description Food		
	(c) <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					
Date 5/3/21		Candidate / Officeholder name Larry Johnson			
Amount (\$) \$320.00		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing		Description canvassing		
	<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					
Date 5/3/21		Candidate / Officeholder name Quick Trip			
Amount (\$) \$40.40		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel		Description Gas		
	<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					
Date		Candidate / Officeholder name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <div style="font-size: 1.5em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)	
4 Date <div style="font-size: 1.5em;">5/3/21</div>		5 Payee name <div style="font-size: 1.5em;">Tiger Mart</div>			
6 Amount (\$) <div style="font-size: 1.5em;">\$21.05</div>		7 Payee address; City; State; Zip Code <div style="font-size: 1.5em;">FTW, TX</div>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">Travel</div>		(b) Description <div style="font-size: 1.5em;">Gas</div>		
	(c) <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					
Date <div style="font-size: 1.5em;">5/3/21</div>		Payee name <div style="font-size: 1.5em;">7-11</div>			
Amount (\$) <div style="font-size: 1.5em;">\$10.25</div>		Payee address; City; State; Zip Code <div style="font-size: 1.5em;">FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">Food</div>		Description <div style="font-size: 1.5em;">Food</div>		
	<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					
Date <div style="font-size: 1.5em;">5/3/21</div>		Payee name <div style="font-size: 1.5em;">Ben's Triple B</div>			
Amount (\$) <div style="font-size: 1.5em;">\$15.39</div>		Payee address; City; State; Zip Code <div style="font-size: 1.5em;">Bosedale St. FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">Food</div>		Description <div style="font-size: 1.5em;">Food</div>		
	<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					

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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	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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/4/21	5 Payee name Bernard Earl	
6 Amount (\$) \$365.00	7 Payee address; City; State; Zip Code FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) canvassing	(b) Description canvassing
	(c) <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 5/5/21	Payee name Frijoles Cafe Cantina	
Amount (\$) \$40.57	Payee address; City; State; Zip Code NRH, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food	Description Food
	<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 5/5/21	Payee name Elijah Strong	
Amount (\$) \$550.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) consulting	Description digital
	<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

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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	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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 5/7/21		5 Payee name Whataburger			
6 Amount (\$) \$5.13		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food		(b) Description Food		
	(c) <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					
Date 5/10/21		Payee name Poly Hardware			
Amount (\$) \$29.86		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event		Description Supplies		
	<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					
Date 5/10/21		Payee name Shell Services			
Amount (\$) \$10.03		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel		Description Gas		
	<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					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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	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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/11/21	5 Payee name Bankem Printing	
6 Amount (\$) \$950.00	7 Payee address; City; State; Zip Code Matlock St. # Arlington, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description Printing
	(c) <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 5/12/21	Payee name Steven Wilson	
Amount (\$) \$400.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Digital Ads.
	<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 5/12/21	Payee name Text Surge	
Amount (\$) \$420.96	Payee address; City; State; Zip Code —	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description text messages
	<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		

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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
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 <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;">5/13/21</div>		5 Payee name <div style="font-size: 1.2em; font-family: cursive;">Tami Kane</div>			
6 Amount (\$) <div style="font-size: 1.2em; font-family: cursive;">\$ 110.00</div>		7 Payee address; City; State; Zip Code <div style="font-size: 1.2em; font-family: cursive;">FTW, TX</div>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">canvassing</div>		(b) Description <div style="font-size: 1.2em; font-family: cursive;">canvassing</div>		
	(c) <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					
Date <div style="font-size: 1.2em; font-family: cursive;">5/13/21</div>		Payee name <div style="font-size: 1.2em; font-family: cursive;">American Technology Consulting</div>			
Amount (\$) <div style="font-size: 1.2em; font-family: cursive;">\$200.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em; font-family: cursive;">—</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">Advertising</div>		Description <div style="font-size: 1.2em; font-family: cursive;">List Purchase</div>		
	<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					
Date <div style="font-size: 1.2em; font-family: cursive;">5/14/21</div>		Payee name <div style="font-size: 1.2em; font-family: cursive;">Lillian Schoolfield</div>			
Amount (\$) <div style="font-size: 1.2em; font-family: cursive;">\$99.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em; font-family: cursive;">FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em; font-family: cursive;">canvassing</div>		Description <div style="font-size: 1.2em; font-family: cursive;">canvassing</div>		
	<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					

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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
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 <div style="font-size: 1.2em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)	
4 Date <div style="font-size: 1.2em;">5/14/21</div>		5 Payee name <div style="font-size: 1.2em;">lonos</div>			
6 Amount (\$) <div style="font-size: 1.2em;">\$ 47.82</div>		7 Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.5em;">—</div>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Advertising</div>		(b) Description <div style="font-size: 1.2em;">Website</div>		
	(c) <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 <div style="font-size: 1.2em;">5/18/21</div>		Payee name <div style="font-size: 1.2em;">Facebook</div>			
Amount (\$) <div style="font-size: 1.2em;">\$400.00</div>		Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.5em;">—</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Advertising</div>		Description <div style="font-size: 1.2em;">Ad Buy</div>		
	<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;">5/18/21</div>		Payee name <div style="font-size: 1.2em;">Comark Direct</div>			
Amount (\$) <div style="font-size: 1.2em;">\$5,891.98</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Main St. FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Printing</div>		Description <div style="font-size: 1.2em;">Printing</div>		
	<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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 <div style="font-size: 1.2em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)	
4 Date <div style="font-size: 1.2em;">5/18/21</div>		5 Payee name <div style="font-size: 1.2em;">Richard Davis</div>			
6 Amount (\$) <div style="font-size: 1.2em;">\$130.00</div>		7 Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>		(b) Description <div style="font-size: 1.2em;">canvassing</div>		
	(c) <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					
Date <div style="font-size: 1.2em;">5/18/21</div>		Payee name <div style="font-size: 1.2em;">Joey Betana</div>			
Amount (\$) <div style="font-size: 1.2em;">\$130.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>		Description <div style="font-size: 1.2em;">canvassing</div>		
	<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					
Date <div style="font-size: 1.2em;">5/18/21</div>		Payee name <div style="font-size: 1.2em;">Lillian Schoolfield</div>			
Amount (\$) <div style="font-size: 1.2em;">\$258.50</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>		Description <div style="font-size: 1.2em;">canvassing</div>		
	<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					

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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	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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 5/19/21		5 Payee name USPS			
6 Amount (\$) \$55.00		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage		(b) Description Postage/stamps		
	(c) <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 5/21/21		Payee name IONOS			
Amount (\$) \$1.88		Payee address; City; State; Zip Code —			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Fees		
	<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 5/21/21		Payee name Tammi Kane			
Amount (\$) \$214.50		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing		Description canvassing		
	<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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 <div style="text-align: center; font-size: 1.2em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center; font-size: 1.2em;">5/21/21</div>	5 Payee name <div style="text-align: center; font-size: 1.2em;">Comark Direct</div>		
6 Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$2,230.60</div>	7 Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">FTW, TX</div>		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.5em;">Printing</div>		(b) Description <div style="text-align: center; font-size: 1.5em;">Printing</div>
	(c) <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 <div style="text-align: center; font-size: 1.2em;">5/24/21</div>	Payee name <div style="text-align: center; font-size: 1.2em;">Home Depot</div>		
Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$16.13</div>	Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">FTW, TX</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.5em;">Event</div>		Description <div style="text-align: center; font-size: 1.5em;">supplies</div>
	<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="text-align: center; font-size: 1.2em;">5/24/21</div>	Payee name <div style="text-align: center; font-size: 1.2em;">Pappasito's Cantina</div>		
Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$100.00</div>	Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">FTW, TX</div>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.5em;">Food</div>		Description <div style="text-align: center; font-size: 1.5em;">Food</div>
	<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			
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/25/21	5 Payee name Comark Direct	
6 Amount (\$) \$2,230.60	7 Payee address; City; State; Zip Code Main St. FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) printing	(b) Description printing
	(c) <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
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Date 5/25/21	Payee name CoMark Direct		
Amount (\$) \$291.50	Payee address; City; State; Zip Code Main St. FTW, TX		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing	Description printing	
	<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
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Date 5/26/21	Payee name Lupe Johnson		
Amount (\$) \$220.00	Payee address; City; State; Zip Code FTW, TX		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing	
	<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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/26/21	5 Payee name Joey Betana	
6 Amount (\$) \$40.50	7 Payee address; City; State; Zip Code FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) canvassing	(b) Description canvassing
	(c) <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 5/26/21	Payee name Richard Davis	
Amount (\$) \$40.50	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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 5/26/21	Payee name Lillian Schofield	
Amount (\$) \$198.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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		

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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	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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 5/27/21		5 Payee name Sonic Drive-In			
6 Amount (\$) \$10.79		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) food		(b) Description food		
	(c) <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 5/28/21		Payee name CoMark Direct			
Amount (\$) \$2,220.34		Payee address; City; State; Zip Code Main St. FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing		Description printing		
	<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 5/19/21		Payee name American Union Graphics			
Amount (\$) \$2,230.60		Payee address; City; State; Zip Code Main St. FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing		Description printing		
	<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					

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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	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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/18/21	5 Payee name Facebook	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code —	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising	(b) Description ads
	(c) <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 5/20/21	Payee name Text Surge	
Amount (\$) \$506.70	Payee address; City; State; Zip Code —	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising	Description text messages
	<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 6/1/21	Payee name Larry Johnson	
Amount (\$) \$450.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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

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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
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 <div style="font-size: 1.2em;">Chris Nettles</div>		3 Filer ID (Ethics Commission Filers)	
4 Date <div style="font-size: 1.2em;">6/1/21</div>		5 Payee name <div style="font-size: 1.2em;">Bankem Printing</div>			
6 Amount (\$) <div style="font-size: 1.2em;">\$ 250.00</div>		7 Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Ft Worth Matlock Arlington, TX</div>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">printing</div>		(b) Description <div style="font-size: 1.5em;">printing</div>		
	(c) <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					
Date <div style="font-size: 1.2em;">6/1/21</div>		Payee name <div style="font-size: 1.2em;">Facebook</div>			
Amount (\$) <div style="font-size: 1.2em;">\$ 284.09</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">—</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">Advertising</div>		Description <div style="font-size: 1.5em;">Ads</div>		
	<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					
Date <div style="font-size: 1.2em;">6/2/21</div>		Payee name <div style="font-size: 1.2em;">Bankem Printing</div>			
Amount (\$) <div style="font-size: 1.2em;">\$ 340.00</div>		Payee address; City; State; Zip Code <div style="font-size: 1.2em;">Matlock Rd. Arlington, TX</div>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.5em;">printing</div>		Description <div style="font-size: 1.5em;">printing</div>		
	<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					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

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	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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 6/2/21	5 Payee name COMark Direct	
6 Amount (\$) \$5,891.99	7 Payee address; City; State; Zip Code Main St. FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) printing	(b) Description printing
	(c) <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 6/2/21	Payee name Kent Quepons	
Amount (\$) \$232.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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 6/2/21	Payee name Terry Pane	
Amount (\$) \$356.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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		

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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 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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <div style="font-size: 1.2em;">Chris Nettles</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em;">6/7/21</div>	5 Payee name <div style="font-size: 1.2em;">Lupe Johnson</div>	
6 Amount (\$) <div style="font-size: 1.2em;">\$200.00</div>	7 Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>	(b) Description <div style="font-size: 1.2em;">canvassing</div>
	(c) <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 <div style="font-size: 1.2em;">6/7/21</div>	Payee name <div style="font-size: 1.2em;">Lupe Johnson</div>	
Amount (\$) <div style="font-size: 1.2em;">\$200.00</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>	Description <div style="font-size: 1.2em;">canvassing</div>
	<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;">6/8/21</div>	Payee name <div style="font-size: 1.2em;">Terry Pane</div>	
Amount (\$) <div style="font-size: 1.2em;">\$162.00</div>	Payee address; City; State; Zip Code <div style="font-size: 1.2em;">FTW, TX</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">canvassing</div>	Description <div style="font-size: 1.2em;">canvassing</div>
	<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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 6/8/21	5 Payee name All Storage	
6 Amount (\$) \$132.65	7 Payee address; City; State; Zip Code FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other	(b) Description other
	(c) <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 6/8/21	Payee name Larry Johnson	
Amount (\$) \$340.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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 6/9/21	Payee name Buffalo Bros.	
Amount (\$) \$78.23	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) meeting	Description food
	<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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 6/10/21	5 Payee name Black Coffee	
6 Amount (\$) \$4.25	7 Payee address; City; State; Zip Code FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) meeting	(b) Description beverage
	(c) <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 6/10/21	Payee name Eddie Forte	
Amount (\$) \$850.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other	Description equipment
	<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 6/10/21	Payee name Lillian Schoolfield	
Amount (\$) \$206.25	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing	Description canvassing
	<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

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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
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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 6/11/21	5 Payee name Comack Direct	
6 Amount (\$) \$3,903.41	7 Payee address; City; State; Zip Code Main St. FTW, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) printing	(b) Description printing
	(c) <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		
Date 5/26/21	Payee name Premier Billboard	
Amount (\$) \$891.00	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description sign
	<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		
Date 6/14/21	Payee name Quick Trip	
Amount (\$) \$20.02	Payee address; City; State; Zip Code FTW, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) travel (meeting)	Description gas
	<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		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 6/14/21		5 Payee name Lupe Johnson			
6 Amount (\$) \$260.00		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) canvassing		(b) Description canvassing		
	(c) <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 6/14/21		Payee name Kent Quepons			
Amount (\$) \$373.50		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing		Description canvassing		
	<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 6/18/21		Payee name Antonieta Quepons			
Amount (\$) \$315.00		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) canvassing		Description canvassing		
	<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	

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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	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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 6/22/21		5 Payee name Antonieta Quepons			
6 Amount (\$) \$274.75		7 Payee address; City; State; Zip Code FTW, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) canvassing		(b) Description canvassing		
	(c) <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 6/16/21		Payee name USPS			
Amount (\$) \$146.00		Payee address; City; State; Zip Code FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) postage		Description postage		
	<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 6/17/21		Payee name lonos			
Amount (\$) \$15.96		Payee address; City; State; Zip Code —			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description website fees		
	<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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles		3 Filer ID (Ethics Commission Filers)	
4 Date 6/17/21		5 Payee name Text Surge			
6 Amount (\$) \$2,026.34		7 Payee address; City; State; Zip Code <div style="text-align: center; border-bottom: 1px solid black; height: 20px; margin: 5px 0;"></div>			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description text messages		
	(c) <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					
Date 6/21/21		Payee name Jennifer's T-Shirt Shop			
Amount (\$) \$167.00		Payee address; City; State; Zip Code <div style="text-align: center; border-bottom: 1px solid black; height: 20px; margin: 5px 0;"></div> FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description t-shirts		
	<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					
Date 6/28/21		Payee name Foodland			
Amount (\$) \$27.37		Payee address; City; State; Zip Code <div style="text-align: center; border-bottom: 1px solid black; height: 20px; margin: 5px 0;"></div> FTW, TX			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) event		Description food		
	<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					

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 6/30/21	5 Payee name Patrick Brueggman	
6 Amount (\$) \$162.00	7 Payee address; City; State; Zip Code Alexandria, VA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) canvassing	(b) Description canvassing
	(c) <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 6/30/21	Payee name Stripe		
Amount (\$) \$282.06	Payee address; City; State; Zip Code —		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Fees	
	<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	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	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

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