OFFICIAL RECORD **CANDIDATE / OFFICEHOLDER** FORM C/OH CITY SECRETARY CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** FT. WORTH, TX Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 36 CANDIDATE / MS/MRS/MR FIRST MI **OFFICE USE ONLY OFFICEHOLDER** Mattie J. NAME **NICKNAME** LAST **SUFFIX** Parker CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING **ADDRESS** CITY OF FORT Change of Address Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI TREASURER NAME Mrs. Leah M. NICKNAME LAST SUFFIX King CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER ADDRESS** 1001 W. Rosedale Street #1448 Fort Worth TX76104 (Residence or Business) AREA CODE CAMPAIGN PHONE NUMBER **EXTENSION TREASURER** (817) 602-0729 PHONE REPORT **TYPE** 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit PERIOD Month Day Year Day Year Month COVERED **THROUGH** 07/01/2021 12/31/2021 **ELECTION DATE** 10 ELECTION **ELECTION TYPE** Month Day Year Primary Runoff Other General Special

Forms provided by Texas Ethics Commission

OFFICE HELD (if any)

Mayor of Fort Worth, Texas

11 OFFICE

GO TO PAGE 2
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12 OFFICE SOUGHT (if known)

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

				2 of 36
13 C / OH NAME	Parker, Mattie J.	14 File	r ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made. These expenditures may have been made without the cand difficeholders are required to report this information only if	didate's or officeho	lder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
_	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN PLED ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRON		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 116,550.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 11.20
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 42,344.58
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA RIOD	Y OF THE	\$ 95,628.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE TING PERIOD	LAST DAY	\$ 0.00
17 AFFIDAVIT				
	Beth Ellis My Commission Expires 9 03/05/2025 1D No. 3856250	I swear, or affirm, under penalty of perjutrue and correct and includes all informunder Title 15, Election Code. Signature of Candida	ation required to b	e reported by me
	TARY STAMP / SEAL AB	Mar D	10th	
Sworn to and subscrot	cribed before me, by the s	aid Nottle Arce Continued, this ertify which, witness my hand and seal of office.	s the \\\	day
Signature of office	cer administering	Printed name of officer administering	Title of officer ad	dministering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 36
18 FILER	JAME	19 Filer ID		
Parker	, Mattie J.			
	ULE SUBTOTALS OF SCHEDULE		SU	BTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	116,550.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	TATALE Milatana Pitta
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$	42,344.58
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	IONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	***************************************	\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	**************************************
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	143.50
			<u> </u>	

MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDU	LE A1
The Instruc	ction Guide explains how to complete this fo	orm,	1 Total pages Schedule A1: Sch: 1/16 Rpt: 4/36	
2 FILER NAME Parker, Matti	е Ј.		3 Filer ID	
4 Date 12/28/2021	Full name of contributor		7 Amount of Contribution (\$)	\$500.00
	6 Contributor address; City; State; Zip Code 2928 Alton Rd			
0 Dia-iI	Fort Worth, TX 76109			
в Ринсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Date 12/03/2021	Full name of contributor out-of-state PAC (ID#:_Allen, Don Contributor address; City; State; Zip Code 7302 Tidal Trace)	Amount of Contribution (\$)	\$1,000.00
	Arlington, TX 76016			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Date 12/14/2021	Contributor address; City; State; Zip Code 1604 Fourth Ave)	Amount of Contribution (\$)	\$2,500.00
Principal occu	Fort Worth, TX 76104 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 	
Date 12/14/2021	Full name of contributor out-of-state PAC (ID#:_Auld, Marianne Contributor address; City; State; Zip Code 201 Main St Suite 2500 Fort Worth, TX 76102		Amount of Contribution (\$)	\$5,000.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Date 12/28/2021	Full name of contributor out-of-state PAC (ID#:_ BNSF Rail PAC Contributor address; City; State; Zip Code PO Box 961039)	Amount of Contribution (\$)	\$5,000.00
Principal occu	Fort Worth, TX 76161 pation / Job title (See Instructions)	Employer (See Instructions	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	by Texas Ethics Commission www.ethics	ototo tv us		L.1.ab979f02

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/16 Rpt: 5/36 2 FILER NAME 3 Filer ID Parker, Mattie J. 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/09/2021 Bailey, Chuck \$100.00 Contributor address; City; State; Zip Code 5721 Medicine Creek Dr Austin, TX 78735 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/18/2021 Bailey, Mona \$500.00 Contributor address; City; State; Zip Code 6200 Lake Way North Richland Hills, TX 76180 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#; Amount of Contribution (\$) 12/07/2021 Baird, Taylor \$1,000.00 Contributor address; City; State; Zip Code 4421 Belclaire Ave Dallas, TX 75205 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/23/2021 Bass, Edward \$10,000.00 Contributor address; City; State; Zip Code 201 Main St Suite 2700 Fort Worth, TX 76102 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 12/14/2021 Blake, Gary \$5,000.00 Contributor address; City; State; Zip Code 4150 International Plz Suite 600 Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CON	TRIBUTIO	NS		SCHEDUL	_E A1
	The Instru	ction Guide explains how to c	omplete this fo	rm.	1	Total pages Schedule A1: Sch: 3/16 Rpt: 6/36	
2	FILER NAME Parker, Matt	e J.	·		3	Filer ID	
4	Date 12/03/2021	 Full name of contributor our Blewitt, Joe Contributor address; City; State; Zity 4220 Cypress Bayou Court Prosper, TX 75078 	t-of-state PAC (ID#: p Code		7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	r mystallingstallings.	
	Date 12/08/2021	Full name of contributor ou Boatner, Brett Contributor address; City; State; Zi 1215 Belle Pl Fort Worth, TX 76107	I-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	***************************************	
	Date 10/05/2021	Full name of contributor ou Campbell, Kervin Contributor address; City; State; Zi 1218 Caraway Ln Haslet, TX 76052)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		W. A
	Date 12/14/2021	Full name of contributor ou Carson, Wayne Contributor address; City; State; Zi 4308 Downsview Court	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/29/2021	Casarez, Richard	t-of-state PAC (ID#:)	**********	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/16 Rpt: 7/36 2 FILER NAME 3 Filer ID Parker, Mattie J. Date Full name of contributor out-of-state PAC (ID#; 7 Amount of Contribution (\$) 12/03/2021 Cavileee, Craig \$2,500.00 6 Contributor address; City; State; Zip Code 13191 Crossroads Parkway North #600 City of Industry, CA 91746 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 12/14/2021 Coates, Chris \$500.00 Contributor address; City; State; Zip Code 4201 Watercourse Dr Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/05/2021 Cobb Fendley PAC \$500.00 Contributor address; City; State; Zip Code 13430 Northwest Freeway Suite 1100 Houston, TX 77040 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#: Amount of Contribution (\$) 12/14/2021 Cole, Sultan \$100.00 Contributor address; City; State; Zip Code 4902 Trailhead Bend Way #12301 Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/17/2021 Conatser, Jerry \$2,500.00 Contributor address; City; State; Zip Code 6716 Saint Andrews Road Fort Worth, TX 76132 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.ab979f02

	MONET	ARY POLITICAL CONTRIBUTION	NS 		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this for	m.		Total pages Schedule A1: Sch: 5/16 Rpt: 8/36	
2	FILER NAME Parker, Matt	е Ј.		3	Filer ID	
4	Date 10/05/2021	5 Full name of contributor)	7 .	Amount of Contribution (\$)	\$500.00
		6 Contributor address; City; State; Zip Code 1 Greenway Plaza Suite 225 Houston, TX 77046				
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions)		
	Date 12/14/2021	Full name of contributor out-of-state PAC (ID#: Davenport Jr., Arlie)	,	Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code 4070 Clarke Ave				
	Principal occu	Fort Worth, TX 76107 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Date 12/14/2021	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	Fort Worth, TX 76110 pation / Job title (See Instructions)	Employer (See Instructions			
	•			,		
	Date 12/14/2021	Full name of contributor out-of-state PAC (ID#: Dunaway, James R. Contributor address; City; State; Zip Code 500 Alta Dr Fort Worth, TX 76107			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L s)		
-	Date 10/05/2021	Full name of contributor out-of-state PAC (ID#:		MANAGEMENT CONTRACTOR	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
_		<u> </u>				

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	.E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/16 Rpt: 9/36	
2	FILER NAME Parker, Matt	ie J.			3	Filer ID	
4	Date 12/28/2021	 5 Full name of contributor [Freese and Nichols PAC 6 Contributor address; City; Sta 801 Cherry Street Suite 2800 Fort Worth, TX 76102 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	pation / Job title (See Instructions)	-	9 Employer (See Instructions)		
	Date 12/03/2021	Full name of contributor [French, Joseph Contributor address; City; Sta 6200 Curzon Avenue Fort Worth, TX 76116	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/18/2021	Full name of contributor GARVERPAC Contributor address; City; Sta PO Box 1064 North Little Rock, AR 7211	te; Zip Code	000559609		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u>		
	Date 11/30/2021	Full name of contributor [Gideon, Randy Contributor address; City; Sta 425 Nursery Lane Fort Worth, TX 76114	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	· · · · · · · · · · · · · · · · · · ·	
	Date 10/05/2021	Full name of contributor Gorrondona, Brad Contributor address; City; Sta 106 Enchanted Ct N Burleson, TX 76028)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	i)		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS	SCHEDUI	LE A1
	The Instruc	ction Guide explains how to	o complete this fo	orm.	1 Total pages Schedule A1: Sch: 7/16 Rpt: 10/36	
2	FILER NAME Parker, Matti	е Ј.			3 Filer ID	
4	Date 12/03/2021	 5 Full name of contributor Grable, Jeff 6 Contributor address; City; State 3709 Sherwood Avenue Fort Worth, TX 76107 	out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions))	
	Date 10/05/2021	Full name of contributor Halff Associates - State PAC Contributor address; City; State 1201 N Bowser Road Richardson, TX 75081	-		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 10/05/2021	Full name of contributor Hall, Scott Bryan Contributor address; City; State 7516 Bunker Ct Benbrook, TX 76126	out-of-state PAC (ID#:_		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions		
	Date 11/17/2021	Hasenzahl, Brenda	out-of-state PAC (ID#:_ e; Zip Code)	Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)	
	Date 12/28/2021	Full name of contributor Hernandez, Kelly Contributor address; City; Stat 5205 Montclair Dr Fort Worth, TX 76034	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/16 Rpt: 11/36 2 FILER NAME 3 Filer ID Parker, Mattie J. Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/28/2021 Hernandez, Michael \$1,500.00 6 Contributor address; City; State; Zip Code 5205 Montclair Dr Fort Worth, TX 76034 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor X out-of-state PAC (ID#: Amount of Contribution (\$) 12/14/2021 Kelly Jr., Dee \$5,000.00 Contributor address; City; State; Zip Code 5756 Merrymount Rd Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/05/2021 Krogness, Allison \$125.00 Contributor address; City; State; Zip Code 3721 Arroyo Rd Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/05/2021 Krogness, Carl \$125.00 Contributor address; City; State; Zip Code 3721 Arroyo Rd Fort Worth, TX 76109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#; Amount of Contribution (\$) 12/14/2021 Landreth Jr., William A. \$200.00 Contributor address; City; State; Zip Code 3207 W 4th St Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.ab979f02

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/16 Rpt: 12/36 2 FILER NAME 3 Filer ID Parker, Mattie J. 4 Date 5 Full name of contributor out-of-state PAC (ID#; 7 Amount of Contribution (\$) 10/05/2021 Leclaire, Dana \$250.00 6 Contributor address; City; State; Zip Code 317 Parkview Dr Hurst, TX 76063 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/18/2021 Leonard, Martha \$1,000.00 Contributor address; City; State; Zip Code 1411 Shady Oaks Lane Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/08/2021 Linebarger Goggan Blair & Sampson, LLP \$500.00 Contributor address; City; State; Zip Code PO Box 17628 Austin, TX 78760 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 11/29/2021 Luskey, Stephen \$10,000.00 Contributor address; City; State; Zip Code 1120 Shady Oaks Lane Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#: Amount of Contribution (\$) 11/30/2021 Magruder, Kyle \$50.00 Contributor address; City; State; Zip Code 4337 Westdale Drive Fort Worth, TX 76109-4931 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.ab979f02

	MONET	ARY POLITICAL CONTRIBUTION	NS 	_	SCHEDUL	E A1
_	The Instru	ction Guide explains how to complete this for	rm.	1	Total pages Schedule A1: Sch: 10/16 Rpt: 13/36	
2	FILER NAME Parker, Matt	е Ј.		3	Filer ID	
1	Date 11/17/2021			7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State; Zip Code 3304 W. 5th St.				
_		Fort Worth, TX 76107		L		
3	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	i) -		
	Date 12/28/2021	Full name of contributor X out-of-state PAC (ID#: <u>CC</u> McGuireWoods Federal PAC Fund	00225342	Γ	Amount of Contribution (\$)	\$1,000.00
		Contributor address; City; State; Zip Code 800 East Canal St				
_		Richmond, VA 23239				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;) ;)		
	Date 12/28/2021	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip Code 122 Rivercrest Dr				
		Fort Worth, TX 76107				
~	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
_	Date 12/28/2021	Full name of contributor out-of-state PAC (ID#: Meadows, William W)	Ī	Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip Code 121 Rivercrest Dr				
		Fort Worth, TX 76107		L		
	Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	S)		
_	Date 12/09/2021	Full name of contributor out-of-state PAC (ID#: Merrill, Robert)		Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code 605 Bailey Avenue				
		Fort Worth, TX 76107				
_	Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	***************************************			_		

MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDU	LE A1
The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/16 Rpt: 14/36	
2 FILER NAME			3 Filer ID	
Parker, Matti	е Ј.			
4 Date 12/07/2021	5 Full name of contributor out-of-state PAC (ID#:_ Merrill, Robert		7 Amount of Contribution (\$)	\$100.00
	6 Contributor address; City; State; Zip Code 605 Bailey Avenue			
	Fort Worth, TX 76107			
3 Principal occup	oation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor)	Amount of Contribution (\$)	
11/30/2021	Mesa, Christopher		Amount of Contribution (\$)	\$100.00
	Contributor address; City; State; Zip Code			Φ100.00
	10717 Alta Sierra Drive			
	Benbrook, TX 76126			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
		, , ,	,	
Date	Full name of contributor ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/07/2021	Mildren, Matt		(4)	\$1,000.00
	Contributor address; City; State; Zip Code 4001 Maple Avenue, Suite 270			
	Dallas, TX 75219			
Principal occup	oation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor)	Amount of Contribution (\$)	
12/06/2021	Miles, Mac		(,,	\$500.00
ľ	Contributor address; City; State; Zip Code	***************************************		
	6371 Newport Court			
	Fort Worth, TX 76116			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
12/14/2021	Moncrief, Mike		(4)	\$500.00
[Contributor address; City; State; Zip Code	***************************************		
	777 Taylor St			
	Suite 1030			
Delocioni	Fort Worth, TX 76102			
Principal оссир	ation / Job title (See Instructions)	Employer (See Instructions))	
	The state of the s	· · · · · · · · · · · · · · · · · · ·		***************************************
orms provided b	y Texas Ethics Commission www.ethics	s.state.tx.us	Version V1	.1.ab979f0

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/16 Rpt: 15/36 2 FILER NAME 3 Filer ID Parker, Mattie J. 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 12/14/2021 \$500.00 Moncrief, Rosie 6 Contributor address; City; State; Zip Code 777 Taylor St Suite 1030 Fort Worth, TX 76102 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/06/2021 \$200.00 Moore, Teresa Contributor address; City; State; Zip Code 3616 Watonga Street Fort Worth, TX 76107-3348 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/06/2021 \$100.00 Murphey, Malinda Contributor address; City; State; Zip Code 2114 Hillcrest St. Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$5,000.00 12/13/2021 NCHA's Texas Events PAC Contributor address; City; State; Zip Code 260 Bailey Ave Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 11/17/2021 \$5,000.00 Navejar, Rosa Contributor address; City; State; Zip Code 2701 Calder Court Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions)

N	MONET	ΓΑΙ	RY POLITICAL CONTE	RIBUTIO	NS		SCHEDUI	LE A1
TI	he Instru	etic	n Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 13/16 Rpt: 16/36	
	LER NAME arker, Mati		•			3	Filer ID	
4 Da				state PAC (ID#:_		7	Amount of Contribution (A)	
	0/05/2021		Navejar, Rosa			•	Amount of Contribution (\$)	\$2,000.00
		6	Contributor address; City; State; Zip Co 2701 Calder Ct	de				
			Fort Worth, TX 76107					
8 Pr	incipal occu	upati	on / Job title (See Instructions)	·	9 Employer (See Instructions)		
	-4-	Т						
	ate 2/06/2021	1	Full name of contributor	tate PAC (ID#:			Amount of Contribution (\$)	#000 oc
	.,00,2021			do	,			\$200.00
			136 Dustin Circle	uc				
			Hudson Oaks, TX 76087					
Pr	incipal occu	upatio	on / Job title (See Instructions)		Employer (See Instructions)		
Dε	ate	T	Full name of contributor out-of-s	tate PAC (ID#;_)		Amount of Contribution (\$)	
12	12/28/2021		OGC Main St, LP				.,,	\$2,500.00
			Contributor address; City; State; Zip Co	de				
		1	2800 S Texas Avenue					
		1	Suite 401 Bryan, TX 77802					
Pr	incipal occu		on / Job title (See Instructions)		Employer (See Instructions)		
Da	ate	Ī	Full name of contributor	tate PAC (ID#:			Amount of Contribution (\$)	
11	1/18/2021		Perez, Damon				· πιοαπι οι Continuation (φ)	\$100.00
			Contributor address; City; State; Zip Co	de	***************************************			
			4364 Western Center Blvd					
			#617 Fort Worth, TX 76137					
Pr	incipal occu		n / Job title (See Instructions)		Employer (See Instructions)		
Da	ate	T	Full name of contributor	tate PAC (ID#;			Amount of Contribution (d)	
	1/30/2021	1	Petrus, Elaine	mile i MC (ID#;			Amount of Contribution (\$)	\$500.00
			Contributor address; City; State; Zip Co	de	***************************************			7-22-00
			3736 Country Club Circle					
			Fort Worth, TX 76109					
Pri	incipal occu	patio	n / Job title (See Instructions)		Employer (See Instructions)		

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orms	provided	by "	exas Ethics Commission	www.ethics	.state.tx.us		Version V1	1 ah070f0

MC	NET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDUL	_E A1
The	Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 14/16 Rpt: 17/36	
2 FILEF	R NAME er, Matti	e J.		3 Filer ID	_
4 Date	7/2021	5 Full name of contributor out-of-state PAC (ID#: Pincoffs, Peter)	7 Amount of Contribution (\$)	\$1,000.00
8 Princi	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Date 10/0	95/2021	Full name of contributor out-of-state PAC (ID#:_ Political Action Committee of Pacheco Koch Contributor address; City; State; Zip Code 7557 Rambler Road Suite 1400 Dallas, TX 75231		Amount of Contribution (\$)	\$250.00
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Date 12/0	93/2021	Full name of contributor out-of-state PAC (ID#:_ Rivers, Stephen Contributor address; City; State; Zip Code 1101 Brae Court Fort Worth, TX 76111		Amount of Contribution (\$)	\$1,000.00
Princ	cipal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Date 11/1	e 17/2021	Full name of contributor out-of-state PAC (ID#: Roby III, Richard Contributor address; City; State; Zip Code 7578 Morrison Court Fort Worth, TX 76112)	Amount of Contribution (\$)	\$500.00
Princ	cipal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Date 12/1	e 14/2021	Full name of contributor out-of-state PAC (ID#:_ Rogers, Joan G. Contributor address; City; State; Zip Code 3034 Tanglewood Park W Fort Worth, TX 76109		Amount of Contribution (\$)	\$100.00
Princ	cipal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
			<u> </u>	Anomaly	

MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDU	LE A1
The Instruc	tion Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 15/16 Rpt: 18/36	<u> </u>
FILER NAME	_		3 Filer ID	
Parker, Matti				
Date 12/14/2021	Full name of contributor out-of-state PAC (ID#: Rogers Jr., John Thomas	•	7 Amount of Contribution (\$)	\$100.0
ANTI-ALIA PARA PARA PARA PARA PARA PARA PARA PA	6 Contributor address; City; State; Zip Code 3034 Tanglewood Park W			
	Fort Worth, TX 76109			
Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor		Amount of Contribution (\$)	
11/22/2021	Rosenthal, Billy		Amount of Contribution (4)	\$1,000.00
				ΦΤ,ΟΟΟ,ΟΙ
	Contributor address; City; State; Zip Code 600 E Exchange Ave			
	Suite 200			
	Ft Worth, TX 76164			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions		
i imorpai occup	nation 7 900 title (See Histiacions)	Employer (See Institutions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/18/2021	Sanders, Travis			\$500.0
	Contributor address; City; State; Zip Code			
	3525 Ranch View Terrace			
	Faut Worth TV 70400 0400			
	Fort Worth, TX 76109-3130			
Principal occup	eation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/06/2021	Schaefer, Ken			\$5,000.0
	Contributor address; City; State; Zip Code			
	2705 Manorwood Trail			
	Fort Worth, TX 76109			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	
12/02/2021	Smith, Christy			\$250.0
	Contributor address; City; State; Zip Code			
	4714 Alta Drive			
	Fort Worth, TX 76107			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	
		1		
rms provided l	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V:	1.1 ah979f0

	MONET	ARY POLITICAL CONTRIBUTIO	NS 	SCHEDU	ILE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 16/16 Rpt: 19/36	
2	FILER NAME Parker, Matt			3 Filer ID	
4	Date 12/01/2021	5 Full name of contributor out-of-state PAC (ID#:_ Waddill, Russ 6 Contributor address; City; State; Zip Code 2301 Winton Terrace West Fort Worth, TX 76109		7 Amount of Contribution (\$)	\$1,000.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
	Date 12/14/2021	Full name of contributor out-of-state PAC (ID#:_ Walsh Ranches Limited Partnership Contributor address; City; State; Zip Code 500 W Seventh St Unit 27 Fort Worth, TX 76102		Amount of Contribution (\$)	\$10,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
	Date 11/30/2021	Full name of contributor out-of-state PAC (ID#:_Ziegler, Daniel Contributor address; City; State; Zip Code 11617 Northview Drive Aledo, TX 76008		Amount of Contribution (\$)	\$500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
	Date 11/30/2021	Full name of contributor out-of-state PAC (ID#:Ziegler, Linda Contributor address; City; State; Zip Code 11617 Northview Drive Aledo, TX 76008		Amount of Contribution (\$)	\$500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract i			e Contract Labor				
	and the supplier			The Instruction Gu	ide explains	how to co	mple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>					3 Filer ID		
	Sch: 1/16 Rpt: 20/36		Parker, Mat								
4		5	Payee name								
L	11/17/2021		Anedot Inc.								
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	ode	-			
	\$811.70		1340 Poydi	as Street							
			Suite 1770								
			New Orlean	ns, LA 70112							
8	PURPOSE	(a)	Category (s	ee Categories listed at th	e ton of this sel	hadula)	(b)	Description			
	OF	` <i>`</i>	Fees	ee Calegories listed at til	e top or ana sci	neddiey	`´	`	outside of Texas.	Complete Schedule T,	
	EXPENDITURE							L	, TX, officeholder		
ĺ						•				e/credit card contribution	ons to
							<u> </u>	campaign ac	count from 3	11/17/21 to 12/14/21	
9	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ıght		Offic	e held	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	08/02/2021		Box and Sl	nip							
Г	Amount (\$)		Payee addre	ess; City;	State	e; Zip Co	ode	***************************************			
	\$204.00		4455 Cam	Bowie Boulevar	rd	-					
			#114								
1			Fort Worth	TX 76107							
L	BURGA						10.5	<u> </u>			
	PURPOSE OF	(a	·	See Categories listed at th	=	hedule)	(a)	Description	nutelide of Toyon	Complete Schedule T.	
	EXPENDITURE		Office Ove	rhead/Rental Exp	ense				n, TX, officeholder		
								PO box fees			
H	Complete ONLY if direct		Candidate/Of	ficeholder name		Office sou	ught	·	Offic	e held	
	expenditure to benefit C/O	Н									
F	Date		Payee name	2							
	12/01/2021		CPH INSU								
	Amount (\$)	├-	Payee addre		State	e; Zip Cı	ode				
	\$287.00		-	rborn Street	Gian	., <u>-</u> p	JU0				
	Ψ201.00	1		IDOIT ORGOT							
		1	#205								
L		L	Chicago, II	_ 60605			_				
	PURPOSE OF	(a		See Categories listed at ti	he top of this so	chedule)	(b)	Description			
1	EXPENDITURE		Event Exp	ense					l outside of Texas. n, TX, officeholder	Complete Schedule T.	
1										y insurance for campai	an
								. aa.aomy		,	٠.٠
	Complete ONLY if direct	<u></u>	Candidate/∩f	ficeholder name		Office so	Laht		Offic	ce held	
	expenditure to benefit C/O		Carionadic/Of	noonouce name		3,,,00 301	-Biit		Ome		
H											
1											

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Relmbursement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Food/Beverage Expense Travel in District Travel Out of District Gift/Awards/Memorials Expense 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 3 Filer ID Sch: 2/16 Rpt: 21/36 Parker, Mattie J. 4 Date Payee name 09/14/2021 Davidson, Donna Garcia 6 Amount (\$) Payee address; City; State: Zip Code \$1,350.00 PO Box 12131 Austin, TX 78711 Я **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Legal Services EXPENDITURE** Check if Austin, TX, officeholder living expense Legal fees for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/07/2021 Dropbox Inc. Amount (\$) Payee address; City; State; Zip Code \$12.78 333 Brannan Street San Francisco, CA 94107 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cloud storage for campaign Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/04/2021 Dropbox Inc. Amount (\$) Payee address; State; Zip Code City; \$12.78 333 Brannan Street San Francisco, CA 94107 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cloud storage for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Gilt/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/16 Rpt: 22/36 Parker, Mattie J. 4 Date Payee name 11/04/2021 Dropbox Inc. 6 Amount (\$) Payee address; City; State; Zip Code \$12.78 333 Brannan Street San Francisco, CA 94107 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cloud storage for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/06/2021 Dropbox Inc. Amount (\$) Payee address; City; State; Zip Code \$12.78 333 Brannan Street San Francisco, CA 94107 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cloud storage for campaign Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 07/06/2021 Dropbox Inc. Amount (\$) Payee address; City: State; Zip Code \$12.78 333 Brannan Street San Francisco, CA 94107 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cloud storage for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/16 Rpt: 23/36	Parker, Mattie J.
4	Date	5 Payee name
	08/04/2021	Dropbox Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.78	333 Brannan Street
		San Francisco, CA 94107
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Cloud storage for campaign
		Cioda storage for campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Ľ	expenditure to benefit C/OI	
	Date	Payee name
	07/09/2021	Eagle Self Storage
-	Amount (\$)	Payee address; City; State; Zip Code
	\$123.00	4450 Rivertree Boulevard
		Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign storage expense
<u> </u>	Computer CAULY IS No. 1	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/03/2021	Eagle Self Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$287.00	4450 Rivertree Boulevard
	ļ	Fort Worth, TX 76109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	CHOITOILE	Check if Austin, TX, officeholder living expense
		Campaign storage expense
L		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment	Food/Beverage Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2	2 FILER NAME	·	3 Filer ID
Sch: 5/16 Rpt: 24/36	Parker, Mattie J.		
	5 Payee name		<u> </u>
09/02/2021	Eagle Self Storage		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
\$287.00	4450 Rivertree Boulevard	•	
	Fort Worth, TX 76109		
8 PURPOSE ((a) Category (See Categories listed at the top of this scho	edule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trave	l outside of Texas. Complete Schedule T,
		, -	n, TX, officeholder living expense torage expense
:		Campaigns	turage expense
9 Complete ONLY if direct	Candidate/Officeholder name C	Office sought	Office held
expenditure to benefit C/OH		omoc obagin	Ships held
Date	Payee name		
10/04/2021	Eagle Self Storage		
Amount (\$)	Payee address; City; State;	Zip Code	
\$139.50	4450 Rivertree Boulevard		
	Fort Worth, TX 76109		
PURPOSE	(a) Category (See Categories listed at the top of this sch	edule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trave	outside of Texas, Complete Schedule T,
		 1	in, TX, officeholder living expense torage expense
		Cumpaign	norage expense
Complete ONLY if direct	Candidate/Officeholder name	L Office sought	Office held
expenditure to benefit C/OH	1	-	
Date	Payee name		
11/02/2021	Eagle Self Storage		
Amount (\$)	Payee address; City; State.	; Zip Code	
\$139.50	4450 Rivertree Boulevard		
	Fort Worth, TX 76109		
PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	Check if trave	el outside of Texas. Complete Schedule T.
EXTENSITORE		II	in, TX, officeholder living expense
		Campaigns	storage expense
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OH		omoo oougin	Onio Hold

SCHEDULE F1

	**		EXPE	NDITURE CATEGOR	IES FOR	R BO	X 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Git/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID
	Sch: 6/16 Rpt: 25/36		Parker, Mattie J.						
4	Date	5	Payee name						
	12/13/2021		Esperanza's Restau	rant					
6	Amount (\$) \$2,989.14	7	Payee address; Ci 2122 North Main Str Fort Worth, TX 7616	reet	Zip Co	ode			
8	PURPOSE OF EXPENDITURE	(a	Category (See Categorie Food/Beverage Exp		edule)	(b)	Check if Austir	ı, TX	de of Texas. Complete Schedule T. . officeholder living expense age for campaign fundraising ev
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder	name C	Office sou	ight			Office held
	Date		Payee name						
	07/27/2021	ı	EEDEA						

OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverage for campaign fundraising event
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	nt Office held
Date 07/27/2021	Payee name FEDEX	
Amount (\$) \$32.45	Payee address; City; State; Zip Code 6020 Camp Bowie Boulevard Fort Worth, TX 76116	e
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labels for campaign thank you letters
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	ht Office held
Date 12/10/2021	Payee name FEDEX	
Amount (\$) \$5.40	Payee address; City; State; Zip Code 6020 Camp Bowie Boulevard Fort Worth, TX 76116	е
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Name tags for campaign fundraising event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Political Credit Card Payment	Committee	Legal Services The Instruction Guide expla		/ages/Cor	nfract Labor this form.	OTHER (enter a category not listed	above)
1 Total pages Schedule F1:	2 FILER NAM	Ε			3	Filer ID	
Sch: 7/16 Rpt: 26/36	Parker, Ma						
	5 Payee name)					
07/30/2021	Fort Worth	Club					
6 Amount (\$)	7 Payee addre	ess; City; St	tate; Zip Co	de			
\$1,003.98	306 W 7th	Street					
		, TX 76102					
8 PURPOSE OF		See Categories listed at the top of this	s schedule)	(b) De	escription		
EXPENDITURE	Food/Beve	erage Expense		. H	2	utside of Texas. Complete Schedule T. TX, officeholder living expense	
	ĺ			L Ec	4	erage with constituents	
					/Ou unu so	siage was concuracing	
Complete ONLY if direct expenditure to benefit C/Oł		fficeholder name	Office sou	ght		Office held	
Date	Payee name	е					
07/09/2021	Frost Bank	〈					
Amount (\$)	Payee addre	ess; City; St	tate; Zip Co	de			
\$5.00	PO Box 16	300					
	San Anton	nio, TX 78296					
PURPOSE	1	See Categories listed at the top of thi	ls schedule)	(b) De	escription		
OF EXPENDITURE	Accounting	g/Banking			J	utside of Texas. Complete Schedule T.	
	1		1	L R	_	TX, officeholder living expense charge for campaign accou	unt
				D.	AIIK SELVICE C	лагустог сатразун ассос	ли
Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office sou	ght		Office held	
Date	Payee name	e					
08/09/2021	Frost Bank	ζ.					
Amount (\$)	Payee addr	ress; City; S	state; Zip Co	ode			
\$5.00	PO Box 16	300					
	San Antor	nio, TX 78296					
PURPOSE		(See Categories listed at the top of thi	is schedule)	(b) De	escription		_
OF EXPENDITURE	Accounting	g/Banking		=		utside of Texas. Complete Schedule T.	
				L		TX, officeholder living expense charge for campaign accou	unt
				Lit	alik gervice r	aldige for campaign accor	JIIL
Complete ONLY if direct	Condidate (C	Wbalder name	O#ioo 001			Office hold	
Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office sou	gnı		Office held	
							

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/16 Rpt: 27/36	Parker, Mattie J.
4	Date	5 Payee name
	09/09/2021	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.00	PO Box 1600
		San Antonio, TX 78296
_		
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank service charge for campaign account
		Built del vide straige for dampaign addean.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	10/08/2021	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	PO Box 1600
	* = \ - =	1 0 55X 1555
		One Antonia TV 70000
		San Antonio, TX 78296
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank service charge for campaign account
		Dank service charge for campaign account
	A CONTRACTOR OF THE CONTRACTOR	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	11/08/2021	Frost Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	PO Box 1600
	TV	1 0 BOX 1000
		San Antonio, TX 78296
	PURPOSE	(a) Category (see Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Bank service charge for campaign account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	ri e e e e e e e e e e e e e e e e e e e

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 9/16 Rpt: 28/36	Parker, Mattie J.
4	Date	5 Payee name
	12/08/2021	Frost Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.00	PO Box 1600
		San Antonio, TX 78296
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank service charge for campaign account
		Bank do vide of tampaign account
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	
	07/30/2021	Payee name Glen E. Ellman Photographer
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	440 S Main Street
		Fort Worth, TX 76104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Photography expense for campaign
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	08/31/2021	JP Morgan Chase
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.15	Cardmember Services
		P.O. Box 94014
		Palatine, IL 60094-4014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	LAFERUITURE	Check if Austin, TX, officeholder living expense
		Payment of credit card bill for campaign credit card expenditures reported in a previous period
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 10/16 Rpt: 29/36 Parker, Mattie J. 4 Date Payee name 12/06/2021 John Wayne Museum 6 Amount (\$) Payee address; City; State; Zip Code \$2,000.00 2501 Rodeo Plaza Fort Worth, TX 76164 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF **Event Expense** Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Venue fee for campaign event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/09/2021 Kent & Co Wines Amount (\$) Payee address; City; State; Zip Code \$101.60 1101 W Magnolia Avenue Fort Worth, TX 76104 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting to discuss officerholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/20/2021 Lilly & Company Amount (\$) Payee address; City; State; Zip Code \$7,239.14 3131 Turtle Creek Boulevard Dallas, TX 75219 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Auslin, TX, officeholder living expense Fundraising for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	_	nse es/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)		
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Sch: 11/16 Rpt: 30/36	Parker, Ma					_	
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	Suite 5000)					
	Atlanta, G	A 30308					
8 PURPOSE		(See Categories listed at the top of this so	chedule) (b) Description			
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Amount (\$)	Payee add	ress; City; Stat	te; Zip Code	<u> </u>			
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	Suite 5000	0					
	Atlanta, G	A 30308				_	
PURPOSE	(a) Category	(See Categories listed at the top of this s	chedule) (b	Description			
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Complete ONLY if direct		Officeholder name	Office sough	nt	Office held	***************************************	
expenditure to benefit C/O	a I						
Date	Payee nam						
10/15/2021		edia Group					
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	Sunnyval	e, TX 75182					
PURPOSE OF		(See Categories listed at the top of this s	schedule) (L	Description	outside of Terror		
EXPENDITURE	Consultin	g Expense			el outside of Texas. Complete Schedule T. in, TX, officeholder living expense		
					services for campaign		
				5 -	· -		
Complete ONLY if direct		Officeholder name	Office sough	nt	Office held		
expenditure to benefit C/O)H 						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense 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 3 Filer ID Sch: 12/16 Rpt: 31/36 Parker, Mattie J. Date Payee name 12/13/2021 Mayes Media Group Amount (\$) Payee address; City; State; Zip Code \$13,960.00 312 Creekwood Drive Sunnyvale, TX 75182 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Consulting services for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/02/2021 Pair, Laurie Amount (\$) Payee address; City; State; Zip Code \$1,910.00 PO Box 5908 Austin, TX 78763 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Report preparation services for campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/28/2021 Quintana, Romel Amount (\$) Payee address; City; State; Zip Code \$240.00 3138 Meandering Way Granbury, TX 76049 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Security for campaign fundraising event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Advertising Expense Accounting/Banking Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Consulting Expense Contributions/ Donations Made By -Travel in District Travel Out of District
OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 13/16 Rpt: 32/36 Parker, Mattie J. Date Payee name 12/28/2021 Salazar, Jose Payee address; City; 6 Amount (\$) State; Zip Code \$240.00 1411 S. Lake Street Fort Worth, TX 76104 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Security for campaign fundraising event Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/23/2021 Salesforce Amount (\$) Payee address; City: State; Zip Code \$74.62 415 Mission Street 3rd Floor San Francisco, CA 94105 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/23/2021 Salesforce Payee address; State; Zip Code City; Amount (\$) \$74.62 415 Mission Street 3rd Floor San Francisco, CA 94105 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign database Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

SCHEDULE F1

Solicitation/Fundralsing Expense

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Hinditee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				e e /Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
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			3rd Floor								
			San Francis	sco, CA 94105							
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	EXPENDITURE		Office Over	head/Rental Expe	nse					, officeholder living expense	
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	mittee	Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel in District Travel Out of District OTHER (enter a category not listed abo	ove)	
1	Total pages Schedule F1:	2	FILER NAME	NAME 3						Filer ID	
	Sch: 15/16 Rpt: 34/36	۱ ۱	Parker, Mat	tie J.							
4	Date	5	Payee name						_		
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8	PURPOSE OF			ee Categories listed at th		edute)	(a)	Description Check if travel of	Outsir	de of Texas. Complete Schedule T.	
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9			andidate/Offi	iceholder name	C	Office sou	ght			Office held	
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	07/20/2021		Smith, McK	inzie							
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	\$650.89		6416 Darwood Avenue								
			Fort Worth, TX 76116								
	PURPOSE	(a)	Category (s	ee Categories listed at th	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Travel In Di				l			ide of Texas. Complete Schedule T.	
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-	Complete ONLY if direct		andidate/Off	iceholder name		Office sou	ght			Office held	
	expenditure to benefit C/OI				,					** *	
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\vdash	Amount (\$)	<u> </u>	Payee addre		Ctoto.	; Zip Co	de				
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			Fort Worth,	TX 76116							
\vdash	DUDDOCT	┡					<i>p</i>	-			
	PURPOSE OF			ee Categories listed at th	he top of this sch	redule)	(a)	Description Check it travel	Olites	ide of Texas. Complete Schedule T.	
1	EXPENDITURE		Event Expe	anse.						nde of Texas. Complete Schedule T, officeholder living expense	
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Γ	Complete ONLY if direct		andidate/Off	iceholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/OI	H									
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 16/16 Rpt: 35/36 Parker, Mattie J. Date Payee name **USPS** 07/27/2021 City; State; Zip Code Payee address; 6 Amount (\$) \$550.00 3020 Cherry Lane Fort Worth, TX 76116 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Postage expense for campaign Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/13/2021 Winslow Partners LLC Payee address; State; Zip Code Amount (\$) City: 4101 Camp Bowie Boulevard \$46.81 Fort Worth, TX 76116 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage with constituent Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 36/36 2 FILER NAME 3 Filer ID Parker, Mattie J. 8 Amount (\$) 4 Date 5 Name of person from whom amount is received 12/28/2021 \$143.50 Eagle Self Storage, LLC 6 Address of person from whom amount is received; City; State; Zip Code 3517 Locke Avenue Fort Worth, TX 76107 Purpose for which amount is received Check if political contribution returned to filer Refund for overpayment of storage fees for campaign

14031224905

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED

			omablida ARR 23 AM ID: 3
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5 FEG MAIL CENTER
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(Check if address is changed) 2. DATE 0 3 1 1	4 2 0 1 4 5		
3. FEC IDENTIFICATION N	UMBER ▶ CO	paranda na sana da mananda ana da sana sana sana sana sana s	
4. IS THIS STATEMENT	NEW (N) OR	X) AMENDED (A)	
I certify that I have examined	his Statement and to the bes	t of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	er Dathan Gaskill		
Signature of Treasurer	> of	tl	Date 0 4 116 2014
NOTE: Submission of false, error		may subject the person signing	this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.
Office Use Only		For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	

Page	2
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FEC Form.1 (Revised	02/2009)
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5.			OMMITTEE Committee:
		fates?	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	Name Caridi		[]]]]]] [] [] [] [] [] [] [
	Candi Party	date Affiliatio	Office State Senate President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	у Соп	ımittee:
	(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) its connected organization is a:
	(6)	i.d	Corporation Corporation w/o Capital Stock Labor Organization
			Membership Organization Trade Association Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.
	(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
			In addition, this committee is a Lobbyist/Registrant PAC.
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	Join	t-Func	iralsing Representative:
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
		Com	ımittees Participating in Joint Fundraiser
		1.	FEC ID number C
		2.	FEC ID number C
		Э.	FEC ID number C
		4.	

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e	
GARVERPAC		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundralaing Representative, or Lead	lership PAC Sponsor
		<u> </u>
		<u> </u>
Mailing Address		
	City State	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee	Leadership PAC Sponsor
Custodian of Records: ide books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Full Name . D.A.P.	HINE RIUCIK	
Mailing Address	4 7 0 1 N O RTH S H O R E D R	
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•	IN ILLITATIVE IROCKULLI LAIR Z	211118 - 1
Title or Position	CITY STATE	ZIP CODE
CIUISITIODIIIAI	Tetephone number 5,0,1	- <u> 3 17 16 - 3161313</u>
3. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	e name and address of
Full Name of Treasurer D _I A _I T	HAN IAIGASKILLI	
Mailing Address	4:7:0:1: NIO R THSHIORE IDRI IIII	
	N.L.I.T.T.L.E. R.O.C.K A.R. Z.:	211 118 - L
Title or Position TIREIAISIUIREIR	Telephone number 5 10 11	- 3 ,7 ,6] - 3 ,6 , 3 , 3

FEC Form	m 1 (Revised 02/2009)	Page 4
	·	
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other safety deposit by Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, ho exes or maintains funds. Depository, etc.	lds accounts, rents
Mailing Address		
	LILITITUE ROCK 1111 AR 712	1118-1
	CITY STATE	
		ZIP CODE
Name of Bank,	Depository, etc.	ZIP CODE
Name of Bank,	Depository, etc.	ZIP CODE
Name of Bank, Mailing Address	: 	ZIP CODE
	: 	ZIP CODE
	: 	ZIP CODE

Only

FEC FORM 1

STATEMENT OF ORGANIZATION

PAGE 1/4 =

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. MCGUIREWOODS FEDERAL PAC **GATEWAY PLAZA** ADDRESS (number and street) 800 EAST CANAL STREET (Check if address is changed) RICHMOND 23219 1 i ZIP CODE ▲ CITY A STATE A COMMITTEE'S E-MAIL ADDRESS rbernstein@mwcllc.com (Check if address is changed) Optional Second E-Mail Address imtogna@mwcllc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) $\mathbf{M} = I \geq \mathbf{D}$ 08 2020 DATE C00225342 FEC IDENTIFICATION NUMBER ▶ NEW (N) IS THIS STATEMENT OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Bernstein, Ryan, , , 1.1 1.1 () Ð Bernstein, Ryan, , , [Electronically Filed] Date 01 80 2020 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toli Free 800-424-9530

Local 202-694-1100

FEU FO	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	OMMITTEE • Committee:	
11		
(a)	This committee is a principal campaign committee. (Complete the candidate information below)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	nplete the candidate
Name of Candidate		<u> </u>
Candidate Party Affiliati	Office on Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con		
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number C	
3.		
4.		

	FEC Form 1 (Revised 0		Page 3			
	Write or Type Committee Name					
	ACGUIREWOO	DDS FEDERAL PAC				
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor			
N	ONE					
	Mailing Address					
		CITY STATE	ZIP CODE			
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor			
7.	Custodian of Records: Identification books and records.	ntify by name, address (phone number optional) and position of the person	n in possession of committee			
	Togna, Mo	olly, , ,	1			
	Full Name	800 E Canal Street				
	Mailing Address					
		Richmond , VA , ,				
		Notificial 1				
	Title or Position	CITY STATE	ZIP CODE			
	Custodian of Records	Telephone number				
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	I the name and address of			
	Full Name Bernstein, of Treasurer	Ryan, , ,				
	Mailing Address	2001 K Street N.W.				
		Suite 400				
		Washington DC CITY STATE	20006 			
	Title or Position , Treasurer					
		202 Telephone number	_ - 857 2945			

FEC Forr	n 1 (Revised 02/2009)		Page 4		
Full Name of Designated Agent	Kaplan, Harrison, , ,				
Mailing Address	Two Hanover Square				
	434 Fayetteville St., Suite 2140				
	Raleigh CITY	NC STATE	27601 ZIP CODE		
Title or Position Assistant Treas	urer Telephone nun	mber 9	19 - 836 - 4001		
safety deposit b	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
	Wells Fargo	<u> </u>			
Mailing Address	1021 East Cary Street				
	2 James Center				
	Richmond	L VA	23219		
	CITY	STATE	ZIP CODE		
Name of Bank,	Depository, etc.				
Mailing Address					
	CITY	STATE	ZIP CODE		