Texas Ethics Commission	P.O. Box 120		3711-2070	(512)463-5800 TDD 1-800-735-298
OARDOIALE CAMPAISEC	RETART			FORM C/OH Cover Sheet pg 1
The cron New ORG	une explains how too	omplete this form.	1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 20
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR Mrs.	FIRST KELLY	MI	OFFICE USE ONLY
	NICKNAME	LAST ALLEN GRAY	SUFFIX	Date Received a series of the
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: 2820 GALVEZ FORT, TX 76111		CITY; STATE; ZIP CODE	JUN 15 2012 JUN 15 2012 CITY OF HOME WORT: Park Hand de were Receipt # Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS/ MRS / MR Mr. NICKNAME	FIRST JOHNNIE LAST WELBORNE	MI 	Date Processed Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO F 301 WOODHAV DESOTO, TX 7	EN DRIVE	TE #; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	area code (469) 831-080	PHONE NUMBER	EXTENSION	
8 REPORT TYPE	January 15	30th day before elect	ion X Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before electio	n Exceeded \$500 limit	Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day	Year THROL		Year
	05/03/2012		06/13/20	012
10 ELECTION	ELECTION DATE Month Day 06/23/2012	Year Primary	E X Runoff	General Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known District 08)
		GO TO P		
		······································	Ju-10-12 P12	: 57 1.1

CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH **SUPPORT & TOTALS** COVER SHEET PG 2 13 C/OH NAME ALLEN GRAY, KELLY (Mrs.) 14 ACCOUNT # (Ethics Commission filers) 00000001 This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may **15 NOTICE** have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this FROM information only if they receive notice of such expenditures. POLITICAL COMMITTEE NAME COMMITTEE(S) COMMITTEE TYPE GENERAL COMMITTEE ADDRESS SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS **16 CONTRIBUTION** 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 4,674.00 TOTAL POLITICAL CONTRIBUTIONS 2. (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 10,824.00 EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS \$ 0.00 4. TOTAL POLITICAL EXPENDITURES \$ 10,050.56 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE BALANCE \$ LAST DAY OF THE REPORTING PERIOD 3,673.70 OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. LOAN TOTALS LAST DAY OF THE REPORTING PERIOD S 0.00 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by NORMA J. MARSHALL me under Title 15, Election Code. My Commission Expires December 4, 2012 Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and sybscribed before me, by the said this the to certify which, witness my hand and seal of office

Print name of officer administering oath

Signatule of officer administering oath

T:4)	· · · · · · · · · · · · · · · · · · ·	
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	administering	oam

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE # Schedule: 1/3 Report: 3/20 2 FILER NAME ALLEN GRAY, KELLY (Mrs.) (Ethics Commission filers) 3 ACCOUNT # 0000001 4 Full name of contributor D out-of-state PAC (ID# Date 7 Amount of 8 In-kind contribution BOWENS, PRISCILLA contribution (\$) description (if applicable) 6 Contributor address; City; State; Zip Code 05/15/2012 \$250.00 8740 THISTLE RIDGE DRIV FORTH WORTH, TX 76123 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 9 10 Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution FORT WORTH FIREFIGHTERS ASSOCIATIONS contribution (\$) description (if applicable) 05/31/2012 Contributor address; City; State; Zip Code \$3,000.00 1617 TIERNY ROAD FORT WORTH, TX 76112 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution GRAY, BILLY contribution (\$) description (if applicable) 05/04/2012 Contributor address: City; State; Zip Code \$1,250.00 2820 GALVEZ FORT WORTH, TX 76111 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution GRAY, BILLY contribution (\$) description (if applicable) 06/11/2012 Contributor address: City; State; Zip Code \$250.00 2820 GALVEZ FORT WORTH, TX 76111 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution HANDLEY, ERMA contribution (\$) description (if applicable) 05/31/2012 Contributor address; City; State; Zip Code \$200.00 2362 FAETT COURT FORT WORTH, TX 76119 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

TDD 1-800-735-2989

ICAL CONTRIBUTIONS R THAN PLEDGES OR LO	ANS		SCHEDULE A
TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2	/3 Report: 4/20
ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
5 Full name of contributor D out-of-state PAC (ILEWIS, JOHNNY	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 953 E. TERRELL AVENUE FORT WORTH, TX 76104	e	. \$150.00	
pation / Job title (See Instructions)	10 Employer (See		Texas, complete Schedule T)
Full name of contributor Dout-of-state PAC (II LINEBARGER, GOGAN, BLAIR, & SAMPSON	D#) LLC	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO BOX 17428 AUSTIN, TX 78760	• • • • • • • • • • • • • • • • • • •	\$250.00	
ation / Job title (See Instructions)	T		Texas, complete Schedule T)
	Employer (See I	nstructions)	
Full name of contributor D out-of-state PAC (ID MIDDLETON, KATHY	1)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1076 DIXON ROAD BELLEVUE, TX 76228		\$150.00	
		(If travel outside of T	「exas, complete Schedule T)
auon / Job title (See Instructions)	Employer (See In	structions)	
Full name of contributor Dout-of-state PAC (ID:	<u> </u>	Amount of 1	
SESSION, COREY	//	contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2901 E. 4TH STREET FORT WORTH, TX 76111		\$500.00 	
tion / Job title (See Instructione)			exas, complete Schedule T)
	⊏mpioyer (See Ins	structions)	
Full name of contributor D out-of-state PAC (ID# SMITH, CHARLIE)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4444 FAIR PARK BLVD FORT WORTH, TX 76115		\$100.00	
ion / Job title (See Instructions)	Employer (See Ins		xas, complete Schedule T)
	TON GUIDE explains how to complete this form. ALLEN GRAY, KELLY (Mrs.) 5 Full name of contributor address; City; State; Zip Code 953 E. TERRELL AVENUE FORT WORTH, TX 76104 pation / Job title (See Instructions) Full name of contributor address; City; State; Zip Code PO BOX 17428 AUSTIN, TX 78760 Full name of contributor address; City; State; Zip Code PO BOX 17428 AUSTIN, TX 78760 Full name of contributor address; City; State; Zip Code PO BOX 17428 AUSTIN, TX 78760 Full name of contributor address; City; State; Zip Code 1076 DIXON ROAD BELLEVUE, TX 76228 ation / Job title (See Instructions) Full name of contributor address; City; State; Zip Code 2001 E. 4TH STREET FORT WORTH, TX 76111 tion / Job title (See Instructions) Full name of contributor address; City; State; Zip Code 2001 E. 4TH STREET FORT WORTH, TX 76111 tion / Job title (See Instructions) Full name of contributor address; City: State; Zip Code 2001 E. 4TH STREET FORT WORTH, TX 76111 tion / Job title (See In	Ton Guide explains how to complete this form. ALLEN GRAY, KELLY (Mrs.) 5 Full name of contributor • Contributor address; • City: State; Zip Code • SS E: TERELL AVENUE FORT WORTH, TX 76104 • Pull name of contributor • Dut-of-state PAC (ID#) LINEBARGER, GOGAN, BLAIR, & SAMPSON LLC • Contributor address; City: State; Zip Code PO BOX 17428 AUSTIN, TX 78760 ation / Job title (See Instructions) Employer (See I Full name of contributor out-of-state PAC (ID#) MIDDLETON, KATHY Contributor address; City: State; Zip Code 106 DIXON ROAD BELLEVUE, TX 7628 ation / Job title (See Instructions) Employer (See Instructions) <t< td=""><td>Ton Guide explains how to complete this form. 1 PAGE # ALLEN GRAY, KELLY (Mrs.) 3 ACCOUNT # O0000001 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of contributor (\$) 6 Contributor address; City: State: Zip Code \$150.00 \$150.00 953.E. TERRELL AVENUE FORT WORTH, TX 78104 If travel outside of contributor [] out-of-state PAC (ID#) Amount of contributor address; City: State: Zip Code \$250.00 Full name of contributor I out-of-state PAC (ID#) Amount of contributor address; City: State; Zip Code \$250.00 9 DOX 17428 QUE ontributor address; City: State; Zip Code \$250.00 (# travel outside of atton / Job title (See Instructions) Employer (See Instructions) Full name of contributor Imployer (See Instructions) Amount of contributor (\$) Contributor address; City: State; Zip Code \$150.00 10 travel outside of atton / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) If travel outside of atton / Job title (See Instructions) City: State; Zip Code \$150.00 1078 DXCNR ROAD \$500.00 1078 DXCNR ROAD \$500.00 Full name of contributor</td></t<>	Ton Guide explains how to complete this form. 1 PAGE # ALLEN GRAY, KELLY (Mrs.) 3 ACCOUNT # O0000001 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of contributor (\$) 6 Contributor address; City: State: Zip Code \$150.00 \$150.00 953.E. TERRELL AVENUE FORT WORTH, TX 78104 If travel outside of contributor [] out-of-state PAC (ID#) Amount of contributor address; City: State: Zip Code \$250.00 Full name of contributor I out-of-state PAC (ID#) Amount of contributor address; City: State; Zip Code \$250.00 9 DOX 17428 QUE ontributor address; City: State; Zip Code \$250.00 (# travel outside of atton / Job title (See Instructions) Employer (See Instructions) Full name of contributor Imployer (See Instructions) Amount of contributor (\$) Contributor address; City: State; Zip Code \$150.00 10 travel outside of atton / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) If travel outside of atton / Job title (See Instructions) City: State; Zip Code \$150.00 1078 DXCNR ROAD \$500.00 1078 DXCNR ROAD \$500.00 Full name of contributor

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE # Schedule: 3/3 Report: 5/20 2 FILER NAME ALLEN GRAY, KELLY (Mrs.) 3 ACCOUNT # (Ethics Commission filers) 00000001 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of) 8 In-kind contribution STALLWORTH, ABBIE contribution (\$) description (if applicable) 05/15/2012 6 Contributor address; City; State; Zip Code \$50.00 2620 GALVEZ FORT WORTH, TX 76119 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 9 10 Employer (See Instructions)

POLITICAL EXPENDITURES

Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitation/Func ense Food/Beverage Expense Travel In District Polling Expense Travel Out of Di	/Contract Labor Loan R draising Expense Transpo strict Cancr /Rental Expense OTHER	epayment/Reimbursement ortation Equipment & Related Expense utions/Donations Made By didate/Officeholder/Political Committee (enter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/14			0000001
4 Date 06/08/2012	5 Payee name ACURA GROUP		
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 8028 COLFAX LANE FORT WORTH, TX		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel o POLITICAL ADVERT	utside of Texas, complete Schedule T) 🗌 ISING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/12/2012	Payee name ACURA GROUP		
Amount (\$)	Payee address City; State; Zip Code		
\$250.00	8028 COLFAX LANE FORT WORTH, TX		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel ou	itside of Texas, complete Schedule T)
OF EXPENDITURE	Advertising Expense	POLITICAL ADVERT	ISING
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/10/2012	BASSHAM FOODS		
Amount (\$) \$68.38	Payee address City; State; Zip Code 5409 HEMPHILLL STREET FORT WORTH, TX 76115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel out FOOD/BEVERAGE E)	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/12/2012	CAKES BY DELESSA		1
Amount (\$) \$36.00	Payee address City; State; Zip Code 1417 EVANS STREET FORT WORTH, TX 76104		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outs FOOD/BEVERAGE EX	ide of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

SCHEDULE F

Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fundrai	ntract Labor Loan Rej sing Expense Transpor Contribut ct Candii ental Expense OTHER (payment/Reimbursement tation Equipment & Related Expense ions/Donations Made By date/Officeholder/Political Committee date/Officeholder/Political Committee enter a category not listed above)
1 PAGE # Schedule: 2/14 I			3 ACCOUNT # (TEC filers) 00000001
4 Date 05/04/2012	5 Payee name CAREY, DOROTHY		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$200.00			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel ou	tside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor		FOR CAMPAIGN SERVICE
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/12/2012	Payee name CAREY, DOROTHY	······································	
Amount (\$)	Payee address City; State; Zip Code		
\$260.00	4133 BURKE ROAD FORT WORTH, TX 76119		
01100005	Category (See Categories listed at the top of this schedule)	Description (If travel out	side of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	CONTRACT LABOR F	OR CAMPAIGN SERVICE
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/23/2012	CAREY, DOROTHY		
Amount (\$)	Payee address City; State; Zip Code		
\$160.00	4133 BURKE ROAD FORT WORTH, TX 76119		
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas, complete Schedule T)
OF EXPENDITURE	Salaries wages Contract Labor	CONTRACT LABOR F	OR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/31/2012	Payee name CAREY, DOROTHY		
Amount (\$)	Payee address City; State; Zip Code		
\$105.00	4133 BURKE ROAD FORT WORTH, TX 76119		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ide of Texas. complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

(512)463-5800 TDD 1-800-735-2989

POLITIC	CAL EXPENDITURES		SCHEDULE F
Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitation/Func ense Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di	/Contract Labor Loa draising Expense Tra strict (/Rental Expense OT	an Repayment/Reimbursement insportation Equipment & Related Expense ntributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)
1 PAGE #	2 FILER NAME	w to complete this form.	3 ACCOUNT # (TEC filers
Schedule: 3/14 f	Report: 8/20 ALLEN GRAY, KELLY (Mrs.) 5 Payee name	· · · · · · · · · · · · · · · · · · ·	0000001
06/09/2012	CAREY, DOROTHY		
6 Amount (\$) \$160.00	 Payee address City; State; Zip Code 4133 BURKE ROAD FORT WORTH, TX 76119 		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If trat CONTRACT LAB	vel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/31/2012	CHASE BANK		
Amount (\$) \$13.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If trave BANK SERVICE F	el outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/09/2012	Payee name CHASE BANK		
Amount (\$) \$5.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If trave FEE FOR CASHIE	I outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/10/2012	Payee name CHASE BANK		
Amount (\$) \$150.00	Payee address City; State; Zip Code MEDICAL DISTRICT BRANCH FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel CONTRACT LABOR	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

(512)463-5800 TDD 1-800-735-2989

POLITICAL	EXP	PEND	ITL	JRES
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Advertising Exp Accounting/Bar Consulting Exp Event Expense Fees	king Legal Services Solicitation/Func- ense Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	VContract Labor Loan Rep draising Expense Transport t Contributi bistrict Candid J/Rental Expense OTHER (c	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee enter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers
Schedule: 4/14	Report: 9/20 ALLEN GRAY, KELLY (Mrs.)		0000001
4 Date	5 Payee name		0000001
05/04/2012	CLARK, JOHN		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$240.00	,		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel out: CONTRACT LABOR F	side of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	· · · · · · · · · · · · · · · · · · ·	
05/12/2012	CLARK, JOHN		
Amount (\$)	Payee address City; State; Zip Code		
\$260.00	5616 HOUGHTON AVENUE FORT WORTH, TX 76107		
	Category (See Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor		
OF EXPENDITURE			SR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/23/2012	CLARK, JOHN		
Amount (\$)	Payee address City; State; Zip Code		
\$120.00	5616 HOUGHTON AVENUE FORT WORTH, TX 76107		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outsic CONTRACT LABOR FC	de of Texas, complete Schedule T) PR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/31/2012	CLARK, JOHN		
Amount (\$)	Payee address City; State; Zip Code		
\$120.00	5616 HOUGHTON AVENUE FORT WORTH, TX 76107		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside CONTRACT LABOR FO	e of Texas. complete Schedule T) R CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	.I Office sought:	Office held:

Texas Ethics Col	mmission P.O.Box 12070 Austin, Texas 78711-	2070 (512)463-5800 TDD 1-800-735-298
POLITIC	CAL EXPENDITURES	SCHEDULE F
Advertising Exp Accounting/Ban Consulting Exp Event Expense Fees	nking Legal Services Solicitation/Fundra	ontract Labor aising Expense Loan Repayment/Reimbursement . Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 5/14 4 Date	2 FILER NAME Report: 10/20 ALLEN GRAY, KELLY (Mrs.) 5 Payee name	3 ACCOUNT # (TEC filers) 00000001
06/09/2012	CLARK, JOHN	
6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 5616 HOUGHTON AVENUE FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) CONTRACT LABOR FOR CAMPAIGN SERVICE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/25/2012	Payee name COX'S LITHO	
Amount (\$) \$162.38	Payee address City; State; Zip Code 2704 E. BELKNAP FORT WORTH, TX 76111	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/04/2012	Payee name DAVIDSON, MARY	
Amount (\$) \$290.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/12/2012	Payee name DAVIDSON, MARY	
Amount (\$) \$312.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas. complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

(512)463-5800 TDD 1-800-735-2989

POLITICAL	EXPEND	ITURES
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Advertising Exp Accounting/Ban Consulting Exp Event Expense Fees	king Legal Services Solicitation/Eurod	Contract Labor raising Expense strict /Rental Expense	Transportation E Contributions/Do Candidate/Of OTHER (enter a	t/Reimbursement quipment & Related Expense prations Made By ficeholder/Political Committee category not listed above)
1 PAGE # Schedule: 6/14				3 ACCOUNT # (TEC filers) 00000001
4 Date 05/23/2012	5 Payee name DAVIDSON, MARY			
6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description CONTRACT	(If travel outside of LABOR FOR (Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht:	Office held:
Date 05/31/2012	Payee name DAVIDSON, MARY			
Amount (\$) \$144.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (I CONTRACT L	f travel outside of ABOR FOR C	Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	nt:	Office held:
Date 06/09/2012	Payee name DAVIDSON, MARY			
Amount (\$)				
\$200.00	Payee address City; State; Zip Code 6901 WINDWARD WAY FORT WORTH, TX 76140			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If CONTRACT L/	travel outside of T ABOR FOR CA	exas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t:	Office held:
Date 06/12/2012	Payee name DAVIS, ALEX			
Amount (\$) \$30.00	Payee address City; State; Zip Code 4917 OLD MANSFIELD FORT WORTH, TX 76119			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If t CONTRACT LA	ravel outside of Te BOR FOR CA	xas. complete Schedule T)
Complete ONLY if direct expenditure to benefil C/OH	Candidate / Officeholder name	Deffice sought:		Office held

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITICAL EXPENDITURES

Advertising Exp Accounting/Bar Consulting Exp Event Expense Fees	nking Legal Services Solicitation/Fun ense Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	/Contract Labor Loan draising Expense Trans t Cont istrict Ca //Rental Expense OTH	Repayment/Reimbursement sportation Equipment & Related Expense ributions/Donations Made By andidate/Officeholder/Political Committee ER (enter a category not listed above)
1 PAGE # Schedule: 7/14	2 FILER NAME Report: 12/20 ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 05/04/2012	5 Payee name GREEN, CARRIE		
6 Amount (\$) \$225.00	7 Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If trave CONTRACT LABO	I outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/12/2012	Payee name GREEN, CARRIE		
Amount (\$)	Payee address City; State; Zip Code		
\$245.00	. ,		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel CONTRACT LABOR	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/23/2012	GREEN, CARRIE		
Amount (\$) \$160.00	Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel of CONTRACT LABOR	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/31/2012	Payee name GREEN, CARRIE		
Amount (\$)	Payee address City; State; Zip Code		
\$105.00	4208 WILHELM STREET FORT WORTH, TX 76119		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel ou CONTRACT LABOR	Itside of Texas. complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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SCHEDULE	F

Advertising Expe Accounting/Banl Consulting Expe Event Expense	king Legal Services Solicitation/Fundr	Contract Labor Loan Reparaising Expense Transportat Contribution	yment/Reimbursement ion Equipment & Related Expense hs/Donations Made By le/Officeholder/Political Committee
Fees	Printing Expense Office Overhead/ The INSTRUCTION GUIDE explains how	Rental Expense OTHER (en	ter a category not listed above)
1 PAGE # Schedule: 8/14 F	Report: 13/20 2 FILER NAME ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 06/09/2012	5 Payee name GREEN, CARRIE		
6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 4208 WILHELM STREET FORT WORTH, TX 76119		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/09/2012	Payee name KHVN RADIO STATION		
Amount (\$) \$720.00	Payee address City; State; Zip Code 5787 S. HAMPTON RD DALLAS, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outsi POLITICAL ADVERTISI	de of Texas, complete Schedule T) 🔲 NG
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/12/2012	Payee name MARSHALL, NOVELLA		
Amount (\$) \$35.00	Payee address City; State; Zip Code 204 S JUDKINS FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		le of Texas, complete Schedule T) PR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/03/2012	METRO MAILER		
Amount (\$)	Payee address City; State; Zip Code		
\$1,292.64	5719 E. ROSEDALE SUITE 809 FORT WORTH, TX 76101		
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense		e of Texas, complete Schedule T)
OF EXPENDITURE		POLITICAL ADVERTISI	NG
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
			Electronic Filing Version 3.4.4

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POLITICAL EXPENDITURES

Advertising Fun	0.45/0.000				· •		
Advertising Expo Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services	e Expense se	Salaries/Wages/Cor Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Re E explains how t	sing Expense st ntal Expense	Transportation Contributions/I Candidate/(OTHER (enter	ent/Reimbursement Dequipment & Related Donations Made By Officeholder/Political C a category not listed a	ommittee
1 PAGE #		ILER NAME		• • • • • • • • • • • • • • • • • • •		3 ACCOUNT #	(TEC filers)
Schedule: 9/14	Report: 14/20 A	LLEN GRAY, KELLY	(Mrs.)	····		00000001	
4 Date 06/12/2012	5 Payee name METRO MAILER						
6 Amount (\$)	7 Payee address	City; State; Zij	p Code				
\$570.00	5719 E. ROSEDA SUITE 809 FORT WORTH,						
8 PURPOSE		gories listed at the top of this	schedule)	(b) Description	•	of Texas, complete So	chedule T)
OF	Advertising Exper	ise		POLITICAL	ADVERTISIN	G	
EXPENDITURE							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeh	older name		Office so	ught:	Office held:	
Date	Payee name						
05/07/2012	METRO PCS	<u> </u>					
Amount (\$)	Payee address 3031 S FREEWA	City; State; Zip ✓	Code				
\$140.00	FORT WORTH,						
PURPOSE		pories listed at the top of this	schedule)	Description	•	of Texas, complete Sc	hedule T) 🔲
OF	Office Overhead/I	Rental Expense		PHONES S	ERVICE FOR	PHONE BANK	
EXPENDITURE							
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeho	older name		Office so	ught:	Office held:	
Date	Payee name						÷
06/09/2012	METRO PCS						
Amount (\$)	Payee address	City; State; Zip	Code				
\$140.00	3031 S FREEWA FORT WORTH, 1						
BUBBBBB		ories listed at the top of this	schedule)	Description	(If travel outside of	of Texas, complete Scl	hedule T) 🔲
PURPOSE OF	Office Overhead/F	Rental Expense		PHONES SI	ERVICE FOR I	PHONE BANK	
EXPENDITURE							
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeho	lder name	I	Office sou	ught:	Office held:	
Date 05/20/2012	Payee name OFFICE DEPOT						
Amount (\$)	Payee address	City; State; Zip	Code				
\$99.19	401 CARROL STF FORT WORTH, T						
PURPOSE OF EXPENDITURE	Category (See Category Printing Expense	ories listed at the top of this s	schedule)	Description CAMPAIGN	(If travel outside o OFFICE SUPF	if Texas, complete Sch PLIES	iedule T)
Complete ONLY if direct expenditure to benefil C/OH	Candidate / Officeho	der name	I	Office sou	ght:	Office held:	

(512)463-5800 TDD 1-800-735-2989

SCH	EDU	LE F	

Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services nse Food/Beverage Expense Polling Expense Printing Expense	NDITURE CATEGORIES Salaries/Wages/Contract Labo Solicitation/Fundraising Expen Travel In District Travel Out Of District Office Overhead/Rental Expen GUIDE explains how to complete	se Transporta Contributio Candida se OTHER (e	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee inter a category not listed above)
1 PAGE #	2 FILER NAME			3 ACCOUNT # (TEC filer
Schedule: 10/14		LLY (Mrs.)		00000001
4 Date 05/18/2012	5 Payee name OK PAPER CENTER			
6 Amount (\$)		; Zip Code		
\$11.26	5700 AIRPORT FRWY HALTOM CITY, TX 76117			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Printing Expense		cription (If travel outs MPAIGN OFFICE S	side of Texas, complete Schedule T) [SUPPLIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name			
05/04/2012	PARISH, EVELYN			
Amount (\$) \$200.00	Payee address City; State; 5305 CARRIER DRIVE FORT WORTH, TX 76107	Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Salaries/Wages/Contract Labor			ide of Texas, complete Schedule T) [OR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date	Payee name			
05/12/2012	PARISH, EVELYN			
Amount (\$) \$260.00	Payee address City; State; 5305 CARRIER DRIVE FORT WORTH, TX 76107	Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor			de of Texas, complete Schedule T) [DR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	C	Office sought:	Office held:
Date 05/12/2012	Payee name PARISH, EVELYN			
Amount (\$)	Payee address City; State;	Zip Code		
\$260.00	5305 CARRIER DRIVE FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top o Salaries/Wages/Contract Labor	· · ·		de of Texas, complete Schedule T) [DR CAMPAIGN SERVICE
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	0	ffice sought:	Office held:

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POLITICAL EXPENDITURES

Advertising Expe Accounting/Banl Consulting Expe Event Expense Fees	king Legal Services Solicitatio pase Food/Beverage Expense Travel In I Polling Expense Travel Ou Printing Expense Office Ove	Wages/Contract Labor Loan R nn/Fundraising Expense Transp District Contribut of District Can	Repayment/Reimbursement ortation Equipment & Related Expense outions/Donations Made By didate/Officeholder/Political Committee R (enter a category not listed above)
1 PAGE # Schedule: 11/14	2 FILER NAME		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name		
06/09/2012	PARISH, EVELYN		
6 Amount (\$) \$160.00	7 Payee address City; State; Zip Code 5305 CARRIER DRIVE FORT WORTH, TX 76107		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor		outside of Texas, complete Schedule T) R FOR CAMPAIGN SERVICE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/10/2012	Payee name PC RESOURCES		
Amount (\$)	Payee address City; State; Zip Code		
\$173.82	5434 BRENTWOOD STAIR RD FORT WORTH, TX 76112		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Office Overhead/Rental Expense	e) Description (If travel of COMPUTER REPAI	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	·····	
05/04/2012	QUIKTRIP		
Amount (\$) \$30.01	Payee address City; State; Zip Code 2321 BEACH STREET HALTOM CITY, TX 76101		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District) Description (If travel o GAS FOR CAMPAIG	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 06/09/2012	Payee name QUIKTRIP		
Amount (\$)	Payee address City; State; Zip Code		
\$30.00	2321 BEACH STREET HALTOM CITY, TX 76101		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	GAS FOR CAMPAIG	utside of Texas, complete Schedule T) N MEETING
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Banl Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund	Contract Labor Loan Repa raising Expense Transporta Contributio strict Candida Rental Expense OTHER (er	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee tter a category not listed above)
1 PAGE # Schedule: 12/14			3 ACCOUNT # (TEC filers) 00000001
4 Date 05/04/2012	5 Payee name SHANNON, JANICE		
6 Amount (\$) \$40.00	7 Payee address City; State; Zip Code 4405 ABBEY COURT FORT WORTH, TX 76119	······	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outs CONTRACT LABOR F(ide of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/25/2012 Amount (\$)	SIGNS ETC Payee address City; State; Zip Code		
\$393.76	1804 PARK PLACE AVENUE FORT WORTH, TX 76010		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outsi CAMPAIGN OFFICE SU	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/10/2012 Amount (\$)	US POST OFFICE Payee address City; State; Zip Code		
\$27.00	RIVERSIDE STATION FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outsic LETTERS TO CONSTIT	le of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/31/2012 Amount (\$)	US POST OFFICE Payee address City: State: Zip Code	<u> </u>	
\$90.00	Payee address City; State; Zip Code RIVERSIDE STATION FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside LETTERS TO CONSTIT	e of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

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SCHEDULE F

	EXPENDITURE CATE	GORIES	
Advertising Expe Accounting/Banl Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wages/ king Legal Services Solicitation/Fund	Contract Labor Lu raising Expense T. C strict /Rental Expense O	oan Repayment/Reimbursement ransportation Equipment & Related Expense ontributions/Donations Made By Candidate/Officeholder/Political Committee THER (enter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 13/14			0000001
4 Date 06/09/2012	5 Payee name US POST OFFICE		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$135.00	FORT WORTH, TX 76111		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)		ravel outside of Texas, complete Schedule T)
OF	Printing Expense	LETTERS TO C	ONSTITUENTS
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/03/2012	Payee name WALMART		
Amount (\$)	Payee address City; State; Zip Code		
\$14.60	3851 AIRPORT FREEWAY FORT WORTH, TX 76111		
	Category (See Categories listed at the top of this schedule)	Description (If tr	avel outside of Texas, complete Schedule T)
PURPOSE OF	Event Expense	FOOD/BEVERA	GE EXPENSE
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
05/07/2012	WALMART		
Amount (\$)	Payee address City; State; Zip Code		
\$25.00	3851 AIRPORT FREEWAY FORT WORTH, TX 76111		
DUDDOOF	Category (See Categories listed at the top of this schedule)	Description (If tra	avel outside of Texas, complete Schedule T)
PURPOSE OF	Travel In District	GAS FOR CAMF	PAIGN MEETING
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 05/31/2012	Payee name WALMART		
Amount (\$)			
• •	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY		
\$9.71	FORT WORTH, TX 76111		
	Category (See Categories listed at the top of this schedule)	Description (If tra	vel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	CAMPAIGN OFF	
EXPENDITURE			
Complete ONLY If	Candidate / Officeholder name		
direct expenditure to benefit C/OH		Office sought:	Office held:

SCHEDULE F

Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Se nse Food/Be Polling I	vards/Memorial Expense ervices everage Expense Expense Expense	DITURE CATE Salaries/Wages/ Solicitation/Fund Travel In District Travel Out Of Di Office Overhead	Contract Labor raising Expense strict	Transporta Contribution Candida OTHER (er	yment/Reimbursement tion Equipment & Related ns/Donations Made By te/Officeholder/Political (nter a category not listed	Committee
1 PAGE #		2 FILER NAME				3 ACCOUNT #	(TEC filers)
Schedule: 14/14	Report: 19/20	ALLEN GRAY, KEL	LY (Mrs.)			00000001	(ILC mers)
4 Date	5 Payee name						
05/31/2012	WALMART						
6 Amount (\$)	7 Payee addres	City State:	7in Cada				
,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	zip Code				
\$35.85	FORT WOR	RT FREEWAY TH, TX 76111					
8 DUBDOSE		e Categories listed at the top of	this schedule)	(b) Description		ide of Texas, complete S	chedule T) 🔲
PURPOSE OF	Event Expen	se		FOOD/BEVI	ERAGE EX	PENSE	
EXPENDITURE							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name		Office sou	ight:	Office held:	
Date	Payee name						
06/03/2012	WALMART						
Amount (\$)	Payee address	G City; State;	Zip Code				
\$34.61	3851 AIRPO	RT FREEWAY FH, TX 76111					
PURPOSE OF EXPENDITURE	Category (See Event Expen	Categories listed at the top of Se	this schedule)	Description FOOD/BEVE		de of Texas, complete So PENSE	hedule T) 📋
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name		Office sou	ght:	Office held:	
Date 06/12/2012	Payee name WALMART						
Amount (\$)	Payee address	City; State;	Zip Code				
\$30.00	3851 AIRPOR FORT WORT	RT FREEWAY H, TX 76111					
PURPOSE OF EXPENDITURE	Category (See Travel In Dist	Categories listed at the top of t rict	his schedule)	Description GAS FOR CA		le of Texas, complete Sc /IEETING	hedule T) 🔲
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Off	iceholder name		Office soug	jht:	Office held:	

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	CAL EXPENDITURES		SCHEDULE G
Advertising Exp Accounting/Ban Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fundra	Contract Labor Loan I aising Expense Transi Contri trict Cai Rental Expense OTHE	Repayment/Reimbursement portation Equipment & Related Expense butions/Donations Made By ndidate/Officeholder/Political Committee R (enter a category not listed above)
1 PAGE # Schedule: 1/1 R	eport: 20/20 2 FILER NAME ALLEN GRAY, KELLY (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 06/11/2012	5 Payee name TARRANT COUNT VOTER REGISTRATION		
6 Amount (\$) \$25.01 Reimbursement from political contributions intended			
8 OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel CAMPAIGN OFFIC	outside of Texas, complete Schedule T)
Date 05/08/2012	Payee name WALMART		
Amount (\$) \$16.08 Reimbursement from political contributions intended	Payee address City; State; Zip Code 3851 AIRPORT FREEWAY FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel CAMPAIGN OFFIC	outside of Texas, complete Schedule T)
Date	Payee name		
05/18/2012 Amount (\$)	Payee address City; State; Zip Code		
\$11.26 Reimbursement from political contributions intended	3851 AIRPORT FREEWAY FORT WORTH, TX 76111		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel of CAMPAIGN OFFICE	outside of Texas, complete Schedule T)
		- J	