

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TX

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

44

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI

Mr. William B

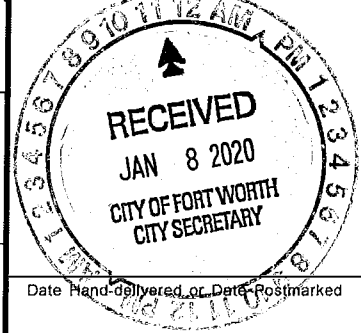
NICKNAME LAST SUFFIX

"Brian"  
Byrd

Byrd

OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

6608 Long Cove Ct. Ft. Worth 76132

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION

( 682 )

667-8081

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI

Mr.

Rob

NICKNAME LAST SUFFIX

Opitz

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

3200 Riverfront Drive, Suite 3200 Fort  
Worth, Texas 76107

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION

( 817 )

332-2301

9 REPORT TYPE

- ☒ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month Day Year Month Day Year  
07 / 01 / 2019 THROUGH 12 / 31 / 2019

11 ELECTION

ELECTION DATE

Month Day Year

ELECTION TYPE

- ☐ Primary ☐ Runoff ☐ Other Description  
☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

City Council District 3

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

40,526.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

16,824.25

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

132,038.17

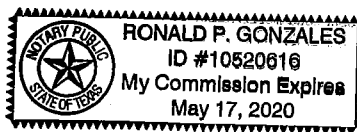
OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

18 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 me under Title 15, Election Code.



AFFIX NOTARY STAMP/SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said William "Brian" Byrd, this the 8th day of January, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19** FILER NAME**20** Filer ID (Ethics Commission Filers)**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULESUBTOTAL  
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 40,526.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 150.00
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,824.25
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
12.2.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Gary Havener**7** Amount of contribution (\$)

1000.00

**6** Contributor address; City; State; Zip Code  
PO Box 121969 Fort Worth, TX 76121**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
12.2.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Freese & Nichols PAC

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
4055 Interna Suite 200 Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12.2.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Myong Chong

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
2733 River Forest Dr Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12.2.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
George W. Faris III

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code  
6650 Trinity Heights Blvd Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.17.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Mae Ferguson**7** Amount of contribution (\$)

100.00

**6** Contributor address; City; State; Zip Code  
1107 Loch Lomond Ct Arlington, TX 76012**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Karol DelReal

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
3036 Tanglewood Park Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.26.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Good Government Fund PAC

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code  
201 Main St Suite 2500 Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12.2.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Marcelle Borgers

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code  
6220 Greenway Rd Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.17.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Frank Liao

**7** Amount of contribution (\$)

500.00

**6** Contributor address; City; State; Zip Code

6612 Sahalee Dr Fort Worth, TX 76132

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert (Bob) Chiang

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6440 Monarch Hills Dr Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lamar C Smith

Amount of contribution (\$)

300.00

Contributor address; City; State; Zip Code

1814 Westover Sq Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Dabney

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

4340 Winding Way Benbrook, TX 76126

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.17.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Monty Trimble

**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code

2857 Manorwood Trl Fort Worth, TX 76109

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ryan Harrington

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

3117 Overton Park Dr E Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Deborah Freed

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

3225 Preston Hollow Rd Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jonathan Munson

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

600 Railhead 200 Fort Worth, TX 76106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.17.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Harold Muckleroy**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
3455 Ranch View Ct Fort Worth, TX 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)**Date**  
11.17.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Una Bailey**Amount of contribution (\$)**

50.00

**Contributor address; City; State; Zip Code**  
6216 Locke Ave Fort Worth, TX 76116**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
11.17.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Martha Leonard**Amount of contribution (\$)**

500.00

**Contributor address; City; State; Zip Code**  
1411 Shady Oaks Ln Fort Worth, TX 76107**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
11.17.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Beth & Randy Gideon**Amount of contribution (\$)**

100.00

**Contributor address; City; State; Zip Code**  
2600 W 7th St #2548 Fort Worth, TX 76107**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.16.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Rosa Navejar

**7** Amount of contribution (\$)

500.00

**6** Contributor address; City; State; Zip Code

2701 Calder Ct Fort Worth, TX 76107

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Steven Pedro

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

7833 Oakmont Blvd Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chris Garcia

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2709 Manorwood Trl Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Richard Casarez

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

115 W 7th St Fort Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.16.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Elliot Garsek**7** Amount of contribution (\$)

125.00

**6** Contributor address; City; State; Zip Code  
3712 Black Canyon Rd Fort Worth, TX 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jan Fersing

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
3800 Trailwood Ln Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Donald Jury

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code  
436 Haltom Rd Fort Worth, TX 76117

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Martha & H.B. Baker

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code  
121 E Exchange Ave Fort Worth, TX 76104

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.16.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Patrick Powers**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
PO Box 100758 Fort Worth, TX 76132**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Paul Hagseth

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code  
3105 Spanish Oak Dr Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Ronald Wells

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
4716 Oak Trl Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Reed Pigman, Jr.

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code  
200 Texas Way Fort Worth, TX 76106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Leo Wegemer

**7** Amount of contribution (\$)

1000.00

**6** Contributor address; City; State; Zip Code

4824 Overton Holw Fort Worth, TX 76109

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cooper Collins

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6462 Sumac Rd Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bill Kraftson

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

6901 Vista Ridge Ct Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Debra Carney

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

4317 Miraloma Dr Fort Worth, TX 76126

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Michael Sharpe**7** Amount of contribution (\$)

500.00

**6** Contributor address; City; State; Zip Code  
6320 Southern Hills Dr Fort Worth, TX 76132**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Julie Barber

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
6122 Woodgarden Ln Benbrook, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kim Jorns

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
6712 Watermill Dr Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
David Pettit

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
306 W 7th St Suite 1025 Fort Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Stephanie Phelps**7** Amount of contribution (\$)

100.00

**6** Contributor address; City; State; Zip Code  
6420 Fianna Hills Dr Fort Worth, TX 76132**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jerry Cabluck

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
1308 Virginia Pl Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
J. David Traucy

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
2734 Colonial Pkwy Fort Worth, TX 76109-1211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Melinda Vance

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code  
3901 Mockingbird Ln Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

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**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lorna Benes

**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code

4205 Tamworth Rd Fort Worth, TX 76116

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brett Austin

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

501 Wood Lake Rd Aledo, Tx 76008

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raj Gandhi

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

PO Box 33937 Fort Worth, TX 76162

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Susan Dixon

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

6821 River Bend Rd Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Maria Regina (Mae) Lee**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
3516 Ranch View Ter Fort Worth, TX 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Rosie and Mike Moncrief

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
777 Taylor St Suite 1030 Fort Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Carolyn Moore

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
6720 Blue Meadow Dr Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Olivia Eudaly

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code  
4704 Mill Springs Ct Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
William Meadows**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
121 Rivercrest Dr Fort Worth, TX 76107**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Elizabeth McCurdy

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
6813 Lahontan Dr Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Thomas Fairchild

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
6725 Medinah Rd Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Judy Needham

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
6341 Klamath Rd Fort Worth, TX 76135

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Susan Pritchett**7** Amount of contribution (\$)

100.00

**6** Contributor address; City; State; Zip Code  
450 FM 2871 Fort Worth, TX 76126**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Robert Benda

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
608 Paint Pony Trl N Fort Worth, TX 76108

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Helen Boydston

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
1406 Clubview Ct Arlington, TX 76013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Louise Appleman

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
3855 Bellaire Cir Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Megan & Victor Boschini, Jr.**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
3100 Avondale Ave Fort Worth, TX 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)**Date**  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jeff Prostok

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
777 Main St 1290 Fort Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**Date**  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Janis Crider

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
5001 Highland Meadow Dr Fort Worth, TX  
76132-3815

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**Date**  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kara Waddell

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
4512 Briarhaven Rd Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
William Bettis**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
11 Bounty Rd E Benbrook, TX 76132**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Steven Pedro

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code  
7833 Oakmont Blvd Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Tom Deas

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
6912 Desert Highlands Dr Fort Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Richard Minker

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
2865 Manorwood Trl Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jerry Conatser**7** Amount of contribution (\$)

2500.00

**6** Contributor address; City; State; Zip Code  
6716 St. Andrews Rd Ft Worth, TX 76132**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Robert Galvan

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
11601 Wind Creek Ct Aledo, TX 76008

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Richard Roark

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
6209 Kenwick Ave Ft Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Tony Creme

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code  
5160 Peach Willow Ln Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME William Byrd

3 Filer ID (Ethics Commission Filers)

4 Date  
11.8.19

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Chris Powers

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code  
105 Nursery Ln Suite 200 Ft Worth, TX 76114

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
11.10.19

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Austin Reilly

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
5429 Huntly Dr Ft Worth, TX 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Malcolm Loudon

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code  
500 W. 7th St Suite 107 Ft Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Timothy Fleet

Amount of contribution (\$)

2,500.00

Contributor address; City; State; Zip Code  
3045 Lackland Rd Ft. Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.10.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ed Palm

**7** Amount of contribution (\$)

100.00

**6** Contributor address; City; State; Zip Code

3025 Bellaire Dr. S. FW, Texas 76109

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Nathan McGrew

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

4900 Westridge Apt. 2 Fort Worth, Texas 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.10.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Maddux

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

2120 Ridgmar Blvd Suite 14, FW, Texas 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)Linebarger, Goggan, Blair,  
and Sampson

Amount of contribution (\$)

2500.00

Contributor address; City; State; Zip Code

100 Throckmorton, FW, Texas 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
11.16.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Denny Alexander**7** Amount of contribution (\$)

250.00

**6** Contributor address; City; State; Zip Code  
4200 S. Hulen St St. 617, FW, Texas 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
11.16.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Nathan McGrew

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code  
4900 Westridge Apt. 2 Fort Worth, Texas 76109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.17.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Julie Miers

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code  
6848 Middle Road, FW, Texas 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11.26.19Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
QSEL PAC

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code  
201 Main St. FW, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:**2** FILER NAME William Byrd**3** Filer ID (Ethics Commission Filers)**4** Date  
12.3.19**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Aex Geesbreght**7** Amount of contribution (\$)

500.00

**6** Contributor address; City; State; Zip Code  
2805 Alton Rd, FW, Texas 76109**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)**Date**  
11.15.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Matthew Blessy**Amount of contribution (\$)**

1.00

**Contributor address; City; State; Zip Code**  
4510 Bobtown Rd Garland, Texas 75043**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
11.18.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Robert Dow**Amount of contribution (\$)**

1000.00

**Contributor address; City; State; Zip Code**  
6904 Hazeltine Rd FW, TX 76102**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****Date**  
11.15.19**Full name of contributor** ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Joe Alcala**Amount of contribution (\$)**

1,000.00

**Contributor address; City; State; Zip Code**  
4101 Cloudveil Terrace, Fort Worth, Texas 76109**Principal occupation / Job title (See Instructions)****Employer (See Instructions)****ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME William Byrd

3 Filer ID (Ethics Commission Filers)

4 Date  
12.2.19

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Roach

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

2805 Alton Rd, FW, Texas 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
12.31.19

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Verne Garrison

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

6717 Meadows West Rd. FW, Texas 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12.13.19

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Walsh Ranch Limited Partnership

Amount of contribution (\$)

5000.00

Contributor address; City; State; Zip Code

500 W. 7th St. FW, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

Steven Greig

Amount of contribution (\$)

2,000.00

Contributor address; City; State; Zip Code

2902 Rivergrove Ct. FW, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E:	
2 FILER NAME <b>William Brian Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED LOANS		\$ 150.00	
5 Date of loan <b>10.3.17</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William Brian Byrd</b>	9 Loan Amount (\$) <b>150.00</b>	
6 Is lender a financial institution? <b>Y</b> <input checked="" type="radio"/> <b>N</b>	8 Lender address; City; State; Zip Code <b>6608 Long Cove Ct. FW, TX 76132</b>	10 Interest rate <b>n/a</b>	
		11 Maturity date <b>n/a</b>	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)	
Is lender a financial institution? <b>Y</b> <b>N</b>	Lender address; City; State; Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal Occupation (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME William Byrd	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 9.30.19	<b>5</b> Payee name CF Events	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 4200 S. Hulen St. Fort Worth, Texas 76109	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event	<b>(b)</b> Description Space rental
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10.10.19	Payee name Ballard Spahr	
Amount (\$) 3500.00	Payee address; City; State; Zip Code 1909 K St. NW Washington, DC 20006	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Dinner Event	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11.18.19	Payee name Iron Egg	
Amount (\$) 50.00	Payee address; City; State; Zip Code 2600 8th Ave. Fort Worth, Texas 76110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Website Adjustment
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>9.26.19</b>		5 Payee name <b>WishList Direct</b>			
6 Amount (\$) <b>914.18</b>		7 Payee address; City; State; Zip Code <b>1260 S. Business I-35, New Braunfels, Texas 78130</b>			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(b) Description <b>Printing and mailing</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>11.12.19</b>		Candidate / Officeholder name <b>Pamela Moncrief</b>			
Amount (\$) <b>297.50</b>		Office sought <b>Pop Up Bar</b>			
Payee name <b>Pamela Moncrief</b>		State; Zip Code			
Category (See Categories listed at the top of this schedule) <b>Event</b>		Description <b>Bartender</b>			
PURPOSE OF EXPENDITURE		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>12.31.19</b>		Candidate / Officeholder name <b>Authorize.NET</b>			
Amount (\$)		Office sought <b>808 E. Utah Valley Dr. American Fork, UT 84003</b>			
Payee name <b>Authorize.NET</b>		State; Zip Code			
Category (See Categories listed at the top of this schedule) <b>Banking</b>		Description <b>Transaction Fees</b>			
PURPOSE OF EXPENDITURE		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name <b>Office sought</b> <b>Office held</b>					
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11.15.19		<b>5</b> Payee name Tuesday Morning			
<b>6</b> Amount (\$) 32.45		<b>7</b> Payee address; City; State; Zip Code 5240 S. Hulen St Fort Worth Texas 76107			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event		<b>(b)</b> Description Food and Food Prep		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.21.19		Payee name Tarrant GOP			
Amount (\$) 150.00		Payee address; City; State; Zip Code 7524 Mosier View Ct. FW, Texas 76118			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dinner Event		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8.5.19		Payee name Iron Egg			
Amount (\$) 79.95		Payee address; City; State; Zip Code 2600 8th Ave. Fort Worth, Texas 76110			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Website Adjustment		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>11.18.19</b>		5 Payee name <b>WCGS</b>			
6 Amount (\$) <b>680.00</b>		7 Payee address; City; State; Zip Code <b>4006 White Settlement Road Fort Worth Texas 76107</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event</b>		(b) Description <b>Food and Food Prep</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>11.15.19</b>		Payee name <b>Trader Joe's</b>			
Amount (\$) <b>69.14</b>		Payee address; City; State; Zip Code <b>2701 S. Hulen St Fort Worth, Texas 76109</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event</b>		Description <b>Food/drink</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>12.9.19</b>		Payee name <b>Iron Egg</b>			
Amount (\$) <b>79.95</b>		Payee address; City; State; Zip Code <b>2600 8th Ave. Fort Worth, Texas 76110</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>		Description <b>Website Adjustment</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11.27.19		<b>5</b> Payee name Ivette Hernandez			
<b>6</b> Amount (\$) 47.25		<b>7</b> Payee address; City; State; Zip Code 2712 S. Jennings Ave. Fort Worth, Texas 76110			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Banking Fees		<b>(b)</b> Description Credit Card Transaction Fee		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11.15.19		Payee name Spec's			
Amount (\$) 425.74		Payee address; City; State; Zip Code 4720 Bryant Irvin Rd Fort Worth, Texas 76132			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event		Description Food/drink		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 7.16.19		Payee name Iron Egg			
Amount (\$) 50.00		Payee address; City; State; Zip Code 2600 8th Ave. Fort Worth, Texas 76110			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Website		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME <b>William Byrd</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7.12.19</b>	<b>5</b> Payee name <b>Kona Ice</b>		
<b>6</b> Amount (\$) <b>700.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1989 Colonial Parkway Fort Worth, Texas 76109</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) <b>Event</b>		<b>(b) Description</b> <b>Snow Cones</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
<b>Date</b> <b>9.18.19</b>	<b>Payee name</b> <b>Texans for Greg Abbott</b>		
<b>Amount (\$)</b> <b>500.00</b>	<b>Payee address; City; State; Zip Code</b> <b>PO Box 308 Austin, Texas 78767</b>		
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Campaign Contribution</b>		<b>Description</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
<b>Date</b> <b>9.11.19</b>	<b>Payee name</b> <b>Texans for Dan Patrick</b>		
<b>Amount (\$)</b> <b>500.00</b>	<b>Payee address; City; State; Zip Code</b> <b>PO Box 685085 Austin, Texas 78768</b>		
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Campaign Contribution</b>		<b>Description</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>11.4.19</b>		5 Payee name <b>Cyberservices</b>			
6 Amount (\$) <b>0.90</b>		7 Payee address; City; State; Zip Code <b>PO Box 8999 San Francisco, CA 94128</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Banking Fees</b>		(b) Description <b>Credit Card Transaction Fee</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>11.26.19</b>		Payee name <b>USPS</b>			
Amount (\$) <b>55.00</b>		Payee address; City; State; Zip Code <b>7101 Bryant Irvin Rd Fort Worth, Texas 76132</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>		Description <b>Stamps</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>12.16.19</b>		Payee name <b>Iron Egg</b>			
Amount (\$) <b>50.00</b>		Payee address; City; State; Zip Code <b>2600 8th Ave. Fort Worth, Texas 76110</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>		Description <b>Website</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME William Byrd	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 12.2.19	<b>5</b> Payee name Cyberservices
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<b>6</b> Amount (\$) 7.80	<b>7</b> Payee address; PO Box 8999 San Francisco, CA 94128	City;	State;	Zip Code
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<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Banking Fees	<b>(b)</b> Description Credit Card Transaction Fee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8.16.19	Payee name USPS
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Amount (\$) 118.00	Payee address; 7101 Bryant Irvin Rd Fort Worth, Texas 76132	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description PO Box rental
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8.16.19	Payee name Iron Egg
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Amount (\$) 50.00	Payee address; 2600 8th Ave. Fort Worth, Texas 76110	City;	State;	Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Website
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME William Byrd		3 Filer ID (Ethics Commission Filers)	
4 Date 12.2.19		5 Payee name Gmail Google			
6 Amount (\$) 19.19		7 Payee address; City; State; Zip Code 636 O St. Sanger, CA 93657			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Email		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11.18.19		Payee name USPS			
Amount (\$) 118.00		Payee address; City; State; Zip Code 7101 Bryant Irvin Rd Fort Worth, Texas 76132			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead		Description PO Box rental		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 9.16.19		Payee name Iron Egg			
Amount (\$) 50.00		Payee address; City; State; Zip Code 2600 8th Ave. Fort Worth, Texas 76110			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Website		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>8.12.19</b>		5 Payee name <b>Ott Advertising</b>			
6 Amount (\$) <b>409.23</b>		7 Payee address; City; State; Zip Code <b>3205 Lamesa Place, Fort Worth, Texas 76109</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(b) Description <b>Design of mailer</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>7.15.19</b>		Payee name <b>Fort Worth Republican Women</b>			
Amount (\$) <b>25.00</b>		Payee address; City; State; Zip Code <b>306 W. 7th St. Fort Worth, Texas 76107</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Luncheon Fee</b>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>9.11.19</b>		Payee name <b>Texans for Greg Abbott</b>			
Amount (\$) <b>100.00</b>		Payee address; City; State; Zip Code <b>PO Box 308 Austin, Texas 78767</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Campaign Contribution</b>		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10.3.19	<b>5</b> Payee name Gmail Google		
<b>6</b> Amount (\$) 19.19	<b>7</b> Payee address; City; State; Zip Code 636 O St. Sanger, CA 93657		
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Email
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 12.3.19	Payee name Authnet Gateway		
Amount (\$) 25.00	Payee address; City; State; Zip Code 808 E. Utah Valley Dr. American Fork, UT 84003		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking		Description Billing service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 12.5.19	Payee name Nationbuilder		
Amount (\$) 59.00	Payee address; City; State; Zip Code 520 S Grand Ave. Los Angeles, CA 90017		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Database
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11.4.19		<b>5</b> Payee name Gmail Google			
<b>6</b> Amount (\$) 19.19		<b>7</b> Payee address; City; State; Zip Code 636 O St. Sanger, CA 93657			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Email		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11.4.19		Payee name Authnet Gateway			
Amount (\$) 25.00		Payee address; City; State; Zip Code 808 E. Utah Valley Dr. American Fork, UT 84003			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Banking		Description Billing service		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9.5.19		Payee name Nationbuilder			
Amount (\$) 59.00		Payee address; City; State; Zip Code 520 S Grand Ave. Los Angeles, CA 90017			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description Database		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 8.2.19	<b>5</b> Payee name Gmail Google		
<b>6</b> Amount (\$) 19.19	<b>7</b> Payee address; City; State; Zip Code 636 O St. Sanger, CA 93657		
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Email
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 10.2.19	Payee name Authnet Gateway		
Amount (\$) 25.00	Payee address; City; State; Zip Code 808 E. Utah Valley Dr. American Fork, UT 84003		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking		Description Billing service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 11.5.19	Payee name Nationbuilder		
Amount (\$) 59.00	Payee address; City; State; Zip Code 520 S Grand Ave. Los Angeles, CA 90017		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Database
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>10.21.19</b>		5 Payee name <b>FW Republican Women</b>			
6 Amount (\$) <b>25.00</b>		7 Payee address; City; State; Zip Code <b>306 W. 7th St Fort Worth Texas 76102</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event</b>		(b) Description <b>Food and Food Prep</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>11.4.19</b>		Payee name <b>Craig Goldman Campaign</b>			
Amount (\$) <b>5000.00</b>		Payee address; City; State; Zip Code <b>PO Box 100039 Fort Worth, Texas 76185</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event</b>		Description <b>Food/drink</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <b>10.16.19</b>		Payee name <b>Iron Egg</b>			
Amount (\$) <del>7500.00</del> <b>50.00</b>		Payee address; City; State; Zip Code <b>2600 8th Ave. Fort Worth, Texas 76110</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>		Description <b>Website Adjustment</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME William Byrd		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 9.3.19		<b>5</b> Payee name Gmail Google			
<b>6</b> Amount (\$) 19.19		<b>7</b> Payee address; 636 O St. Sanger, CA 93657 City; State; Zip Code			
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Email		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8.2.19		Payee name Authnet Gateway			
Amount (\$) 25.00		Payee address; 808 E. Utah Valley Dr. American Fork, UT 84003 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Banking		Description Billing service		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.7.19		Payee name Nationbuilder			
Amount (\$) 59.00		Payee address; 520 S Grand Ave. Los Angeles, CA 90017 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees		Description Database		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:		<b>2</b> FILER NAME <b>William Byrd</b>		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date <b>7.11.19</b>		<b>5</b> Payee name <b>Anael Luebanos for School Board</b>			
<b>6</b> Amount (\$) <b>250.00</b>		<b>7</b> Payee address; City; State; Zip Code <b>3321 Ryan Ave. Fort Worth, Texas 76110</b>			
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Contribution</b>		<b>(b)</b> Description		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
<b>Date</b> <b>9.4.19</b>		<b>Payee name</b> <b>Authnet Gateway</b>			
<b>Amount (\$)</b> <b>25.00</b>		<b>Payee address; City; State; Zip Code</b> <b>808 E. Utah Valley Dr. American Fork, UT 84003</b>			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Banking</b>		<b>Description</b> <b>Billing service</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
<b>Date</b> <b>8.5.19</b>		<b>Payee name</b> <b>Nationbuilder</b>			
<b>Amount (\$)</b> <b>59.00</b>		<b>Payee address; City; State; Zip Code</b> <b>520 S Grand Ave. Los Angeles, CA 90017</b>			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) <b>Fees</b>		<b>Description</b> <b>Database</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <b>William Byrd</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>7.2.19</b>		5 Payee name <b>Gmail Google</b>			
6 Amount (\$) <b>19.19</b>		7 Payee address; City; State; Zip Code <b>636 O St.Sanger, CA 93657</b>			
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(b) Description <b>Email account</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>7.2.19</b>		Payee name <b>Authnet Gateway</b>			
Amount (\$) <b>25.00</b>		Payee address; City; State; Zip Code <b>808 E. Utah Valley Dr. American Fork, UT 84003</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Banking</b>		Description <b>Billing service</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>7.5.19</b>		Payee name <b>Nationbuilder</b>			
Amount (\$) <b>59.00</b>		Payee address; City; State; Zip Code <b>520 S Grand Ave. Los Angeles, CA 90017</b>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees</b>		Description <b>Database</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					