

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

49 of 52

2 FILER NAME

CATHY HIRT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

3/18/2011

Jay Lesok

6 Contributor address: City: State: Zip Code

226 Bailey Ave Suite 104  
Ft Worth, TX 76107

100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

4/4/2011

Alvaro and Angela Rios

Contributor address: City: State: Zip Code

3604 Arborlawn Dr  
Ft Worth, TX 76109

300.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

4/1/2011

Janet Williams

Contributor address: City: State: Zip Code

2700 W. Berry  
Ft Worth, TX 76109

20.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

2/25/2011

Bob and Barbara Meece

Contributor address: City: State: Zip Code

7583 Surfside Dr  
Ft Worth, TX 76135

20.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

In-kind contribution description (if applicable)

1/26/11

Mr + Mrs Peter Hoffman

Contributor address: City: State: Zip Code

4320 Bellaire Dr S #203W  
Ft Worth, TX 76109

40.00

(If travel outside of Texas, complete Schedule T)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

50 of 52

2 FILER NAME

CATHY HIRT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/2/2011

5 Full name of contributor

☐ out-of-state PAC ID#

WILLARD L. STANSBERRY

KAY M. STANSBERRY

6 Contributor address City State Zip Code

4804 WESTLAKE

FORT WORTH, TX 76132

7 Amount of  
contribution (\$)

100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/2/2011

Full name of contributor

☐ out-of-state PAC ID#

BENJAMIN ISGUR

Contributor address City State Zip Code

3000 WESTRIDGE AVE

FT WORTH, TX 76116

Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/23/2011

Full name of contributor

☐ out-of-state PAC ID#

ERNEST JOHNSON

Contributor address City State Zip Code

6117 LENWAY AVE

FT WORTH, TX 76116

Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/01/2011

Full name of contributor

☐ out-of-state PAC ID#

TARA WHITEHEAD

Contributor address City State Zip Code

3628 NORMANDY AVE

DALLAS, TX 75205

Amount of  
contribution (\$)

150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2011

Full name of contributor

☐ out-of-state PAC ID#

STEVEN KATTEN

Contributor address City State Zip Code

6012 WELCH AVE

FT WORTH, TX 76132

Amount of  
contribution (\$)

250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

51 of 52

2 FILER NAME

CATHY HIRT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/31/2011

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

CECIL J. HASH + LINDA S. ORR

6 Contributor address; City; State; Zip Code

232 CASA BLANCA CIR  
FORT WORTH, TX 761077 Amount of  
contribution (\$)

250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/1/2011

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)THOMAS ERWIN M<sup>C</sup> CRAW

Contributor address; City; State; Zip Code

P.O. BOX 11280  
FT WORTH, TX 76110Amount of  
contribution (\$)

250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/2/2011

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

SHARLEY W. OR JOHNNY L. LEWIS

Contributor address; City; State; Zip Code

953 E. TERRELL AVE  
FT WORTH, TX 76104Amount of  
contribution (\$)

250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/2/2011

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

JOAN A. MENCHACA M.D.

HARRIET W. MENCHACA

Contributor address; City; State; Zip Code

2400 WINTON TER W.  
FT WORTH, TX 76109Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

DR RAJANARENDER R. CHOLLET

Contributor address; City; State; Zip Code

6916 RIDGEWOOD DRIVE  
FORT WORTH, TX 76132Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

52 of 52

2 FILER NAME

CATHY HIRT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7-4-2011

5 Full name of contributor

☐ out-of-state PAC (ID#)

THOMAS G. MURNANE  
CONSTANCE P. MURNANE TTEES

6 Contributor address; City; State; Zip Code

6804 BENITO CT  
FT WORTH, TX 76126

7 Amount of  
contribution (\$)

150.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/1/2011

Full name of contributor

☐ out-of-state PAC (ID#)

RITA M. KUBES

Contributor address; City; State; Zip Code

2700 W BERRY  
FT WORTH, TX 76109

Amount of  
contribution (\$)

100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2011

Full name of contributor

☐ out-of-state PAC (ID#)

ROSA DURAN

Contributor address; City; State; Zip Code

1012 GARVEY ST  
FT WORTH, TX 76102

Amount of  
contribution (\$)

125.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/4/2011

Full name of contributor

☐ out-of-state PAC (ID#)

RUBINA A. KHAN + ASLAM H. KHAN

Contributor address; City; State; Zip Code

19 THORNHILL RD  
FORT WORTH, TX 76132

Amount of  
contribution (\$)

200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-31-2011

Full name of contributor

☐ out-of-state PAC (ID#)

DENNIS JR OR ASTA E. MCCARTHY

Contributor address; City; State; Zip Code

5900 WIMBLETON WAY  
FORT WORTH, TX 76133

Amount of  
contribution (\$)

\$20.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

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.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 10635		<b>2</b> FILER NAME CATHY HIRT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 1/6/2011		<b>5</b> Payee name Debby Stein			
<b>6</b> Amount (\$) 500.00		<b>7</b> Payee address; City; State; Zip Code 2417 Stadium Dr, Ft Worth, TX 76109			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Salaries/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Community Coordinator	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/6/2011		Payee name Catherine Kelly			
Amount (\$) 105.00		Payee address; City; State; Zip Code 1910 Clover Lane, Ft Worth, TX 76109			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Salaries/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) Deputy Campaign Director	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/6/2011		Payee name Catherine Toledo			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 2608 Museum Way #3407 Ft. Worth, TX 76107			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Salaries/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) Campaign Consultant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/6/2011		Payee name Pritchett Campaign Strategies			
Amount (\$) 2500.00		Payee address; City; State; Zip Code 6836 Brants Ln, Ft Worth, TX 76116			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) strategist	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F: **2** FILER NAME **3** ACCOUNT # (Ethics Commission Filers)

2 of 35 CATHY HERT

**4** Date **5** Payee name

1/07/2011 Button Works

**6** Amount (\$) **7** Payee address; City; State; Zip Code

407.34 781 M. Street Rio Linda, CA 95673

**8** PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)

Advertising Expense Buttons for Campaign

**9** Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/11/2011 Run and Win

Amount (\$) Payee address; City; State; Zip Code

876.00 P.O. Box 2096 Aiken, SC 29802

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Advertising Expense Bumper + Lapel Stickers

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/13/2011 Print Pointe

Amount (\$) Payee address; City; State; Zip Code

157.28 2901 Alta Mere Dr Ft Worth, TX 76116

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Printing Expense Thank you cards

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/14/2011 AT Signs

Amount (\$) Payee address; City; State; Zip Code

140.00 5818 Camp Bowie Blvd Ft Worth TX 76107

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Printing Expense Banners

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
3 of 35		CATHY HIRT			
<b>4</b> Date		<b>5</b> Payee name			
1/18/2011		All Star Party Service			
<b>6</b> Amount (\$)		<b>7</b> Payee address; City; State; Zip Code			
86.60		117 S. Sylvania Ave Ft Worth TX 76111			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule)		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T)	
		Food and Beverage Exp		Popcorn Machine	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
Date		Payee name			
1/19/2011		Balloons Fantastique			
Amount (\$)		Payee address; City; State; Zip Code			
77.00		1607 W. Berry St Ft Worth TX 76110			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule)		<b>Description</b> (If travel outside of Texas, complete Schedule T)	
		Event Expense		Decorations/Campaign Kickoff	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
Date		Payee name			
1/19/2011		Northwest Engravers			
Amount (\$)		Payee address; City; State; Zip Code			
79.00		3300 Cherry Lane Ft Worth TX 76116			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule)		<b>Description</b> (If travel outside of Texas, complete Schedule T)	
		Printing Expense		Staff Name tags	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
Date		Payee name			
1/20/2011		Sportswear Graphics			
Amount (\$)		Payee address; City; State; Zip Code			
1091.16		110 St Louis, Ft Worth, TX 76104			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule)		<b>Description</b> (If travel outside of Texas, complete Schedule T)	
		Printing Expense		T-Shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 4 of 35		<b>2</b> FILER NAME CATHY HIRT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 1/20/2011		<b>5</b> Payee name Taylor Rentals			
<b>6</b> Amount (\$) 64.95		<b>7</b> Payee address; City; State; Zip Code 220 University Drive Ft Worth TX 76107			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Drapes and Piping	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/20/2011		Payee name Tom Thumb			
Amount (\$) 48.99		Payee address; City; State; Zip Code 3000 South Hulen, Ft Worth, TX 76109			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food and Beverage		Description (If travel outside of Texas, complete Schedule T) Cake for Kickoff	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/21/2011		Payee name John Reynolds			
Amount (\$) 3973.38		Payee address; City; State; Zip Code 6321 Darwood Ave. Ft Worth TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) Videographer	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/21/2011		Payee name Lune Star Banners and Flags			
Amount (\$) 150.82		Payee address; City; State; Zip Code 212 S Main St, Ft. Worth TX 76104			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event expense		Description (If travel outside of Texas, complete Schedule T) Ft Worth Flag and Stand	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F: **2** FILER NAME **3** ACCOUNT # (Ethics Commission Filers)

5 2035 CATHY HIRT

**4** Date **5** Payee name

1/21/2011 AT Signs

**6** Amount (\$) **7** Payee address; City; State; Zip Code

137.12 5818 Camp Bowie Blvd. Ft Worth, TX 76107

**8** PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)

Printing Expense Banners

**9** Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/23/2011 CUS

Amount (\$) Payee address; City; State; Zip Code

36.39 2608 W Berry St. Ft Worth, TX 76109

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Gift/Awards Expense Bags for + shirt gifts

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/25/2011 Woodhaven Country Club

Amount (\$) Payee address; City; State; Zip Code

200.00 913 Country Club Lane Ft Worth, TX 76112

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Event Expense Room Rental

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

1/25/2011 Fast Signs

Amount (\$) Payee address; City; State; Zip Code

164.25 5601 Locke Ave Ft Worth, TX 76107

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Printing Expense Labels

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <u>6 of 35</u>		<b>2</b> FILER NAME <u>CATHY HIRT</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>1/26/2011</u>		<b>5</b> Payee name <u>City of Fort Worth</u>			
<b>6</b> Amount (\$) <u>120.00</u>		<b>7</b> Payee address; City; State; Zip Code <u>1000 Throckmorton St. Ft Worth, TX 76102</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Rental Expense</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>Certificate of Occupancy</u>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>1/28/2011</u>		Payee name <u>Debby Stein</u>			
Amount (\$) <u>500.00</u>		Payee address; City; State; Zip Code <u>2417 Stadium Dr. Ft Worth, TX 76109</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Contract Labor</u>		Description (If travel outside of Texas, complete Schedule T) <u>Community Coordinator</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>1/28/2011</u>		Payee name <u>Catherine Toledo</u>			
Amount (\$) <u>1500.00</u>		Payee address; City; State; Zip Code <u>2608 Museum Way # 3407 Ft Worth, TX 76107</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Salaries/Contract labor</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign Manage</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>1/28/2011</u>		Payee name <u>Fasclumpit</u>			
Amount (\$) <u>62.15</u>		Payee address; City; State; Zip Code <u>7443 Airport Freeway Ft Worth 76118</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Other</u>		Description (If travel outside of Texas, complete Schedule T) <u>Paper supplies for invitations</u>	
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****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 4 PB 35		<b>2</b> FILER NAME CATHY HIRT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 1/31/2011		<b>5</b> Payee name USPS			
<b>6</b> Amount (\$) 88.00		<b>7</b> Payee address; City; State; Zip Code Arlington Heights Post Office Ft. Worth TX 76107			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Other		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Stamps	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/2/2011		Payee name Print Pointe			
Amount (\$) 61.37		Payee address; City; State; Zip Code 2901 Alta Mere, Ft Worth, TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Invitations	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/2/2011		Payee name Pritchett Campaign Strategies			
Amount (\$) 2500.00		Payee address; City; State; Zip Code 6836 Brants Ln, Ft Worth, TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) Strategist	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/15/2011		Payee name Office Depot			
Amount (\$) 15.71		Payee address; City; State; Zip Code 401 Carroll St Ft Worth TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Office Cleaning Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 8 of 35		<b>2</b> FILER NAME CATHY HIRT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 2/08/2011		<b>5</b> Payee name Atmos Energy			
<b>6</b> Amount (\$) \$250.00		<b>7</b> Payee address; City; State; Zip Code PO Box 650205, Dallas, TX 75265			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Office Overhead		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Gas Co. Deposit	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/15/2011		Payee name Floor Care			
Amount (\$) 190.00		Payee address; City; State; Zip Code 2976 Salado Trail Ft Worth, TX 76118			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) HQ Floor Cleaning	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/10/2011		Payee name PHPR			
Amount (\$) 262.50		Payee address; City; State; Zip Code 1253 W Magnolia Ave. Ft Worth, TX 76104			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Public Relations Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/14/2011		Payee name Costco			
Amount (\$) 79.52		Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Ft Worth, TX 76132			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule) Food and Beverage		Description (If travel outside of Texas, complete Schedule T) HQ Opening	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 9 of 35		<b>2</b> FILER NAME CATHY HERT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 2/14/2011		<b>5</b> Payee name City of Ft Worth			
<b>6</b> Amount (\$) 33.00		<b>7</b> Payee address; City; State; Zip Code 1000 Throckmorton St. Ft Worth TX 76102			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Fees		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Temporary Sign	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/22/2011		Payee name Office Depot			
Amount (\$) 8.64		Payee address; City; State; Zip Code 401 Carroll St. Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Name tags	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/14/2011		Payee name Staples			
Amount (\$) 19.26		Payee address; City; State; Zip Code 1600 S. University Ft Worth TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Envelopes	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/24/2011		Payee name Staples			
Amount (\$) 79.29		Payee address; City; State; Zip Code 1600 S. University Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Paper and Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1 Total pages Schedule F:</b> 10 of 35		<b>2 FILER NAME</b> CATHY HIRT		<b>3 ACCOUNT # (Ethics Commission Filers)</b>	
<b>4 Date</b> 2/14/2011		<b>5 Payee name</b> City of Fort Worth			
<b>6 Amount (\$)</b> 100.00		<b>7 Payee address; City; State; Zip Code</b> 1000 Throckmorton Ft Worth TX 76102			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See categories listed at the top of this schedule)</b> Other		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> Filing Fee	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought	Office held
<b>Date</b> 2/17/2011		<b>Payee name</b> Woodhaven Country Club			
<b>Amount (\$)</b> 1266.15		<b>Payee address; City; State; Zip Code</b> 913 Country Club Lane, Ft Worth TX 76112			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> Food and Beverage Exp		<b>Description (If travel outside of Texas, complete Schedule T)</b> Catering and Room Rental	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought	Office held
<b>Date</b> 2/17/2011		<b>Payee name</b> Mark Stelmus			
<b>Amount (\$)</b> 38.91		<b>Payee address; City; State; Zip Code</b> 3237 Wabash Ave Ft Worth TX 76109			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> Other		<b>Description (If travel outside of Texas, complete Schedule T)</b> Fire Extinguishers	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought	Office held
<b>Date</b> 2/18/2011		<b>Payee name</b> Band B Signs			
<b>Amount (\$)</b> 1444.06		<b>Payee address; City; State; Zip Code</b> 5209 Winifred Dr. Ft Worth TX 76133			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> H Q Signs	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought	Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11 80 35		2 FILER NAME CATHY HIRT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/4/2011		5 Payee name Fast Signs			
6 Amount (\$) 7577.50		7 Payee address; City; State; Zip Code 5601 Locke Ave Ste B1 Ft Worth TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) Yard signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/28/2011		Payee name Debby Stein			
Amount (\$) 500.00		Payee address; City; State; Zip Code 2417 Stadium Dr. Ft Worth, TX 76109			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract Labor		Description (If travel outside of Texas, complete Schedule T) Community Coordinator	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/28/2011		Payee name Catherine Toledo			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 2608 Museum Way #3407 Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Contract Labor		Description (If travel outside of Texas, complete Schedule T) Campaign Consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/1/2011		Payee name Pritchett Campaign Strategies			
Amount (\$) 6528.37		Payee address; City; State; Zip Code 6836 Brants Ln. Ft Worth, TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Fees		Description (If travel outside of Texas, complete Schedule T) Strategist, Phone Lists, Design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 12 of 35		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/7/2011		5 Payee name Fort Worth Water			
6 Amount (\$) 143.69		7 Payee address; City; State; Zip Code PO Box 870 Ft Worth, TX 76101			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead		(b) Description (If travel outside of Texas, complete Schedule T) Water at HQ	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2011		Payee name USPS			
Amount (\$) 88.00		Payee address; City; State; Zip Code Trinity River Station Ft Worth TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/9/2011		Payee name Leann Gomez 2 Agent for Robyn Emerson			
Amount (\$) 3000.00		Payee address; City; State; Zip Code 2201 Towbridge Circle Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Fee		Description (If travel outside of Texas, complete Schedule T) GOTV strategies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/10/2011		Payee name Stream Energy			
Amount (\$) 153.80		Payee address; City; State; Zip Code PO Box 650026 Dallas, TX 75265			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office Overhead		Description (If travel outside of Texas, complete Schedule T) Electric	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 13 of 35		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/1/2011		5 Payee name Upstream Communications			
6 Amount (\$) 7637.04		7 Payee address; City; State; Zip Code 1609 Shoal Creek Ste 203 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Website Design	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2011		Payee name Staples			
Amount (\$) 130.06		Payee address; City; State; Zip Code 1600 S. University, Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Ballot requests	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2011		Payee name Costco			
Amount (\$) 134.06		Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Ft Worth, TX 76132			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food and Beverage		Description (If travel outside of Texas, complete Schedule T) Staff meeting/coffee foods	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/4/2011		Payee name Tom Thumb			
Amount (\$) 132.00		Payee address; City; State; Zip Code 3000 South Hulen, Ft Worth TX 76109			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Solicitation Expense		Description (If travel outside of Texas, complete Schedule T) Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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Consulting Expense  
Event Expense  
Fees

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Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 14 of 35	<b>2</b> FILER NAME CATHY HERT	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 3/18/2011	<b>5</b> Payee name Staples	
<b>6</b> Amount (\$) 80.84	<b>7</b> Payee address; City; State; Zip Code 1600 S University Dr. Ft Worth TX 76107	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
Date 3/18/2011	Payee name Tom Thumb	
Amount (\$) 59.17	Payee address; City; State; Zip Code 3100 S. Hulen, Ft Worth, TX 76109	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food and Beverage	Description (If travel outside of Texas, complete Schedule T) HQ Coffee Event
Complete ONLY if direct expenditure to benefit C/OH		
Date 3/9/2011	Payee name Staples	
Amount (\$) 48.12	Payee address; City; State; Zip Code 1600 S University Dr. Ft Worth, TX 76107	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Office/Paper/Telephone
Complete ONLY if direct expenditure to benefit C/OH		
Date 3/7/2011	Payee name Fast Signs	
Amount (\$) 1544.00	Payee address; City; State; Zip Code 5601 Locke Ave Ste 131 Ft Worth TX 76107	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Car Magnets
Complete ONLY if direct expenditure to benefit C/OH		

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Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>15 835</b>		2 FILER NAME <b>CATHY HIRT</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/11/2011</b>		5 Payee name <b>Sportswear Graphics</b>			
6 Amount (\$) <b>127.74</b>		7 Payee address; City; State; Zip/Code <b>110 St Louis, Ft Worth, TX 76104</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Printing Expenses</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>2 x T shirts</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/11/2011</b>		Payee name <b>Walmart</b>			
Amount (\$) <b>119.08</b>		Payee address; City; State; Zip Code <b>6300 Oakmont Blvd Ft Worth TX 76132</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Other</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phones</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/11/2011</b>		Payee name <b>Fast signs</b>			
Amount (\$) <b>2527.64</b>		Payee address; City; State; Zip Code <b>5601 Locke Ave Ft Worth TX 76107</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Printing</b>		Description (If travel outside of Texas, complete Schedule T) <b>4x8 signs</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/14/2011</b>		Payee name <b>Vickery Blvd Cafe</b>			
Amount (\$) <b>55.23</b>		Payee address; City; State; Zip Code <b>4120 W. Vickery Blvd Ft Worth TX 76107</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Food and Beverage</b>		Description (If travel outside of Texas, complete Schedule T) <b>pp HQ food.</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>16 of 35</b>		2 FILER NAME <b>CATHY HIRT</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/15/2011</b>		5 Payee name <b>Target Stores</b>			
6 Amount (\$) <b>21.43</b>		7 Payee address; City; State; Zip Code <b>301 Carroll St. Ft. Worth, TX 76107</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Food and Beverage</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>HQ Coffee</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/14/2011</b>		Payee name <b>Kwik Kopy</b>			
Amount (\$) <b>385.37</b>		Payee address; City; State; Zip Code <b>1850 Handley Dr. Ft Worth, TX 76112</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Printing</b>		Description (If travel outside of Texas, complete Schedule T) <b>Ab. Ballot Applications</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/17/2011</b>		Payee name <b>Robyn Emerson</b>			
Amount (\$) <b>185.36</b>		Payee address; City; State; Zip Code <b>2201 Towbridge Circle Austin, TX 78723</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Consulting</b>		Description (If travel outside of Texas, complete Schedule T) <b>Mis expense reimbursement</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/17/2011</b>		Payee name <b>USPS</b>			
Amount (\$) <b>370.00</b>		Payee address; City; State; Zip Code <b>Austin Texas</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Other</b>		Description (If travel outside of Texas, complete Schedule T) <b>Bulk Mail Permit</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <u>10035</u>		<b>2</b> FILER NAME <u>CATHY HIRT</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>3/18/2011</u>		<b>5</b> Payee name <u>Dorothy Carey</u>			
<b>6</b> Amount (\$) <u>333.00</u>		<b>7</b> Payee address; City; State; Zip Code <u>4133 Burk Rd Ft Worth, TX 76119</u>			
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Contract Labor</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>Phone Bank</u>		
	Candidate / Officeholder name		Office sought		Office held
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>3/18/2011</u>		Payee name <u>Kathryn Clark</u>			
Amount (\$) <u>405.00</u>		Payee address; City; State; Zip Code <u>3957 Burnice Dr #2614 Ft Worth TX 76119</u>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <u>Contract Labor</u>		Description (If travel outside of Texas, complete Schedule T) <u>Phone Bank</u>		
	Candidate / Officeholder name		Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>3/18/2011</u>		Payee name <u>Lisa Batts</u>			
Amount (\$) <u>405.00</u>		Payee address; City; State; Zip Code <u>3004 Upland Dr. Mansfield TX 76063</u>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <u>Contract Labor</u>		Description (If travel outside of Texas, complete Schedule T) <u>Phone Bank</u>		
	Candidate / Officeholder name		Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date <u>3/18/2011</u>		Payee name <u>Francis Crawford</u>			
Amount (\$) <u>405.00</u>		Payee address; City; State; Zip Code <u>4228 Reed St Fort Worth, TX 76119</u>			
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <u>Contract Labor</u>		Description (If travel outside of Texas, complete Schedule T) <u>Phone Bank</u>		
	Candidate / Officeholder name		Office sought		Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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Revised 04/21/2010

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 180835		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/18/2011		5 Payee name Cuthberta Harris			
6 Amount (\$) 342.00		7 Payee address; City; State; Zip Code 3950 Garrison Ave. Ft Worth TX 76119			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Phone Bank	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/18/2011		Payee name Carrie M Green			
Amount (\$) 216.00		Payee address; City; State; Zip Code 4208 Wilhelm St Ft Worth, TX 76119			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Phone Bank	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/18/2011		Payee name Evelyn Parrish			
Amount (\$) 369.00		Payee address; City; State; Zip Code 5305 Carver Dr. Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Phone Bank	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/18/2011		Payee name USPS			
Amount (\$) 176.00		Payee address; City; State; Zip Code Arlington Heights, Ft Worth, TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Stamps	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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Revised 04/21/2010

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 19 of 35 2 FILER NAME CATHY HERT 3 ACCOUNT # (Ethics Commission Filers)

4 Date 3/18/2011 5 Payee name Staples

6 Amount (\$) 80.84 7 Payee address; City; State; Zip Code 16005 University, Ft Worth, TX 76107

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Other (b) Description (If travel outside of Texas, complete Schedule T) printer ink

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/28/2011 Payee name USPS

Amount (\$) 104.70 Payee address; City; State; Zip Code Eight Ave Station Ft Worth TX 76110

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Other Description (If travel outside of Texas, complete Schedule T) stamped envelopes

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/14/2011 Payee name USPS

Amount (\$) 115.00 Payee address; City; State; Zip Code Eight Ave station Ft Worth, TX 76110

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Other Description (If travel outside of Texas, complete Schedule T) Stamps + envelopes

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/25/2011 Payee name Printe Pointe

Amount (\$) 322.66 Payee address; City; State; Zip Code 2901 Alta Mere Fort Worth TX 76116

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Printing Expense Description (If travel outside of Texas, complete Schedule T) stationary

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 200735		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/28/2011		5 Payee name Willie Mac Prescott			
6 Amount (\$) 164.00		7 Payee address; City; State; Zip Code 5715 Libbey, Ft Worth, TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Phone Banks	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/15/2011		Payee name Paige Hendrick Public Relations			
Amount (\$) 1480.00		Payee address; City; State; Zip Code 1253 W. Magnolia Ave, Ft Worth, TX 76104			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) PR-Press Releases	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/13/2011		Payee name Sportswear Graphics			
Amount (\$) 389.70		Payee address; City; State; Zip Code 110 St Louis, Ft Worth TX 76104			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) + Shirts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/7/2011		Payee name Northwest Engravers			
Amount (\$) 18.00		Payee address; City; State; Zip Code 3300 Cherry Lane, Ft Worth, TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) name tags	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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Revised 04/21/2010

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>299-035</b>		2 FILER NAME <b>CATHY HIRT</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/23/2011</b>		5 Payee name <b>USPS</b>			
6 Amount (\$) <b>115.00</b>		7 Payee address; City; State; Zip Code <b>Eighth Ave Station FtWorth TX 76110</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Other</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Stamps</b>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/21/2011</b>		Payee name <b>Mary L Davidson</b>			
Amount (\$) <b>1200.00</b>		Payee address; City; State; Zip Code <b>6901 Winward Way Ft Worth TX 76140</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/11/2011</b>		Payee name <b>Walmart</b>			
Amount (\$) <b>119.08</b>		Payee address; City; State; Zip Code <b>6300 Oakmont Blvd. FtWorth, TX 76132</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Other</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phones</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/23/2011</b>		Payee name <b>Thomas Graphics</b>			
Amount (\$) <b>1783.36</b>		Payee address; City; State; Zip Code <b>9501 N IH 35, Austin, TX 78753</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>Mailer postage</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2200 35		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/25/2011		5 Payee name John Clark			
6 Amount (\$) 180.00		7 Payee address; City; State; Zip Code 5616 Houghton Ave. Ft Worth TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Phone Bank	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/25/2011		Payee name Lisa Batts			
Amount (\$) 180.00		Payee address; City; State; Zip Code 3004 Upland Dr. Mansfield, TX 76063			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Phone Bank	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/25/2011		Payee name Kathryn Clark			
Amount (\$) 180.00		Payee address; City; State; Zip Code 3957 Burnice Dr # 2614 Fort Worth TX 76119			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Phone Bank	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/25/2011		Payee name Evelyn Parrish			
Amount (\$) 180.00		Payee address; City; State; Zip Code 5305 Carver Dr Ft Worth TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Phone Bank	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>23 of 35</b>		2 FILER NAME <b>CATHY HERT</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/25/2011</b>		5 Payee name <b>Francis Crawford</b>			
6 Amount (\$) <b>180.00</b>		7 Payee address; City; State; Zip Code <b>4228 Reed St. Ft Worth, TX 76119</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/25/2011</b>		Payee name <b>Currie Green</b>			
Amount (\$) <b>180.00</b>		Payee address; City; State; Zip Code <b>4208 Wilhelm St Ft. Worth, TX 76119</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/25/2011</b>		Payee name <b>Dorothy Carey</b>			
Amount (\$) <b>180.00</b>		Payee address; City; State; Zip Code <b>4133 Burke Rd Ft Worth TX 76119</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/28/2011</b>		Payee name <b>Sophrona Webber</b>			
Amount (\$) <b>80.00</b>		Payee address; City; State; Zip Code <b>5916 Goodman Ave. Ft Worth TX 76107</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>240835</b>		2 FILER NAME <b>CATHY HERT</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/24/2011</b>		5 Payee name <b>Atmos Energy</b>			
6 Amount (\$) <b>138.53</b>		7 Payee address; City; State; Zip Code <b>PO Box 650205 Dallas TX 75265</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Office Overhead</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Gas Bill</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/29/2011</b>		Payee name <b>Robyne Tolley</b>			
Amount (\$) <b>128.00</b>		Payee address; City; State; Zip Code <b>5836 Blackmore Ave Ft Worth TX 76107</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Contract Labor</b>		Description (If travel outside of Texas, complete Schedule T) <b>Phone Bank</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/23/2011</b>		Payee name <b>Fort Worth Republican Women</b>			
Amount (\$) <b>23.00</b>		Payee address; City; State; Zip Code <b>1213 Kelpie Ft Worth TX 76111</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>Monthly meeting</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/1/2011</b>		Payee name <b>Fort Worth Chamber of Commerce</b>			
Amount (\$) <b>100.00</b>		Payee address; City; State; Zip Code <b>777 Taylor St Ft Worth TX 76102</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>Luncheon ticket</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES

## SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <u>25835</u>		<b>2</b> FILER NAME <u>CATHY HIRT</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date <u>3/25/2011</u>		<b>5</b> Payee name <u>Costco</u>		
<b>6</b> Amount (\$) <u>152.83</u>		<b>7</b> Payee address; City; State; Zip Code <u>5300 Overton Ridge Blvd Ft Worth TX 76132</u>		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Food and Beverage</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>40 coffee for public supplies</u>	
	Candidate / Officeholder name		Office sought	Office held
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date <u>3/15/2011</u>		Payee name <u>Staples</u>		
Amount (\$) <u>31.37</u>		Payee address; City; State; Zip Code <u>1600 S University D Ft Worth ,TX 76107</u>		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Other</u>		Description (If travel outside of Texas, complete Schedule T) <u>Envelopes</u>	
	Candidate / Officeholder name		Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date <u>1/27/2011</u>		Payee name <u>e- Onlinedata Inc</u>		
Amount (\$) <u>79.00</u>		Payee address; City; State; Zip Code <u>320 Cumberland Ave Portland ME 04101</u>		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Fees</u>		Description (If travel outside of Texas, complete Schedule T) <u>online donations</u>	
	Candidate / Officeholder name		Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date <u>3/02/2011</u>		Payee name <u>Authorizenet Gateway Billing</u>		
Amount (\$) <u>25.23</u>		Payee address; City; State; Zip Code <u>808 E Utah Valley Dr, American Fork UT 84003</u>		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>Fees</u>		Description (If travel outside of Texas, complete Schedule T) <u>Online donations</u>	
	Candidate / Officeholder name		Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F:	<b>2</b> FILER NAME	<b>3</b> ACCOUNT # (Ethics Commission Filers)
20 of 35	CATHY HIRT	
<b>4</b> Date	<b>5</b> Payee name	
3/31/2011	e-onlinedata	
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code	
53.33	320 Cumberland Ave Portland ME 04101	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Fees	online donations
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel in District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F:		<b>2</b> FILER NAME		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
27 of 35		CATHY HIRT			
<b>4</b> Date		<b>5</b> Payee name			
3/30/2011		Target			
<b>6</b> Amount (\$)		<b>7</b> Payee address; City; State; Zip Code			
20.57		301 Carroll St Ft Worth TX 76107			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule)		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T)	
		Food and Beverages		Water + Sodas for HQ	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Payee name			
3/30/2011		Staples			
Amount (\$)		Payee address; City; State; Zip Code			
42.15		1600 S University, Ft Worth TX 76107			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
		Other		Office Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Payee name			
3/21/2011		USPS			
Amount (\$)		Payee address; City; State; Zip Code			
16.15		Trinity River Station, Ft Worth TX 76109			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
		Other		Overnight mail	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Payee name			
2/14/2011		Party Warehouse			
Amount (\$)		Payee address; City; State; Zip Code			
32.23		6550 Camp Bowie Blvd Ft Worth 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 280035		2 FILER NAME CATHY HERT		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/31/2011		5 Payee name Nina Jo Baker			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 1002 E 2nd St Ft Worth, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Phone Bank	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/1/2011		Payee name Costco			
Amount (\$) 71.35		Payee address; City; State; Zip Code 5300 Overton Ridge Blvd Ft Worth TX 76132			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food & Beverage		Description (If travel outside of Texas, complete Schedule T) Campaign HQ Food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/2/2011		Payee name John Reynolds			
Amount (\$) 2916.38		Payee address; City; State; Zip Code 6321 Darwood Ave. Ft Worth TX 76116			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Fee		Description (If travel outside of Texas, complete Schedule T) Videographer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/24/2011		Payee name Walmart			
Amount (\$) 119.08		Payee address; City; State; Zip Code 3851 Airport Freeway, Ft Worth, TX 76111			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Phones	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 29 of 35 2 FILER NAME CATHY HERT 3 ACCOUNT # (Ethics Commission Filers)

4 Date 3/2/2011 5 Payee name Lisa's Fried Chicken

6 Amount (\$) 30.28 7 Payee address; City; State; Zip Code 500 University Ft Worth TX 76107

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) Food & Beverage (b) Description (If travel outside of Texas, complete Schedule T) Food

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/16/2011 Payee name Subway  
Amount (\$) Payee address; City; State; Zip Code

37.70 4228 W Vickery Blvd. Ft Worth, TX 76107

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Food and Beverage Description (If travel outside of Texas, complete Schedule T) Food

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 4/1/2011 Payee name Walgreens  
Amount (\$) Payee address; City; State; Zip Code

20.56 4515 Camp Bowie Blvd Ft Worth, TX 76107

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Other Description (If travel outside of Texas, complete Schedule T) Printer cartridge

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 3/31/2011 Payee name Staples  
Amount (\$) Payee address; City; State; Zip Code

35.17 16005 University, Ft. Worth, TX 76107

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Office Description (If travel outside of Texas, complete Schedule T) Supplies

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>20</b>	2 FILER NAME <b>CATHY HERT</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>4/4/2011</b>	5 Payee name <b>Karl Thibodeaux</b>
6 Amount (\$) <b>378.88</b>	7 Payee address; City; State; Zip Code <b>1717 Belle Place, Ft Worth, TX 76107</b>

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Contract Service</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Photographer</b>
9 Complete ONLY if direct expenditure to benefit C/OH		Office sought

Date <b>3/18/2011</b>	Payee name <b>Tom Thumb</b>	
Amount (\$) <b>27.05</b>	Payee address; City; State; Zip Code <b>3100 S. Hulen Ft Worth, TX 76109</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Food and Beverages</b>	Description (If travel outside of Texas, complete Schedule T) <b>Food</b>
Complete ONLY if direct expenditure to benefit C/OH		Office sought

Date <b>3/23/2011</b>	Payee name <b>Staples</b>	
Amount (\$) <b>104.45</b>	Payee address; City; State; Zip Code <b>1600 S University Ft Worth, TX 76107</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Other</b>	Description (If travel outside of Texas, complete Schedule T) <b>printer ink / supplies</b>
Complete ONLY if direct expenditure to benefit C/OH		Office sought

Date <b>3/28/2011</b>	Payee name <b>Staples</b>	
Amount (\$) <b>23.67</b>	Payee address; City; State; Zip Code <b>1600 S University Ft Worth, TX 76107</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Other</b>	Description (If travel outside of Texas, complete Schedule T) <b>Envelopes</b>
Complete ONLY if direct expenditure to benefit C/OH		Office sought

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 2 FILER NAME CATHY HIRT 3 ACCOUNT # (Ethics Commission Filers)

4 Date 4/1/20115 Payee name Lisa Butts6 Amount (\$) 324.007 Payee address; City; State; Zip Code  
3004 Upland Dr. Mansfield TX 76063

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule)

Contract Labor

(b) Description (If travel outside of Texas, complete Schedule T)

Phone Bank

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date 4/1/2011Payee name Francis CrawfordAmount (\$) 324.00

Payee address; City; State; Zip Code

4228 Reed St Ft. Worth, TX 76119

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule)

Contract Labor

Description (If travel outside of Texas, complete Schedule T)

Phone Bank

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date 4/1/2011Payee name John ClarkAmount (\$) 324.00

Payee address; City; State; Zip Code

5616 Houghton Ave. Ft Worth, TX 76107

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule)

Contract Labor

Description (If travel outside of Texas, complete Schedule T)

Phones

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

Date 4/1/2011Payee name Kathryn ClarkAmount (\$) 252.00

Payee address; City; State; Zip Code

3957 Burnice Dr #2614 Ft Worth, TX 76119

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule)

Contract Labor

Description (If travel outside of Texas, complete Schedule T)

Phones

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **32 of 35** 2 FILER NAME **CATHY HIRT** 3 ACCOUNT # (Ethics Commission Filers)

4 Date **4/1/2011** 5 Payee name **Evelyn Parrish**

6 Amount (\$) **297.00** 7 Payee address; City; State; Zip Code **5305 Carver Dr. Ft Worth, TX 76107**

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) **Contract Labor** (b) Description (If travel outside of Texas, complete Schedule T) **Phone Bank**

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **4/1/2011** Payee name **Dorothy Carey**

Amount (\$) **324.00** Payee address; City; State; Zip Code **4133 Burke Rd. Ft Worth, TX 76119**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Contract Labor** Description (If travel outside of Texas, complete Schedule T) **Phone Bank**

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **4/1/2011** Payee name **Carrie Green**

Amount (\$) **324.00** Payee address; City; State; Zip Code **4208 Wilhelm St Ft Worth, TX 76119**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Contract Labor** Description (If travel outside of Texas, complete Schedule T) **Phone Banks**

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **4/1/2011** Payee name **Print Pointe**

Amount (\$) **52.98** Payee address; City; State; Zip Code **2901 Alta More Ft. Worth, TX 76116**

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) **Printing Expense** Description (If travel outside of Texas, complete Schedule T) **invitations**

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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Revised 04/21/2010

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: <u>33 of 35</u>		<b>2</b> FILER NAME <u>CATHY HERT</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>4/4/2011</u>		<b>5</b> Payee name <u>Staples</u>			
<b>6</b> Amount (\$) <u>34.93</u>		<b>7</b> Payee address; City; State; Zip Code <u>1600 S. University, Ft Worth, TX 76107</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Other</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>Printerink</u>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>4/4/2011</u>		Payee name <u>USPS</u>			
Amount (\$) <u>132.00</u>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Other</u>		Description (If travel outside of Texas, complete Schedule T) <u>Stamps</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>4/4/2011</u>		Payee name <u>Staples</u>			
Amount (\$) <u>\$48.70</u>		Payee address; City; State; Zip Code <u>1600 S. University, Ft Worth, TX 76107</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>4/4/2011</u>		Payee name <u>US Postal Service</u>			
Amount (\$) <u>4289.25</u>		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Solicitation Expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>Mailer postage</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 34 of 35		<b>2</b> FILER NAME CATHY HIRT		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 4/4/2011		<b>5</b> Payee name Catherine Toledo			
<b>6</b> Amount (\$) 1500.00		<b>7</b> Payee address; City; State; Zip Code 2608 Museum Way #3407 Ft Worth, TX 76107			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule)		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T)	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 4/4/2011		Payee name Debby Stein			
Amount (\$) 500.00		Payee address; City; State; Zip Code 2417 Stadium Dr. Ft Worth TX 76109			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		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 4/4/2011		Payee name Robyne Jolley			
Amount (\$) 208.00		Payee address; City; State; Zip Code 5836 Blackmore Ave Ft Worth TX 76107			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		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 4/4/2011		Payee name Tom Thumb			
Amount (\$) 18.52		Payee address; City; State; Zip Code 3000 S Hulen, Ft Worth, TX 76109			
<b>PURPOSE OF EXPENDITURE</b>		Category (See categories listed at the top of this schedule)		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

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 35 835	2 FILER NAME CATHY HERT	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/4/2011	5 Payee name Willie Mae Prescott
6 Amount (\$) 208.00	7 Payee address; City; State; Zip Code 5715 Libbey, Ft Worth, TX 76107

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Phone Banks
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/4/2011	Payee name Bobbie Johnson
Amount (\$) 208.00	Payee address; City; State; Zip Code 5808 Houghton Ave Ft Worth TX 76107

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Phone Bank
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/4/2011	Payee name Sophronan Webber
Amount (\$) 128.00	Payee address; City; State; Zip Code 5916 Goodman Av. Ft. Worth, TX 76107

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Phone Bank
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/4/2011	Payee name FLS Connect
Amount (\$) 6101.64	Payee address; City; State; Zip Code 7300 Hudson Blvd Ste 270 St. Paul MN 55128

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation Expense	Description (If travel outside of Texas, complete Schedule T) Phone Calls
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED