Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

OFFICIAL RECORD CITY SECRETARY FT WORTH, TX

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

1 ACCOUNT# (Ethics Commission Filers)

2 Total pages filed: 7

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. FIRST: GREGORY MI: W.
NICKNAME LAST: HUGHES SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: PO Box 101041 APT / SUITE #: CITY: Ft Worth STATE: TX ZIP CODE: 76185

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (817) PHONE NUMBER: 691-8885 EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Ms. FIRST: Wendy MI: Vann
NICKNAME LAST: Roach SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 1240 Kelpie Ct APT / SUITE #: CITY: Ft Worth STATE: TX ZIP CODE: 76111

8 CAMPAIGN TREASURER PHONE
AREA CODE: (817) PHONE NUMBER: 966-2129 EXTENSION

9 REPORT TYPE
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED
Month Day Year: 4/11/14 THROUGH Month Day Year: 5/2/2014

11 ELECTION
ELECTION DATE Month Day Year: 5/10/14
ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE
OFFICE HELD (if any): none

13 OFFICE SOUGHT (if known): City Council, Ft Worth

OFFICE USE ONLY
Date Received: RECEIVED MAY - 2 2014 CITY OF FORT WORTH CITY SECRETARY
Date Hand-delivered or Postmarked
Receipt # Amount
Date Processed
Date Imaged

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Greg Hughes

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS / EXPENDITURE TOTALS / CONTRIBUTION BALANCE / OUTSTANDING LOAN TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 120.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4170.00
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 58.00
4.	**TOTAL POLITICAL EXPENDITURES**	$ 2474.96
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 1695.04
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 10,000

18 AFFIDAVIT

MARY J KAYSER NOTARY PUBLIC STATE OF TEXAS EXPIRES 01-11-2017

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Greg Hughes, this the 2nd day of May, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Mary J Kayser | Printed name of officer administering oath | Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 3

2 FILER NAME: Greg Hughes

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/17/14	Nelson Clayton 1723 5th Ave Fort Worth, TX 76110	250.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/10/14	Donald B. Mills 4512 Overton Terr FW TX 76109	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/25/14	John W. Koechel 2435 Shirley Ave FW TX 76109	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/30/14	Woodard Insurance, LLP 1300 S. University Dr, Ste 600 FW TX 76107	250.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/27/14	Charles Dreyfus 2416 Park Place Ft Worth, TX 76110	50.00	(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 foradditional 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: 3

2 FILER NAME: Greg Hughes

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/29/14	Karen Littlefield Neil, DDS 3600 Hulen St Ste C1 Ft W TX 76107	300.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/30/14	Richard N. Abrams Trust 6145 Wedgewood Ft W TX 76133	500.00	(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/17/14	Don Woodard 1300 University Dr Ste 600 Ft W TX 76107	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/30/14	John Belknap 2520 Willing Ave Ft W TX 76110	1800.00	Install & Maint of Road Signs (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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/14/14	Rosalyne Yarbrough 2032 Glenco Terr 76110	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide foradditional 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: 3

2 FILER NAME: Greg Hughes

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/1/14	Carol Misfeldt 12617 Plassmeyer Pl F+W, TX 76126	100.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/17/14	Jim Marshel 2216 Hawthorne F+W TX 76110	50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/15/14	John Davis 3216 Rogers Ave F+W TX 76109	250.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
			(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
			(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 foradditional reporting requirements.

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME: Greg Hughes	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 4/14/14	5 Payee name: ANGIE Solomon	
6 Amount ($): 500.00	7 Payee address; City; State; Zip Code: P.O. Box 101041 Ft Worth, TX 76185	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Salaries/Wages	(b) Description (If travel outside of Texas, complete Schedule T): Field Director
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 4/23/14	Payee name: ANGIE Solomon	
Amount ($): 500.00	Payee address; City; State; Zip Code: PO Box 101041 Ft Worth TX 76185	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Salaries/Wages	Description (If travel outside of Texas, complete Schedule T): Field Director
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 4/26/14	Payee name: ANGIE Solomon	
Amount ($):	Payee address; City; State; Zip Code: PO Box 101041 Ft Worth, TX 76185	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Salaries/Wages	Description (If travel outside of Texas, complete Schedule T): Field Director
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 5/1/14	Payee name: MURPHY NASICA	
Amount ($): 974.96	Payee address; City; State; Zip Code: 815-A Brazos St #304 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Printing Expense	Description (If travel outside of Texas, complete Schedule T): Cards & Stickers
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME GREGORY W. HUGHES

2 ACCOUNT # (Ethics Commission Filers)

3 SIGNATURE G W Hughes

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☒ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☒ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

G W Hughes

Signature of Candidate

5 OFFICEHOLDER

•• Complete this section *only* if you are an officeholder ••

☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder