

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filer)	2 Total pages filed: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. NICKNAME Frank	FIRST Franklin LAST Moss	MI D SUFFIX Sr.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX: 5625 Eisenhower Dr. APT / SUITE #: Fort Worth, Texas CITY: 76112 STATE: ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817) PHONE NUMBER 446-8101 EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME	FIRST Kenneth LAST Moss	MI L. SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE) 7235 Muse Ct APT / SUITE #: Fort Worth, Texas CITY: 76112 STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817) PHONE NUMBER 654-3291 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 01 / 01 / 2013 THROUGH 03 / 31 / 2013		
11 ELECTION	ELECTION DATE Month Day Year 05 / 11 / 2013 ELECTION TYPE ☐ Primary ☐ Runoff ☒ General ☐ Special		
12 OFFICE	OFFICE HELD (if any) Fort Worth City Council District 5		
13 OFFICE SOUGHT (if known)	Fort Worth City Council District 5		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Franklin (Frank) Moss, Sr.

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 pages17 CONTRIBUTION
TOTALS

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

\$ 276.00

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

\$ 9,246.00

EXPENDITURE
TOTALS

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

\$ 1,345.79

4. TOTAL POLITICAL EXPENDITURES

\$ 6,562.20

CONTRIBUTION
BALANCE

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

\$ 7,321.64

OUTSTANDING
LOAN TOTALS

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

\$ - 0 -

18 AFFIDAVIT



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 Franklin Moss, this the 15th day of April, 20 13, to certify which, witness my hand and seal of office.

Signature of officer administering oath

MARY J. KAYSER

Printed name of officer administering oath

CITY SENATOR

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:

1/6

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Feb 2, 2013

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Good Government Fund

6 Contributor address; City; State; Zip Code

201 Main Street

Fort Worth, Texas 76102

7 Amount of contribution (\$)

750.00

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

Feb 2, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

PSEL PAC

Contributor address; City; State; Zip Code

201 Main Street

Fort Worth, Texas 76102

Amount of contribution (\$)

750.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Feb 15, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Kenneth Barr

Contributor address; City; State; Zip Code

3101 Avondale

Fort Worth, Texas

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

Feb 29, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Donald Chadwick

Contributor address; City; State; Zip Code

6227 Yolanda

Fort Worth, Texas 76112

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

Feb 25, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Jim Dunnaway

Contributor address; City; State; Zip Code

777 Taylor Street #1040

Fort Worth, Texas 76102

Amount of contribution (\$)

100

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2/6

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Feb 25, 2013

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Jim Shell

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

500 W. 7th Street, Ste 600
Fort Worth, Texas 76102

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Feb 27, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Gary W. Terry

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

117 Shady Lake Ct
Hurst, Texas 76054

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Feb 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Hugh and Olie Ferrell

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5613 Grenada Dr.
Fort Worth, Texas 76119

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Feb 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Allen Tucker

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1601 Briar Dr
Fort Worth, Texas 76022

(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# _____)

Daroyd Jennings

Amount of contribution (\$)

70.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4551 Parkwood Dr.
Fort Worth, Texas 76140

(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:

3/6

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Mar 1, 2013

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Solomon T. Itale

6 Contributor address; City; State; Zip Code

12932 Chittamwood Trl.
Hurst, Texas 76040

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

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Billy Ray and Della A Gray

Contributor address; City; State; Zip Code

2820 Galvez Ave
Fort Worth, Texas 76111

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

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Gwinda Burns

Contributor address; City; State; Zip Code

P.O. Box 8704
Fort Worth, Texas 76124

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)

Date

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Jan E. Kersing

Contributor address; City; State; Zip Code

3800 Trailwood Ln.
Fort Worth, Texas 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

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Quinton L. & Diondria R. Phillips

Contributor address; City; State; Zip Code

6969 Sullivan Meadows Dr.
Fort Worth, Texas 76120

Amount of
contribution (\$)

50.00

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4/6

2 FILER NAME

Franklin (Frank) MOSS, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Mar 1, 2013

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Rev. Maurice + Debra V. Barnes

6 Contributor address; City; State; Zip Code

7529 Beckwood

FORT WORTH, Texas 76112

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

Mar 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Freese + Nichols PAC

Contributor address; City; State; Zip Code

4055 International Plaza #200

FORT WORTH, Texas 76109

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)

Date

Mar 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Salvador Espino

Contributor address; City; State; Zip Code

7120 Old Santa Fe Trl.

FORT WORTH, Texas 76131

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Haey P. Mitchell

Contributor address; City; State; Zip Code

4005 Lake Powell Dr

Arlington, Texas 76016

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

Mar 1, 2013

Full name of contributor

☐ out-of-state PAC (ID# _____)

Julie A. Wilson

Contributor address; City; State; Zip Code

333 Throckmorton St # 615

FORT WORTH, Texas 76102

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)

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:

5/6

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Mar 1, 2013

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Danny Scarth

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

1000 Throckmorton ST.
FORT WORTH, TEXAS 76102

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Betty Story

Amount of contribution (\$)

40.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2625 Canton Dr.
FORT WORTH, TEXAS 76112

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Patric Shelby

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3824 Fitzhugh Ave.
FORT WORTH, TEXAS 76105

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Donald R. & Wanda A. Boren

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1755 Martel Ave.
FORT WORTH, TEXAS 76103

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 1, 2013

Full name of contributor ☐ out-of-state PAC (ID# _____)

Jackie D. Bewley

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2200 S. Riverside Dr.
FORT WORTH, TEXAS 76104

(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:

6/6

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

Mar 1, 2013

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

Clifford Davis

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

2101 Flemming Dr.
Fort Worth, Texas 76112

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Mar 2, 2013

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

Conservative Voters Forum

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1144 Terrace Trail
Hurst, Texas 76053

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 2, 2013

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

John V. Roach

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

2805 Alton Rd.
Fort Worth, Texas 76109

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 2, 2013

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

Mr. & Mrs. Hugh Collins

Amount of contribution (\$)

35.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1733 Bunch Dr.
Fort Worth, Texas 76112

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 4, 2013

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

Elvin Bennett

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

P.O. Box 51320
Fort Worth, Texas 76105

(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:

2 FILER NAME

Franklin (Frank) Moss, Sr.

3 ACCOUNT # (Ethics Commission Filers)

7/

4 Date

Mar 5, 2013

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

Open Channels Group, LLC

6 Contributor address; City; State; Zip Code

P.O. Box 12431

Fort Worth, Texas 76110

7 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

Mar 12, 2013

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

Reed Pigman, Jr.

Contributor address; City; State; Zip Code

200 Texas Way

Fort Worth, Texas 76106

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Mar 6, 2013

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

Sandra McGlothlin

Contributor address; City; State; Zip Code

5301 Sunvalley Dr.

Fort Worth, Texas 76119

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(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)

(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.

1 Total pages Schedule F: 1/5		2 FILER NAME Franklin (Frank) Moss, Sr		3 ACCOUNT # (Ethics Commission Filers) 61	
4 Date Jan 19, 2013		5 Payee name Paul Quinn College			
6 Amount (\$) 200.00		7 Payee address; City; State; Zip Code 3837 Simpson Stuart Road Dallas, Texas			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Scholarship Donation		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date Feb 6, 2013		Payee name Bank of America			
Amount (\$) 140.00		Payee address; City; State; Zip Code 5619 E. Lancaster Fort Worth, Texas 76112			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel Advance		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 Feb 1, 2013		Payee name Bank of America			
Amount (\$) 200.00		Payee address; City; State; Zip Code 5619 E Lancaster Fort Worth, Texas 76112			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel Advance		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 Feb 14, 2013		Payee name Kwik Kopy			
Amount (\$) 357.48		Payee address; City; State; Zip Code 1850 Handley Drive Fort Worth, Texas			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing		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

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: 2/5		2 FILER NAME Franklin (Frank)		3 ACCOUNT # (Ethics Commission Filers)	
4 Date Feb 19, 2013		5 Payee name U.S. Postal Office			
6 Amount (\$) 184.00		7 Payee address; City; State; Zip Code Meacham Blvd FORT WORTH, TEXAS			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Postage		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date Feb 20, 2013		Payee name Kelly Allen Gray			
Amount (\$) 100.00		Payee address; City; State; Zip Code 2820 Galvez Ave FORT WORTH, TEXAS 76111			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Donation - Campaign		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 Feb 25, 2013		Payee name Bank of America			
Amount (\$) 140.00		Payee address; City; State; Zip Code 5619 E. Lancaster FORT WORTH, TEXAS 76112			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel Advance		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 Feb 27, 2013		Payee name US Post Master			
Amount (\$) 200.00		Payee address; City; State; Zip Code Meacham FORT WORTH, TEXAS			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) BULK MAIL POST		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	

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: 3/5		2 FILER NAME Franklin (Frank) Moss, Sr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date Mar 1, 2013		5 Payee name Smokies BBQ			
6 Amount (\$) 383.85		7 Payee address; City; State; Zip Code E. Lancaster Fort Worth, Texas 76112			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Cater for Fund Raiser.		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date Mar 6, 2013		Payee name Dynamic Screen Printing, INC.			
Amount (\$) 800.00		Payee address; City; State; Zip Code 300 Boone Road, Suite A-9 Burleson Texas 76028			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Yard signs		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 Mar 11, 2013		Payee name Marriott W			
Amount (\$) 203.5		Payee address; City; State; Zip Code Washington, DC			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Misc Expense		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Misc Expense		Office sought Office held	
Date Mar 22, 2013		Payee name Kwik Kopy			
Amount (\$) 680.45		Payee address; City; State; Zip Code 1950 Handley Dr. Fort Worth, Texas 76112			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing		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	

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.

1 Total pages Schedule F: 4/5	2 FILER NAME Franklin (Frank) Moss, Sr	3 ACCOUNT # (Ethics Commission Filers)
4 Date Mar 22.	5 Payee name Five Star Media	
6 Amount (\$) 487.13	7 Payee address; City; State; Zip Code 5700 E Loop 820 Fort Worth, Texas 76119	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date Mar 25, 2013	Payee name US Postmaster.	
Amount (\$) 300.00	Payee address; City; State; Zip Code Meacham Fort Worth, Texas	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Bulk mail Deposit	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 Mar 25, 2013	Payee name Gwinda Burns	
Amount (\$) 200.00	Payee address; City; State; Zip Code 6015 meadowbrook Dr. Fort Worth, Texas 76112	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Phone Bank Lease Payment	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 Mar 28, 2013	Payee name Carrie M. Green	
Amount (\$) 160.00	Payee address; City; State; Zip Code 4208 Wilhelm Fort Worth, Texas 76119	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Phone Bank	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	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.

1 Total pages Schedule F: <i>5/5</i>		2 FILER NAME <i>Franklin (Frank) Moss, Sr.</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>Mar 28, 2013</i>		5 Payee name <i>Dorothy Carey</i>			
6 Amount (\$) <i>160.00</i>		7 Payee address; City; State; Zip Code <i>4133 Burke Fort Worth, Texas 76112</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Phone Bank</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <i>Mar 28, 2013</i>		Payee name <i>Carthrenta Harris</i>			
Amount (\$) <i>160.00</i>		Payee address; City; State; Zip Code <i>3950 Garrison Ave. Fort Worth, Texas 76119</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Phone Bank.</i>		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 <i>Mar 28, 2013</i>		Payee name <i>Mary Davidson</i>			
Amount (\$) <i>200.00</i>		Payee address; City; State; Zip Code <i>6901 Windward Way Forest Hill Texas 76</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Phone Bank.</i>		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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