CANDIDATE / OFFICEHOLDER CITY SECRETARY CAMPAIGN FINANCE REPORT FT. WORTH, TY

FORM C/OH COVER SHEET PG 1

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		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
The C/OH Instruction G	uide explains how to complete this form	1047717514	1-4		
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST	SUFFIX	Date Received		
	Willoughby		A SOL		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 6731 Bridge St 125	CITY; STATE; ZIP CODE Fort Worth TX 76112	RECEIVED JUL 15 2019 CITY OF FORT WORTH CITY OF FORT WORTH CITY OF FORT WORTH		
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	CITY OF FORT WORLD		
OFFICEHOLDER PHONE	(817) 446-7056		Date Hand-delivered or Date Rostmarked		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST Bob	МІ	Receipt # Amount \$		
NAME	NICKNAME LAST	SUFFIX	Date Processed		
	Willoughby		Date Imaged		
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); AP	T / SUITE #; CITY; STATE;	ZIP CODE		
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 30th day bef	fore election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	X July 15 8th day befor	re election Exceeded \$500 limit	Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year	Month	Day Year		
	4 / 4 / 19	THROUGH 7/	15 / 19		
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year Prin	nary Runoff Other Description			
	5 / 4 / 19 X Gen	neral Special			
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)		
		City Council District5			
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

			15 Filer ID (Ethics Commission Filers) 1047717514		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$1,357.98		
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$10 UNLESS ITEMIZED		POLITICAL EXPENDITURES OF \$100 OR LESS,	\$		
	4. TOTAL POLITICAL EXPENDITURES		\$ 1,357.98		
CONTRIBUTION BALANCE		L POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$				
18 AFFIDAVIT					
		I swear, or affirm, under penalty of	perjury, that the accompanying report is		
744444			formation required to be reported by me		
ALLIS ALLIS	SON KAY TIDWELL	under Title 15, Election Code.			
Nota My Co	ory ID #129588622 Ommission Expires October 9, 2021	Bulaulle	resh.		
	Ctober 9, 2021	Signature of Ca	ndidate or officeholder		
AFFIX NOTARY STAMP/SEALABOVE					
Sworn to and subscribed before me, by the said Bob Willoughby , this the 15th					
day of July , 20 19, to certify which, witness my hand and seal of office.					
Illian Idirell Alter Faull abotance					
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath					

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILERNAME 1306 WILLOUGHBY 20 Filer ID (Ethics Control 1047717514)	ommission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,357.98
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1,357.98
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bob Willoughby 1047717514 4 Date 7 Amount of contribution (\$)1,357.98 5 Full name of contributor out-of-state PAC (ID#:___ 4/4/19 Bob Willoughby 6 Contributor address; City; State; Zip Code 6731 Bridge St Fort Worth TX 76112 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of contribution (\$) Full name of contributor out-of-state PAC (ID#:_ City; State; Zip Code Contributor address; 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.