CAMPAIGN FINANCE REPORT FT. WORTH, TX Cover Sheet pg 1 The C/OH Instruction Guide explains how to complete this form. 1 ACCOUNT # (Effice Commission Filers) 2 Total pages filed: 222 3 CANDIDATE / OFFICEHOLDER NAME MS/MRS/MR EVENT MI OFFICE USE ONLY 4 CANDIDATE / OFFICEHOLDER MAILING MS/MRS/MR EVENT MI OFFICE USE ONLY 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS MOTIVUTE#, MAILING SUFFIX SUFFIX 5 CANDIDATE / OFFICEHOLDER MAILING ADDRESS /PO BOX, APT/SUITE#, MI MTY STATE: ZIP CODE 6 CAMPAIGN TREASURER NAME MS/MRS/MR PHONE NUMBER EXTENSION Date Imaged 7 CAMPAIGN TREASURER ADDRESS MS/MRS/MR TVET MS/MS/MR SUFFIX 7 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE: APT/SUITE#, ZIDT Emis Currence APT/SUITE#, ZIDT Emis Currence CITY: STATE; ZIP CODE	Texas Ethics Commissi	on P.O. Box 12070	Austin, Texas	78711-2070 (512) 46	-5800 (TDD 1-800-735-2989
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14 C/OH NAME	en Gray	1, Kelly	5 ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	TICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAI EHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CAND TES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF	DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
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Signature of officer adminis	stering oath	NORMA MARSHAIL Printed name of officer administering oath	NHAR Title of officer administering oath

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Revised 09/28/2011

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.	If c				auirements.

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The Instruction Guide explains how to complete th	nis form.	819	
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Austin, Texas 78711-2070

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POLITICAL EXPENDITURES	SCHEDULE
	ATEGORIES FOR BOX 8(a)
Advertising Expense       Gift/Awards/Memorials Expense       Sa         Accounting/Banking       Legal Services       So         Consulting Expense       Food/Beverage Expense       Tra         Event Expense       Polling Expense       Tra         Fees       Printing Expense       Off	Salaries/Wages/Contract Labor       Loan Repayment/Reimbursement         Solicitation/Fundraising Expense       Transportation Equipment & Related Experiment         ravel In District       Contributions/Donations Made By         ravel Out Of District       Candidate/Officeholder/Political Comm         Office Overhead/Rental Expense       OTHER (enter a category not listed abov         xplains how to complete this form.       Contributions/Donations
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PURPOSE OF EXPENDITURE (a) Category (see categories listed at the top of this EVENT EXPENSE	this schedule) (b) Description (If travel outside of Texas, complete Schedule T)
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mount (\$) 489.36	Payee address: City State 1800 EVans Live Fort Worth, TK 76	e; Zip Code		
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POLITICAL	EXPENDITURES		SCHEDULE F
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3/7/13	5 Payee name		
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	. EXPENDITURES		SCHEDULE F
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Amoynt (\$) 120./3	7 Prive address; City: State; Zip 300 Dome Rd 4-9 Burgeson, TV, 7/2028	Code	
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OF XPENDITURE	8000 Plakaw And Worth, TX 76120 Category (See categories listed at the top of this scher adwartiging Expense Candidate / Officeprokder/name		e of Texas, complete Schedule T) Office held
OF KPENDITURE mplete <u>ONLY</u> if direct penditure to benefit C/C the 14/13	SOD Plateau Brt Worth, TX 74120 Category (See categories listed at the top of this sche Udwittising EVpense Candidate / Officeholder/hame OH Payee name WWW GHEN	dule) Description (If travel outsid Office sought	-
	SOD Plateau Brt Worth, TX 74120 Category (See categories listed at the top of this scher adviettising EVpense Candidate / Officepholder/hame OH	dule) Description (If travel outsid	
OF XPENDITURE omplete <u>ONLY</u> if direct (penditure to benefit C/C) of the top of top of the top of top	SOD Plateau Brt Worth, TX 74120 Category (See categories listed at the top of this sche Udwittising EVpense Candidate / Officeholder/hame OH Payee name WWW GHEN	dule) Description (If travel outsid Office sought Code	

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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 Committe OTHER (enter a category not listed above)
Total pages Schedule F:	2 FILER NAME? // /.	e explains how to complete this i	
6 /11 / 3 14 /3	Javidson, Mary		3 ACCOUNT # (Ethics Commission File
Amoufit (\$)	G901 Windward U Fort Worth, TK 74	ate; Zip Code ////	
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top	p of this schedule) (b) Descriptio	n (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sour	ght Office held
3114/13	Parename Wak		
kmoynt (\$)	Payee address; / City; St Stalle Houghton Fort Worth, TV Uch	ate; Zip Code	
PURPOSE OF EXPENDITURE	Pategory (See categories listed at the top	of this schedule) Description	n (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office soug	ht Office held
3/14/13	Dorothy Curey		
tmouft (\$) [0]. []	Payee address; div; sta 4/33 Burke Kil 4st Worth, TK T&!!	te; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top	of this schedule) Description	(If travel outside of Texas, complete Schedule T)
omplete <u>ONLY</u> if direct kpenditure to benefit C/O	Candidate / Officeholder name H	Office sough	ht Office held
3/14/13	Pagee name Trances Trantord	,	
utiount (\$) 140-00	4228 Read St. Fort Worth, TX;	te; Zip Code	
PURPOSE	Category (See, categories isted at the top of	of this schedule) Description	(If travel outside of Texas, complete Schedule T)
XPENDITURE	Unitrant LUNOP		

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POLITICAL	EXPENDITURES		SCHEDULE
	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 e explains how to complete this	Loan Repayment/Reimbursement Transportation Equipment & Related Expen Contributions/Donations Made By Candidate/Officeholder/Political Commit OTHER (enter a category not listed above)
Total pages Schedule F:	2 FILER NAME		3 ACCOUNT # (Ethics Commission F
Date 3/15/13	5 Payee name	<i>ц</i>	
Amount (\$)	7 Pares address; City; St. RIVer Side Branch	ate; Zip Code	<u>.                                    </u>
120.10	Fort Worth TX T	////	
PURPOSE OF	(a) Category (See categories listed at the top	p of this schedule) (b) Descripti	On (If travel outside of Texas, complete Schedule T)
EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sou	ught Office held
	Rayee name, / C		
3/20//3 mount (\$)	Derrick L. Jimm. Payee address; City; St	nto ate; Zip Code	
43.56	5703 E. Loop 820 20+ Wold TV. 76	ane, zip code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top	o of this schedule) Descriptio	on (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officenolder name	Office sou	ight Office held
3/20/13	Payee name Trances Crautoro	٢	
kmourft (\$) 1/0-1/0	Payee bidgess City: Sta 4228 Read St- Hot With, TK	nte; Zip Code 76/19	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top		On (If travel outside of Texas, complete Schedule T)
complete <u>ONLY</u> if direct xpenditure to benefit C/O	Candidate / Officeholder name H	Office sou	ght Office held
3/20/13	Alivee name ( ) UTU ( ) reen		
15D.D	Payee address; City, Sta 4708 Wilhulm Fort Worth, TK 74	nte; Zip Code	
	category (See categories listed at the top	of this schedule) Descriptio	In (If travel outside of Texas, complete Schedule T)
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	. EXPENDITURES		SCHEDULE F
	EXPENDITURE	E CATEGORIES FOR BOX 8(	a)
Advertising Expense Accounting/Banking Consulting Expense Event Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District	Loan Repayment/Reimbursement Transportation Equipment & Related Expens Contributions/Donations Made By
Fees	Polling Expense Printing Expense	Travel Out Of District Office Overhead/Rental Expense	Candidate/Officeholder/Political Committ OTHER (enter a category not listed above)
	· · · · · · · · · · · · · · · · · · ·	e explains how to complete this	
Total pages Schedule F:	2 FILER NAME Y	lu lu	3 ACCOUNT # (Ethics Commission Fil
3/20/13	5 Rayee name	7	
Vnourft (\$)	7 Payee address; Aity; St 4/33 Durko Kil	tate; Zip Code	
20.00	gort Worth, TK 76	e119	
PURPOSE OF	(a) Category (See categories listed at the to	p of this schedule) (b) Descriptio	Π (If travel outside of Texas, complete Schedule T)
EXPENDITURE	Contract Labor		
Complete <u>QNLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name OH	e Office soug	ght Office held
3/20/13	Payee name		······································
Arnount (\$)	Payee address; City; St	ate; Zip Code	
40.03	Fort Worth TX 761	67	
PURPOSE OF EXPENDITURE	Gategory (See categories fisted at the top	of this schedule) Description	1 (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office soug	ht Office held
3/20/13	Pavele name Mary Davidsm	J	
rthount (\$) 200.10	Payee address; City; Sta 6901, Windward U Fort Worth TK 71	ite; Zip Code //// ////0	
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PURPOSE OF XPENDITURE	Contract Labor	, , , , , , , , , , , , , , , , , , , ,	
	Candidate / Officeholder name	Office sough	ht Office held
OF XPENDITURE complete ONLY if direct	Candidate / Officeholder name		ht Office held
OF XPENDITURE penditure to benefit C/C	Candidate / Officeholder name OH Privee name USPUSTUSE		ht Office held
OF XPENDITURE penditure to benefit C/C ge 2///3 Tount (b)	Candidate / Officeholder name Candidate / Officeholder name DH Privee name US Pustal Ser Payee address: Sity Istat Down Town Station Fort Worth, TK 76/1	Office sough	
OF XPENDITURE penditure to benefit C/C	Candidate / Officeholder name OH Privee name USPUSTUSE	Office sough	ht Office held (If travel outside of Texas, complete Schedule T)

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POLITICAL	EXPENDITURES			SCHEDULE F
	EXPENDITURE	CATEGORIES FOR BO	X 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 Labo Solicitation/Fundraising Exper Travel In District Travel Out Of District Office Overhead/Rental Expe e explains how to complete	or Loan Repay ise Transportati Contribution Candida ense OTHER (en	rment/Reimbursement on Equipment & Related Expens s/Donations Made By te/Officeholder/Political Commit ter a category not listed above)
Total pages Schedule F:	2 FRERINAME Y allen Gray Kell	И	3 AC	COUNT # (Ethics Commission Fi
3/24//3	5 Payee name	1		
mount (\$) 2/.46	7 Payee address; City; St 2400 Munaussince Fort Worth, TK Uell	ate; Zip Code Yuure 5		
PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top	p of this schedule) (b) Desc	ription (If travel outside	e of Texas, complete Schedule T)
omplete <u>ONLY</u> if direct kpenditure <b>t</b> o benefit C/C	Candidate / OfficeHolder name	Office	sought	Office held
125/13	Greename Meadoriko	ork News		
mount (\$) 248.10	Payee address: City; St P. D. Boy 24244 Fort Worth, TK 761	ate; Zip Code		
PURPOSE OF XPENDITURE	Category (See categories listed at the top advertising Exper	o of this schedule) Desci	ription (If travel outside	of Texas, complete Schedule T)
omplete <u>ONLY</u> if direct penditure to benefit C/O	Candidate / Officeholder name H	Office	sought	Office held
125/13	Payee name, Schen	Printing		
nount (\$) 20-13	Burleson, TK UGOL	ite; Zip Code		<u></u>
PURPOSE OF (PENDITURE	Sategory (See categories listed at the top	of this schedule) Descr	iption (If travel outside	of Texas, complete Schedule T)
mplete <u>ONLY</u> if direct penditure to benefit C/OI	Candidate / Officeholder name	Office	sought	Office held
128/13	Payee name John Click			
nound (\$)	Fayee address: 1 city; sta 56/6/ nughton Un Fort Worth, TK 76/	te; Zip Code L /07		
PURPOSE	Category (See categories listed at the top	of this schedule) Descri	ption (If travel outside o	of Texas, complete Schedule T)
	Contract LaNor	1		

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POLITICAL I	EXPENDITURES		SCHEDULE F
	EVPENDITURE		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	CATEGORIES FOR BOX 8 Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense explains how to complete this	Loan Repayment/Reimbursement Transportation Equipment & Related Expens Contributions/Donations Made By Candidate/Officeholder/Political Committ OTHER (enter a category not listed above)
Total pages Schedule F: 2 ///////	2 FREE NAME Gray, Kel	ly	3 ACCOUNT # (Ethics Commission File
Date 3/28/13	5 Payee name	/	
Atnount (\$) //e0.00	7 Payee address; City; Sta 4208 W2 Nelm Port Worth, TV 761	ite; Zip Code	
PURPOSE OF	a) Gategory (See categories listed at the top	of this schedule) (b) Description	on (If travel outside of Texas, complete Schedule T)
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Date 3/28/13	Mary Julidoon		
Amount (\$) 2DD-DD	Payee address; City; Sta 690/Windward Forest Hill, TX U	ite; Zip Code W44 140	
PURPOSE OF EXPENDITURE	Pategory (See categories listed at the top	of this schedule) Descriptio	n (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sou	ght Office held
Date 3/28/13	Dorothy arey		
Ampunt (6) /(4D.08	Payee address; Bity Stat 4/33 Durke Rd Fort Worth TK 7/0	ie; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of	of this schedule) Descriptio	n (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sour	ght Office held
Date 3/28/13	Payee name Trances Crautord	1	
Ampunt <b>\$5</b> ) [[60.10]	4228 Keel St.	e; Zip Code 76/19	
PURPOSE OF	Category (See categories sted at the top o	f this schedule) Description	n (If travel outside of Texas, complete Schedule T)
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POLITICAL	EXPENDITURES			SCHEDULE F
·····	EYDENDITI'D	E CATEGORIES FO		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Contr Solicitation/Fundraisin Travel In District Travel Out Of District Office Overhead/Rent e explains how to cor	act Labor Loa g Expense Trai Con ( al Expense OTH	n Repayment/Reimbursement nsportation Equipment & Related Expense tributions/Donations Made By Candidate/Officeholder/Political Committee HER (enter a category not listed above)
1 Total pages Schedule F:	2 FILER NAME	/ 1/		3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/30/13 6 Amount (\$) /20.98 8 PURPOSE	5 Payee name, Upurtsms	elly nate; Zip Code ///6	Description (If tra	vel outside of Texas, complete Schedule T)
OF	a ila Fi			ver outside of fexas, complete Sufedule ()
EXPENDITURE 9 Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Officeholder name	linse	Office sought	Office held
Date	Payee name			
Amount (\$)	Payee address; City; St Category (See categories listed at the top	ate; Zip Code	Description (Ittra	rel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE				er outside of Texas, complete Schedule 1)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name H		Office sought	Office held
Date	Payee name			
Amount (\$)	Payee address; City; Sta	ate; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top	o of this schedule)	Description (If trav	el outside of Texas, complete Schedule T)
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H		Office sought	Office held
Date	Payee name			
Amount (\$)	Payee address; City; Sta	nte; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top	of this schedule)	Description (If trave	el outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name H		Office sought	Office held
	ATTACH ADDITIONAL CO	OPIES OF THIS SCH	EDULE AS NEEL	DED