

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 Filer ID (Ethics Commission Filers)

2 Total pages filed: **31**

OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

CHRIS

NICKNAME

LAST

SUFFIX

NETTLES

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

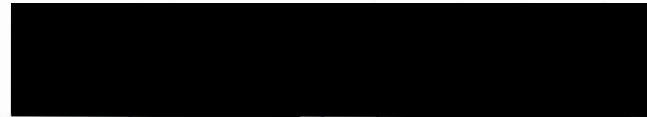
ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE



Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

791-6676

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

SHAKIA

NICKNAME

LAST

SUFFIX

NETTLES

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1121 E. Bowie St. FTW TX 76104

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

937-7103

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 Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

4 / 22 / 21

THROUGH

Month

Day

Year

5 / 26 / 21

11 ELECTION

ELECTION DATE

Month

Day

Year

6 / 5 / 21

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

FORT WORTH CITY COUNCIL DISTRICT 8

14 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

COMMITTEE ADDRESS

Additional Pages

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

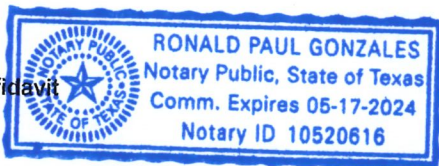
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 20,685.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,188.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 11,161.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

Chris Nettles

Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Chris Nettles this the 1st day of June, 2021, to certify which, witness my hand and seal of office.

Ronald P. Gonzales
Signature of officer administering oath

Ronald P. Gonzales
Printed name of officer administering oath

Notary
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,685. ⁰⁰
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 19,188.70
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 4/22/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Hibbler	7 Amount of contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Ft. Worth, TX	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 4/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominique Alexander	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Ft. Worth, TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 4/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Brockwell	Amount of contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Ft. Worth, TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 4/25/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pamela Young	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Ft. Worth, TX	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jessica Jones	7 Amount of contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 4/28/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharric Hickman	Amount of contribution (\$) \$340.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 4/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel Jones	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antie Crawford	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/2/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Ford	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiesa Leggett	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carla Morton	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aquanna Barnes	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/2/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Jenkins	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal Nealy	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/2/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Russell	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louis D. Groom	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiakina Watkins	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanya Gree	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jen Schultes	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Hughes	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/4/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Fountain	7 Amount of contribution (\$) \$ 50.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory Franklin	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Bockwell	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecil Collier	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/5/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Han Miller	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Ft. Worth, Tx		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crystal Allaway	Amount of contribution (\$) \$1,300.00
Contributor address; City; State; Zip Code Ft. Worth, Tx		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Bockwell	Amount of contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Ft. Worth, Tx		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billie Dorado	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code Ft. Worth, Tx		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/9/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huyen Pham	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/9/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elrita Rogers	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/10/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis Brown	Amount of contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/10/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Sweet	Amount of contribution (\$) \$ 200.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/10/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonathan Rubio 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/11/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delya Phillips Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boderick Butcher Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimberly Burton Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/12/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jill Darden	7 Amount of contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keisha Jones	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/10/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny McGree	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Bell	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/12/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Alley	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Gree	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/13/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Austin	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/13/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Garner	Amount of contribution (\$) \$400.00
Contributor address; City; State; Zip Code Ft. Worth, TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/18/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny Tucker 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huyen Pham Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bettye Andrews Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack West Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/20/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Johnson 6 Contributor address; City; State; Zip Code Ft. Worth, TX	7 Amount of contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willie T. Bruton Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/20/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adriane Dixon Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$900.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 5/21/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Smith Contributor address; City; State; Zip Code Ft. Worth, TX	Amount of contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Chris Nettles</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5/21/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Krista Daniels</i>	7 Amount of contribution (\$) <i>\$250.00</i>
6 Contributor address; City; State; Zip Code <i>Ft. Worth, Tx</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <i>5/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marty Taylor</i>	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>Ft. Worth, Tx</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>5/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kathy Rockwell</i>	Amount of contribution (\$) <i>\$500.00</i>
Contributor address; City; State; Zip Code <i>Ft. Worth, Tx</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <i>5/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gwenn Burud</i>	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>Ft. Worth, Tx</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Nettles		3 Filer ID (Ethics Commission Filers)
4 Date 5/24/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton Bechel	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Ft. Worth, TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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 MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 4/23/21	5 Payee name Dollar Tree
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6 Amount (\$) \$50.62	7 Payee address; Fort Worth, Tx	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) event expense	(b) Description supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/23/21	Payee name Walmart
------------------------	------------------------------

Amount (\$) \$12.54	Payee address; Fort Worth, Tx	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) event expense	Description supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/20/21	Payee name Act Blue - RideShare to Vote
------------------------	---

Amount (\$) \$50.00	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) voter contact expense	Description rides to polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 4/28/21	5 Payee name Prosperity Bank
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6 Amount (\$) \$50.88	7 Payee address; Fort Worth, TX	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) finance expense	(b) Description supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/29/21	Payee name Comark Direct
------------------------	------------------------------------

Amount (\$) \$2,639.96	Payee address; Fort Worth, TX	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description printing/mailers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/30/21	Payee name Facebook
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Amount (\$) \$337.93	Payee address;	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description digital ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/3/21	5 Payee name Cousin BBQ
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6 Amount (\$) \$40.50	7 Payee address; City; State; Zip Code Fort Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) went expense	(b) Description food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/3/21	Payee name Quik Trip
-----------------------	--------------------------------

Amount (\$) \$40.40	Payee address; City; State; Zip Code Fort Worth, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) travel expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/3/21	Payee name Ben's Triple B's
-----------------------	---------------------------------------

Amount (\$) \$15.39	Payee address; City; State; Zip Code Fort Worth, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) went expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/3/21	5 Payee name Larry Johnson	
6 Amount (\$) \$320.00	7 Payee address; City; State; Zip Code Fort Worth, Tx	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) polling expense	(b) Description poll greeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/4/21	Payee name Bernard Earl	
Amount (\$) \$365.00	Payee address; City; State; Zip Code Fort Worth, Tx	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) polling contract labor	Description poll greeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/5/21	Payee name Elijah Strong	
Amount (\$) \$550.00	Payee address; City; State; Zip Code Fort Worth, Tx	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description digital comms.
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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 MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/10/21	5 Payee name Poly Hardware
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6 Amount (\$) \$29.86	7 Payee address; vaughn st. Fort Worth, TX	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other	(b) Description Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/10/21	Payee name Shell Services
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Amount (\$) \$10.03	Payee address; Fort Worth, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) travel expense	Description gas
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/11/21	Payee name Bankem Printing
------------------------	--------------------------------------

Amount (\$) \$950.00	Payee address; Matlock St. Arlington, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/12/21	5 Payee name Steve Williams
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6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code Fort Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description video
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/12/21	Payee name Text Surge
------------------------	---------------------------------

Amount (\$) \$420.96	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description texts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/13/21	Payee name PayPal ATC
------------------------	---------------------------------

Amount (\$) \$200.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) other	Description supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/13/21	5 Payee name Tami Kane	
6 Amount (\$) \$110.00	7 Payee address; City; State; Zip Code Fort Worth, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description phone bank
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5/14/21	Payee name IONOS	City; State; Zip Code
Amount (\$) \$47.82	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description website
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 5/14/21	Payee name Lillian Schoolfield	City; State; Zip Code
Amount (\$) \$99.00	Payee address; City; State; Zip Code Fort Worth, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description phone bank
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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 MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/18/21	5 Payee name Facebook
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6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) advertising expense	(b) Description digital ads
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/18/21	Payee name Comark Direct
------------------------	------------------------------------

Amount (\$) \$5,891.98	Payee address; City; State; Zip Code Fort Worth, TX
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/18/21	Payee name Richard Davis
------------------------	------------------------------------

Amount (\$) \$130.00	Payee address; City; State; Zip Code Fort Worth, TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description canvassing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/18/21	5 Payee name Joey Betana
--------------------------	------------------------------------

6 Amount (\$) \$130.00	7 Payee address; Fort Worth, Tx	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description canvassing
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/18/21	Payee name Lillian Schoolfield
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Amount (\$) \$258.50	Payee address; Fort Worth, Tx	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description phone bank
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/19/21	Payee name USPS
------------------------	---------------------------

Amount (\$) \$55.00	Payee address; Fort Worth, Tx	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description mailing
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/21/21	5 Payee name Tami Kane
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6 Amount (\$) \$216.50	7 Payee address; Fort Worth, TX	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description phone bank
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/21/21	Payee name Comark Direct
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Amount (\$) \$2,230.00	Payee address; Fort Worth, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/24/21	Payee name Home Depot
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Amount (\$) \$16.13	Payee address; Fort Worth, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) went expense	Description supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/24/21	5 Payee name Pappasitos Cantina
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6 Amount (\$) \$100.00	7 Payee address; Fort Worth, TX	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) went expense	(b) Description food
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/25/21	Payee name Comark Direct
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Amount (\$) \$2,230.60	Payee address; Fort Worth, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising expense	Description printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/25/21	Payee name Antonieta Quepons
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Amount (\$) \$291.50	Payee address; Fort Worth, TX	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description phone bank
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
4 Date 5/26/21	5 Payee name Lupe Johnson	
6 Amount (\$) \$220.00	7 Payee address; City; State; Zip Code Fort Worth, Tx	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/26/21	Payee name Lillian Schoofield	
Amount (\$) \$198.00	Payee address; City; State; Zip Code Fort Worth, Tx	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description phone bank
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 5/26/21	Payee name Joey Betana	
Amount (\$) \$40.50	Payee address; City; State; Zip Code Fort Worth, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) contract labor	Description canvassing
	<input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Chris Nettles	3 Filer ID (Ethics Commission Filers)
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4 Date 5/26/21	5 Payee name Richard Davis
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6 Amount (\$) \$40.50	7 Payee address; City; State; Zip Code Fort Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) contract labor	(b) Description Canvassing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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