

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Ashley E.		OFFICE USE ONLY Date Received 5/3/13 JS 2:56 Date Hand-delivered or Postmarked 5/3/13 Receipt # _____ Amount _____ Date Processed - 5/3/13 Date Imaged 5/3/13
	NICKNAME LAST SUFFIX Ray		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 11086 Fort Worth, TX 76110		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (817)	PHONE NUMBER 965-1253	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Susan		
	NICKNAME LAST SUFFIX Harper		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2248 5th Ave, Fort Worth, TX 76110		
8 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 721-7223	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 4 / 12 / 2013    5 / 3 / 2013		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 5 / 11 / 2013		
12 OFFICE	OFFICE HELD (if any) None		13 OFFICE SOUGHT (if known) FWISD District 9 School Board Trustee

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

*Ashley Paz*

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

\$

*0*2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

*13,430.00*EXPENDITURE  
TOTALS

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

\$

*0*

4. TOTAL POLITICAL EXPENDITURES

\$

*12,590.00*CONTRIBUTION  
BALANCE

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

\$

*11,671.10*OUTSTANDING  
LOAN TOTALS

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

\$

*0*

18 AFFIDAVIT

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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Ashley Paz*

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Ashley Paz, this the 3 day of May, 20 13, to certify which, witness my hand and seal of office.

Signature of officer administering oath

EDWARD SPEARS

Printed name of officer administering oath

Manager Bus Suppl.

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: 10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/10/13

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Paul & Andrews Special Account

6 Contributor address; City; State; Zip Code

700 Jenkins Rd, Alledo, TX 76008

7 Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/10/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Edwin S Ryan for Patricia Ryan

Contributor address; City; State; Zip Code

5401 Benbridge, Fort Worth, TX 76107

Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/10/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Timothy L. & Elaine J. Petrus

Contributor address; City; State; Zip Code

3736 Country Club Dr. Fort Worth, TX 76109

Amount of contribution (\$)

500<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/10/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Scott M. Kleberg

Contributor address; City; State; Zip Code

104 Hazlewood, HW 76107

Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/10/13

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Mark Rurden

Contributor address; City; State; Zip Code

2692 Riverwood Trail, HW 76109

Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

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: 10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/14/13

5 Full name of contributor

Gene Paz☐ out-of-state PAC (ID#:6 Contributor address; City; State; Zip Code  
797 Brentway Ct. SW, Lilburn, GA 30049

7 Amount of contribution (\$)

200.00

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

4/15/13

Full name of contributor

Julie Lewis☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

2837 Quilling, Ft Worth 76110

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

4/16/13

Full name of contributor

Page Doby☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

4405 Summercrest Ct, GSW 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

4/15/13

Full name of contributor

William D. Greenhill☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

1608 Ashland Ave. GSW 76107

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)

AttorneySelf

Date

4/15/13

Full name of contributor

R Denny Alexander☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

4200 S Nolen Ste 617, GSW 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)

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:

10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/15/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Greater ITW Assoc of Realtors

6 Contributor address; City; State; Zip Code

2650 Parkview Dr, Itw 76102

7 Amount of contribution (\$)

2,000<sup>00</sup>

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

PAC

10 Employer (See Instructions)

Date

4/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

Halter Franklin Bruce

Contributor address; City; State; Zip Code

3625 Namulston Ave, Itw 76107

Amount of contribution (\$)

50<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

Patricia J. Kandle

Contributor address; City; State; Zip Code

1716 S Adams, Itw 76104

Amount of contribution (\$)

50<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

Elizabeth Ray

Contributor address; City; State; Zip Code

5914 El Campo, Itw 76107

Amount of contribution (\$)

100<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

Fred Cloisuit

Contributor address; City; State; Zip Code

3343 Locke Ave, Ste 101, Itw 76107

Amount of contribution (\$)

100<sup>00</sup>

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:

10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/15/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

John C or Cami C Hoff

6 Contributor address; City; State; Zip Code

500 Commerce Ste 700, ItW 76102

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

President/CEO

10 Employer (See Instructions)

Crescent Real Estate

Date

4/15/13

Full name of contributor

☐ out-of-state PAC (ID#)

Stephanie Harvey

Contributor address; City; State; Zip Code

4316 Ridgehaven Ct, ItW 76116

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

4/19/13

Full name of contributor

☐ out-of-state PAC (ID#)

Brenda Bouwee

Contributor address; City; State; Zip Code

2222 Fairmount, ItW 76110

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

4/19/13

Full name of contributor

☐ out-of-state PAC (ID#)

Michael &amp; Stephanie Dike

Contributor address; City; State; Zip Code

1513 Rivercrest Ct, ItH 76107

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor

☐ out-of-state PAC (ID#)

Reinaldo Rosas

Contributor address; City; State; Zip Code

PO Box 1481, ItW 76101

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)

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:

10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/13

5 Full name of contributor

Edward C. Lasater

☐ out-of-state PAC (ID#)

6 Contributor address; City; State; Zip Code

2101 Ghara Pkwy, Itw 76110

7 Amount of contribution (\$)

500<sup>00</sup>

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Self

Date

4/19/13

Full name of contributor

Jason Amon

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

1404 S. Adams, Itw 76104

Amount of contribution (\$)

50<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor

Raeph A. Suggins

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

600 N. 6th St, Ste 300, Itw 76104

Amount of contribution (\$)

250<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor

George Ann Carter Bahan

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

4915 Crestline Rd, Itw 76107

Amount of contribution (\$)

250<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor

Good Government Fund

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

201 Main St. Ste 2500, Itw 76102

Amount of contribution (\$)

1500<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

PAC

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:

10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/20/13

5 Full name of contributor

Clay Brants

☐ out-of-state PAC (ID#:

6 Contributor address; City; State; Zip Code

4911 Bryce Ave, ItW 76107

7 Amount of contribution (\$)

500<sup>00</sup>

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

owner

10 Employer (See Instructions)

Brants Real Estate

Date

4/21/13

Full name of contributor

Christopher Taughn

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

2101 Alston, ItW 76110

Amount of contribution (\$)

100<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/21/13

Full name of contributor

Andrew Blake

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

500 St 7th St, ItW 76102

Amount of contribution (\$)

250<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/13

Full name of contributor

Sara Albrecht

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

1701 S Henderson, ItW 76116

Amount of contribution (\$)

30<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/23/13

Full name of contributor

Lee Nichol

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

3882 South Vines Circle, ItW 76109

Amount of contribution (\$)

100<sup>00</sup>

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: 10

2 FILER NAME

Susan Sharper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/27/13

5 Full name of contributor

☐ out-of-state PAC (ID#)Brad J. Gorrondona

6 Contributor address; City; State; Zip Code

108 Enchanted Ct, Burleson 76028

7 Amount of contribution (\$)

500<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

Geotechnical Eng.

10 Employer (See Instructions)

Gorrondona & Assoc.

Date

4/27/13

Full name of contributor

☐ out-of-state PAC (ID#)Edward E. Stocker, Jr.

Contributor address; City; State; Zip Code

1600 W 7th St, Ste 300, FtW 76102

Amount of contribution (\$)

100<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/13

Full name of contributor

☐ out-of-state PAC (ID#)Stewart R. Henderson

Contributor address; City; State; Zip Code

3501 Sagecrest Terr, FtW 76109

Amount of contribution (\$)

200<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/13

Full name of contributor

☐ out-of-state PAC (ID#)Theodore P. Gorski

Contributor address; City; State; Zip Code

3811 Monticello Dr, FtW 76107

Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/13

Full name of contributor

☐ out-of-state PAC (ID#)Terry Ryan

Contributor address; City; State; Zip Code

6320 Inca Rd, FtW 76116

Amount of contribution (\$)

250<sup>00</sup>

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

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: 10

2 FILER NAME

Susan Harper

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/27/13

5 Full name of contributor

G. Malcolm Louden☐ out-of-state PAC (ID# \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

500 Dr. 7th St, #27 Ste 1007, FtW 76102

7 Amount of contribution (\$)

1000<sup>00</sup>

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

owner

10 Employer (See Instructions)

Walsh & Watts

Date

4/27/13

Full name of contributor

Jeffrey Hawkins☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

8321 Carrick, FtW 76116

Amount of contribution (\$)

20<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/13

Full name of contributor

Esther M. Goodwin☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

3322 Clinton Ave

Amount of contribution (\$)

50<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/13

Full name of contributor

Lorraine York Dukes☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

1100 Elizabeth Blvd, FtW 76110

Amount of contribution (\$)

250<sup>00</sup>

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/1/13

Full name of contributor

Melissa Honor☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

311 Bryan St, FtW 76104

Amount of contribution (\$)

50<sup>00</sup>

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: <u>10</u>	
2 FILER NAME <u>Susan Harper</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>5/1/13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>James Shung</u> 6 Contributor address; City; State; Zip Code <u>2308 Thistletoe Blvd, JtW 76110</u>	7 Amount of contribution (\$) <u>100.00</u>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>5/1/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Mark Jefferies</u> Contributor address; City; State; Zip Code <u>3304 Alton Rd, JtW 76109</u>	Amount of contribution (\$) <u>250.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>5/1/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Dennis Koniciecki</u> Contributor address; City; State; Zip Code <u>2339 N. Davis Dr. #8, Arlington 76012</u>	Amount of contribution (\$) <u>30.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>5/1/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Sam Moser</u> Contributor address; City; State; Zip Code <u>2732 Riverwood Trl, JtW 76109</u>	Amount of contribution (\$) <u>100.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>5/3/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Val Greeke</u> Contributor address; City; State; Zip Code <u>201 Main St, Ste 600, JtW 76102</u>	Amount of contribution (\$) <u>250.00</u>	In-kind contribution description (if applicable)
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: <u>10</u>	
2 FILER NAME <u>Susan Harper</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>5/3/13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>James Del Base, Jori Adams</u>	7 Amount of contribution (\$) <u>500.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>2330 Medford Ct. East, Jt W 76109</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>homemaker</u>		10 Employer (See Instructions) <u>none</u>	

  

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			
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 (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			
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 (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(If travel outside of Texas, complete Schedule T)			
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 (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
(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	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.

<b>1</b> Total pages Schedule F: <u>2</u>		<b>2</b> FILER NAME <u>Susan Harper</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>4/12/2013</u>		<b>5</b> Payee name <u>Comark Direct</u>			
<b>6</b> Amount (\$) <u>2943.05</u>		<b>7</b> Payee address; City; State; Zip Code <u>507 S Main, ItW 76104</u>			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See categories listed at the top of this schedule) <u>Advertising Expense</u>		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <u>Campaign Mailers</u>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

  

<b>Date</b> <u>4/17/13</u>		<b>Payee name</b> <u>Design Graphics</u>			
<b>Amount (\$)</b> <u>68.85</u>		<b>Payee address; City; State; Zip Code</b> <u>12404 Nury 155 South, Tyler 75703</u>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <u>Advertising Expense</u>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <u>signs</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

  

<b>Date</b> <u>4/23/13</u>		<b>Payee name</b> <u>Comark Direct</u>			
<b>Amount (\$)</b> <u>2306.71</u>		<b>Payee address; City; State; Zip Code</b> <u>507 S. Main, ItW 76104</u>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <u>Advertising Expense</u>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <u>Campaign Mailers</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

  

<b>Date</b> <u>4/29/13</u>		<b>Payee name</b> <u>Comark Direct</u>			
<b>Amount (\$)</b> <u>2943.32</u>		<b>Payee address; City; State; Zip Code</b> <u>507 S. Main, ItW 76104</u>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) <u>Advertising Expense</u>		<b>Description</b> (If travel outside of Texas, complete Schedule T) <u>Campaign Mailers</u>	
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.

<b>1</b> Total pages Schedule F: <u>2</u>		<b>2</b> FILER NAME <u>Susan Harper</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>4/24/13</u>		<b>5</b> Payee name <u>Navis Farmer</u>			
<b>6</b> Amount (\$) <u>1263.60</u>		<b>7</b> Payee address; City; State; Zip Code <u>Pd Box 11517, ITW 76110</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Consulting Expense</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u> voter survey</u>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>5/1/13</u>		Payee name <u>Comark Direct</u>			
Amount (\$) <u>2942.34</u>		Payee address; City; State; Zip Code <u>507 S. Main, ITW 76104</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Advertising Expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign Mailers</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <u>5/3/13</u>		Payee name <u>Greater Meadowbrook News</u>			
Amount (\$) <u>329.00</u>		Payee address; City; State; Zip Code <u>Pd Box 24264, ITW 76124</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Advertising Expense</u>		Description (If travel outside of Texas, complete Schedule T) <u>newsletter ad</u>	
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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED