

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:

12

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS ☒ MR

FIRST

MI

Norman

B.

NICKNAME

LAST

SUFFIX

Robbins, Jr.

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

6144 Plum Valley Place
Fort Worth, TX 76116

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 851-4392

6 CAMPAIGN
TREASURER
NAME

MS / MRS ☒ MR

FIRST

MI

Robert

D.

NICKNAME

LAST

SUFFIX

Dan Settle, Jr.

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

6301 Rosemont Ave.
Fort Worth, TX 76116

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 878-3536

9 REPORT TYPE



January 15



30th day before election



Runoff



15th day after campaign
treasurer appointment
(Officeholder Only)



July 15



8th day before election



Exceeded \$500 limit



Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

7 / 1 / 16

THROUGH

Month

Day

Year

12 / 31 / 16

11 ELECTION

ELECTION DATE

Month

Day

Year

/ /

☐ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

District 7 Trustee
Fort Worth I.S.D.

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

Norman B. Robbins, Jr.

15 Filer ID (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

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

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

\$

65.00

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

\$

6,800.00

**EXPENDITURE
TOTALS**

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

\$

203.50

4. **TOTAL POLITICAL EXPENDITURES**

\$

228.50

**CONTRIBUTION
BALANCE**

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

\$

9,739.69

**OUTSTANDING
LOAN TOTALS**

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

\$

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Norman B. Robbins

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Norman Robbins, this the 13th day of January, 20 17, to certify which, witness my hand and seal of office.

Faye Daniels
Signature of officer administering oath

Faye Daniels
Printed name of officer administering oath

Executive Sec.
Title of officer administering oath

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 checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,800.00
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	\$
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 25.00
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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date
12/1/16

5 Full name of contributor ☐ out-of-state PAC (ID#:
Jeff & Linda Wentworth

7 Amount of contribution (\$)

\$250.00

6 Contributor address; City; State; Zip Code
5020 Bryce Ave., Fort Worth, TX 76107

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date
12/1/16

Full name of contributor ☐ out-of-state PAC (ID#:
L.O. Brightbill III

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code
148 Aledo Creeks Rd., Fort Worth, TX 76126

Principal occupation / Job title (See Instructions)
Banking

Employer (See Instructions)
Southwest Bank

Date
12/1/16

Full name of contributor ☐ out-of-state PAC (ID#:
Debbi & Chip Brown

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code
4501 Crestline Rd., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)
Physician

Employer (See Instructions)
Radiology Assocs.

Date
12/1/16

Full name of contributor ☐ out-of-state PAC (ID#:
Jane Ferguson

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code
4065 Modlin Ave Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)
Community volunteer

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/6/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Marvin Gioovard

6 Contributor address;

City; State; Zip Code

2433 Medford Ct.E, Fort Worth TX 76109

7 Amount of contribution (\$)

\$ 100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/6/16

Full name of contributor

☐ out-of-state PAC (ID#:

Steve & Janie Christie

Contributor address;

City; State; Zip Code

3708 Lands End, Fort Worth TX 76109

Amount of contribution (\$)

\$ 200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/6/16

Full name of contributor

☐ out-of-state PAC (ID#:

Mike & Beverly Reilly

Contributor address;

City; State; Zip Code

1017 FM Rd S, Alamo, TX 76008

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

Real estate

Employer (See Instructions)

Reilly Bros. Property Co.

Date

12/6/16

Full name of contributor

☐ out-of-state PAC (ID#:

Arnie Davenport

Contributor address;

City; State; Zip Code

4070 Clarke Ave, Fort Worth TX 76107

Amount of contribution (\$)

\$ 100.00

Principal occupation / Job title (See Instructions)

Greenwood Mt. Olivet Director

Employer (See Instructions)

Greenwood Mt. Olivet Cemeteries

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/6/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

R.B. Kelly III

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

301 Virginia Pl., Fort Worth, TX 76107

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Dacker Jones

Date

12/9/16

Full name of contributor

☐ out-of-state PAC (ID#:

Lee Freese

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

4055 Int'l Plaza, Ste. 200, Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Freese & Nichols

Date

12/9/16

Full name of contributor

☐ out-of-state PAC (ID#:

R. Denny Alexander

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

2928 Alton Rd., Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Investments

Employer (See Instructions)

Date

12/9/16

Full name of contributor

☐ out-of-state PAC (ID#:

Dan Lowrance

Amount of contribution (\$)

\$2,000.00

Contributor address;

City; State; Zip Code

2008 Four Oaks Ln., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Retired

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/9/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Dan Settle, Jr.

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 188, Blowing Rock, NC 28607

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Kelly Hart

Date

12/9/16

Full name of contributor

☐ out-of-state PAC (ID#:

Jo Ann Royer

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

6412 Rosemont Ave., Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Real estate

Employer (See Instructions)

Williams Brew

Date

12/9/16

Full name of contributor

☐ out-of-state PAC (ID#:

A.E. Allis

Amount of contribution (\$)

\$50.00

Contributor address;

City; State; Zip Code

3905 Clayton Rd. E., Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

12/13/16

Full name of contributor

☐ out-of-state PAC (ID#:

Berkeley Merrill

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

6116 Plum Valley Pl., Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Retired

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/13/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Jan Curoy

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City; State; Zip Code

6125 Plum Valley Pl., Fort Worth, TX 76116

8 Principal occupation / Job title (See Instructions)

Event planner

9 Employer (See Instructions)

Jan Simus Events

Date

12/13/16

Full name of contributor

☐ out-of-state PAC (ID#:

Suzy Williams

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

5404 El Campo Ave., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

12/13/16

Full name of contributor

☐ out-of-state PAC (ID#:

Martha Leonard

Amount of contribution (\$)

\$250.00

Contributor address;

City; State; Zip Code

1411 Shady Oaks Ln., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Community volunteer

Employer (See Instructions)

Date

12/13/16

Full name of contributor

☐ out-of-state PAC (ID#:

Mike & Susi Bickley

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

1824 Hillcrest St., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Retired

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/21/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Martine Gorski

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address;

City; State; Zip Code

36 Valley Ridge Rd., Fort Worth, TX 76102

8 Principal occupation / Job title (See Instructions)

Museum events

9 Employer (See Instructions)

Modern Art Museum

Date

12/21/16

Full name of contributor

☐ out-of-state PAC (ID#:

Joe Gearheart

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

4901 Dexter, Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Construction

Employer (See Instructions)

Gearheart Construction

Date

12/21/16

Full name of contributor

☐ out-of-state PAC (ID#:

Pete & Beckie Geren

Amount of contribution (\$)

\$ 250.00

Contributor address;

City; State; Zip Code

1200 Washington Terr., Fort Worth, TX 7607

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Sid Richardson Foundation

Date

12/21/16

Full name of contributor

☐ out-of-state PAC (ID#:

Terre & David Tracy

Amount of contribution (\$)

\$ 50.00

Contributor address;

City; State; Zip Code

2734 Colonial Pkwy., Fort Worth, TX 76109

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Canterly Hanger LLP

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/21/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Louise Carvey

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City; State; Zip Code

3601 Overton Park Dr. E., Fort Worth, TX 76109

8 Principal occupation / Job title (See Instructions)

Community Volunteer

9 Employer (See Instructions)

Date

12/21/16

Full name of contributor

☐ out-of-state PAC (ID#:

Ronald Parrish

Amount of contribution (\$)

\$200.00

Contributor address;

City; State; Zip Code

1419 Thomas Pl., Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

12/24/16

Full name of contributor

☐ out-of-state PAC (ID#:

Pat & Bill Massad

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

4611 Bryce Ave., Fort Worth, TX 7607

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

12/21/16

Full name of contributor

☐ out-of-state PAC (ID#:

John Molyneaux

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

4008 Tamworth, Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Investments

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Norman B. Robbins, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

12/28/16

5 Full name of contributor

☐ out-of-state PAC (ID#:

Mike & Rosie Moncrief

6 Contributor address;

City; State; Zip Code

777 Taylor St, Ste. 1030, Fort Worth, TX 76102

7 Amount of contribution (\$)

\$100.00

8 Principal occupation / Job title (See Instructions)

Investments

9 Employer (See Instructions)

Mike Moncrief Investments

Date

12/28/16

Full name of contributor

☐ out-of-state PAC (ID#:

Barclay & Marsha Berdan

Contributor address;

City; State; Zip Code

3639 Encanto Dr., Fort Worth, TX 76097

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Hospital Admin.

Employer (See Instructions)

Texas Health Resources

Date

12/28/16

Full name of contributor

☐ out-of-state PAC (ID#:

Margaret & David Sykes

Contributor address;

City; State; Zip Code

2000 Spanish Trail, Fort Worth, TX 76107

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Community Volunteer

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

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 MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: <u>1</u>	2 FILER NAME <u>Norman B. Robbins, Jr.</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>8/11/16</u>	5 Payee name <u>Lockheed Martin Aeronautics Company</u>	
6 Amount (\$) <u>\$25.00</u> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <u>P.O. Box 748</u> <u>Fort Worth, TX 76101</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Other</u>	(b) Description <u>Personal use of cell phone in 2016</u> <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 <u>Norman B. Robbins, Jr.</u> Office sought <u>Dist. 7 Trustee FWLSD</u> Office held <u>Same</u>	
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	(b) 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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED