1	TE / OFFICEHOLDER N 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: 34 TOTAL
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST CLINT C. NICKNAME LAST BURGESS	MI 	OFFICE USE ONLY Date Recived LECTIONS JAN 20
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY;	STATE; ZIP CODE	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST PAMELA G	MI SUFFIX	JAN 1 5 2015
	HAMMER		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;	CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	X January 15 30th day before election July 15 8th day before election	Exceeded \$500	15th day after campaign treasurer appointment (officeholderonly) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7 / 1 / 14 THROUGH	Month Day	Year / 14
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (Ifany) CONSTABLE PRECINCT 7	13 OFFICE SOUGHT (if known)
	GO TO PAG	SE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	CLIN	T C. BURGESS	5 ACCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDU ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF TH	DATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
		COMMITTEE NAME	
	GENERAL	Fort Worth Police Officers Association PAC	B E
		COMMITTEE ADDRESS	ZOIS ECTIF
		904 Collier St Fort Worth Texas 76102	IRRA JAN 2 ONS A
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages		Lloyd Cook	PHI2:
		COMMITTEE CAMPAIGN TREASURER ADDRESS	NTY ATOR
		Same as above	а 1
17 CONTRIBUTION TOTALS		POLÍTICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZEI	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 125,035.00
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMI	zed \$ \$0
	4. TOTAL	POLITICAL EXPENDITURES	\$ 29,952.00
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	^{AY} \$ 86,266.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	че \$ 0
18 AFFIDAVIT	1111		
11111117E	ENA		perjury, that the accompanying report
NHH TIO	TARL	me under Title 15, Election Code.	nformation required to be reported by
	A E Z		>
1 (A)		/1///	
i o Tr	V		
	TEXP.	Signature of Candi	idate or Officeholder
1110 20	9		
AFFIX NOTARY STAN	RANK ABOVE		
Sworn to and sub		me by the said Clint C. Sun	gess this the
day		15	
	A	Lenalevine a	Chief Admin - Pet1
	/	- a end Levine (-1/IEF NUMMIN -1CV

hier Admin

Signature of officer administering oath

Printed name of officer administering oath

POLITIC	CAL CONTRIBUTIONS THAN PLEDGES OF LOAN	D		SCHEDULE A
The	Instruction Guide explains how to 2015 HAN 200 1	RN 12: 57	1 Total pages Sch 1-2	
2 FILER NAME	FRANK PH Clint C. Blertiers Adm	ILLIPS INISTRATOR	3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor □oB ¥F _{state PAC(ID#} Sharon King	HEAR &	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
8/9/2014	6 Contributor address; City; State; Zip Code 5829 Conveyor Dr. Cleburne, Texas	76031	500	
9 Principal occur	pation / Job title (See Instructions)	0 Employer (See I		of Texas, complete Schedule T)
	Sales			
Date 8/20/2014	Full name of contributor Dout-of-state PAC (ID# Patrick Lambright)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0/20/2014	Contributor address; City; State; Zip Code P O BOX 175228 Arlington, Texas 7	6003 ,	750 	
			(If travel outside o	f Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Self Emp.	Employer (See I	nstructions)	
Date	Full name of contributorout-of-state PAC(ID# LEFT BLANK Contributor address; City; State; Zip Code	······································	Amount of contribution (\$)	In-kind contribution description (if applicable)
	and a second		/if travel outside (of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Attorney	Employer (See I		n rexas, comprete Ochedule 17
Date 9/4/2014	Full name of contributor 🔲 out-of-state PAC (D# Hon. David Cook)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 309 East Broad St Mansfield, Texas	s 76063	350	
Bringing ago	ation (lob title (See Instructions)	Employer (See !		of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Mayor			
Date 9/17/2014Do	Full name of contributor 🔲 out-of-state PAC (ID# Pat Rabjohn		Amount of contribution (\$) 500	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2011 Austin St. mansfield, Texas 7	76063	500	
Principal occup	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
lf c	ATTACH ADDITIONAL COPIES OF			requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PEEDGES OR LOANS SCHEDULE A The instruction Guide explained how to complete this form. Total pages Schedule A: Э 2 FILER NAMELECTIONS ADMINIS CRANORC. BURGESS 3 ACCOUNT # (Ethics Commission Filers) 4 Date 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) Pam Hammer 9/7/2014 250 City; State; Zip Code 6 Contributor address; 1904 Clover Hill Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID#: Date Amount of In-kind contribution contribution (\$) description (if applicable) Eric McCallum 9/15/2014 Contributor address; City; State; Zip Code 500 5225 Teague Rd Fort Worth, Texas 76140, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID#:_ Amount of In-kind contribution Date description (if applicable) contribution (\$) Hon. Andy Nguyen 9/15/2014 350 Contributor address; City; State; Zip Code 1100 East Broad St Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Commissioner Full name of contributor out-of-state PAC (ID#) Date Amount of In-kind contribution contribution (\$) description (if applicable) 9/15/2014 Hon. Matt Krause Contributor address; City; State; Zip Code 350 8553 N. Beach St Fort Worth, Texas 76244 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) State Representative Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution Date contribution (\$) description (if applicable) Benji Arslanovski 9/28/2014Sel Golf towel for golfers 500 Contributor address; City; State; Zip Code 7629 Levy Acres Circle South Burleson, Texas 76029 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self. Emp. ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

	THAN PLEDGES OR LOAN	IS		SCHEDULE A	
2015 JAN	Retruent 2 months how to complete this	form.	1 Total pages Sch	edule A:	
² ELECTIONS ADMINISTRATOR CLINT C. BURGESS 3		3 ACCOUNT # (Ethics Commission Filers)			
4 Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of	8 In-kind contribution	
0/18/2014	Al Pugh		contribution (\$)	description (if applicable)	
9/18/2014	6 Contributor address; City; State; Zip Code		500		
	6243 James Ct Burleson, Texas 7	76028			
			(If travel outside)	of Texas, complete Schedule T)	
9 Principal occup	eation / Job title (See Instructions) Accountant	10 Employer (See I			
Date	Full name of contributor out-of-state PAC (ID#:)	Amountof	In-kind contribution	
	Jaime Hughes		contribution (\$)	description (if applicable)	
9/26/2014	Contributor address; City; State; Zip Code		500		
	4521 South Hulen, Suite 220 Fort Worth,	Texas 76109 .			
	·····		(If travel outside (of Texas, complete Schedule T)	
Principal occup	oation / Job title (See Instructions) Sales	Employer (See I			
Date	Full name of contributor out-of-state PAC (ID#_)	Amount of	In-kind contribution	
9/26/2014	Tom Ritter		contribution (\$)	description (if applicable)	
	Contributor address; City; State; Zip Code		350		
	812 Riviera dr. Mansfield, Texas	76063			
			(If travel outside	of Texas, complete Schedule T)	
Principal occup	eation / Job title (See Instructions) Realtor	Employer (See I	n siructions)		
Date	Full name of contributor 🔲 out-of-state PAC (D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
9/27/2014	Benji Arslanovski			· · · · · · · · · · · · · · · · · · ·	
	Contributor address; City; State; Zip Code	T. 7(000	300		
	7628 Levy Acres Circle South Burleson	n, Texas 76028		1	
	· · · · · · · · · · · · · · · · · · ·		(If travel outside	l of Texas, complete Schedule T)	
Principal occup	bation / Job title (See Instructions) Self. Emp.	Employer (See I	nstructions)		
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/1/2014Sal	Bruce Hammond		1500		
	Contributor address; City; State; Zip Code	76012	1500		
	1903 Lakehill Court Arlington, Tex	as 76012		1	
			(If travel outside	 of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions) Sales	Employer (See I	nstructions)		
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LUID JAN 2	Instruction wilde explains how to complete thi	s form.	1 Total pages Sch 4	edule A:
ELECTIONS	PHILLIPS DMINISTRATOR CLINT C. BURGESS	N.C	3 ACCOUNT # (Ethics Commission Filers)	
Bai	5_Eull name of contributor out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution
9/29/2014	Hon. Brian Birdwell			description (if applicable
	6 Contributor address; City; State; Zip Code		350	
	1315 Waters Edge Dr Ste 116-2 Granbur	y, 1exas /6048		1
Principal occu	pation / Job title (See Instructions) Senator	10 Employer (See		of Texas, complete Schedule T)
Date	Full name of contributor Out-of-state PAC (D#:		Amount of	In-kind contribution
	Becki Brandenburg	/	contribution (\$)	description (if applicable
9/30/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • •	200	
	P.O. Box 27 Arlington, Texas 760	004 ,		
		· · · · · · · · · · · · · · · · · · ·	(If travel outside	l of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Public Safety	Employer (See I	nstructions)	
Date	Full name of contributor Dout-of-state PAC(ID#_)	Amount of	In-kind contribution
/30/2014	Brian Hand		contribution (\$)	description (if applicable
	Contributor address; City; State; Zip Code		750	
	108 S. Walnut Creek Mansfield, Te	xas /0003		'
Principal occu	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	Self Emp.	L		
Date	Full name of contributor Dout-of-state PAC (D#_)	Amount of contribution (\$)	In-kind contribution description (if applicable
9/30/2014	Evelyn Bynum Contributor address; City; State; Zip Code		1250	
	2580 Taos Dr Grand Prairie, Tex			
			(If travel outside	 of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Self Emp.	Employer (See I		
Date	Full name of contributor 🔲 out-of-state PAC (ID#_)	Amount of	In-kind contribution
	LEFT BLAN	K	contribution (\$)	description (if applicable
	Contributor address; City; State; Zip Code	•		
				1
Principal occu	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
	Senator			
	ATTACH ADDITIONAL COPIES			

	CAL CONTRIBUTIONS	15		SCHEDULE A
	Anstruction 612:058 plains how to complete this	form.	1 Total pages Sch	edule A:
2 FILER NAME	ANK PHILLIPS INS ADMINISTRATOR:LINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 Date BY:	5 Full name of contributor out-of-state PAC (ID# Tony Graves		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/1/2014	6 Contributor address; City; State; Zip Code 7513 Kingswood Ct North Richland Hills	s, Texas 76182	350	
	L		(If travel outside	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions) Retired	10 Employer (See I	Instructions)	·
Date	Full name of contributor)	Amount of	In-kind contribution
	Hon. Johnathan Stickland		contribution (\$)	description (if applicable)
10/2/2014	Contributor address; City; State; Zip Code		350	
	1220 G Airport Frwy Bedford, Texas	76022		
	1220 G Aliport Hwy Bediord, Texas	, , , ,		
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	State Representative	2		
Date	Full name of contributor out-of-state PAC (ID#)	Amount of	In-kind contribution
10/2/2014	Hon. Kelly Hancok		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code	· · · · · · · · · · ·	350	
	9121 Belshire Dr, Ste 200 NRH, Texa	as 76182		
				l
Principal occur	pation / Job title (See Instructions)	Employer (See I	`	of Texas, complete Schedule T)
	Senator			
Date	Full name of contributor Dut-of-state PAC (ID#:)	Amount of	In-kind contribution
10/2/2014	Hon. Konni Burton		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		150	
	PO Box 1246 Colleyville, Texas	s 76034		
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	Senator		,	
Date	Full name of contributor out-of-state PAC (ID#)	Amount of	In-kind contribution
10/4/2014Sel	Josh Tipton		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		350	
	8221 Holly Hock Dr. Arlington, Tex	as 76001		
Principal occur	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
. –	Self Emp.			
lf c	ATTACH ADDITIONAL COPIES C ontributor is out-of-state PAC, please see instr			requirements.

POLITICAL CONTRIBUTIONS SCHEDULE A OTHREANT HANT PLEDGES OR LOANS 2015 JAN 20 PM 12: 58 Total pages Schedule A: The instruction Guide explains how to complete this form. 6 FRANK PHILLIPS 2 ELECTIONS ADMINISTRATOR 3 ACCOUNT # (Ethics Commission Filers) CLINT C. BURGESS 4 Date Full name of contributor 7 Amount of 8 In-kind contribution 🔲 out-of-state PAC (ID# contribution (\$) description (if applicable) David Crawford 10/3/2014 250 6 Contributor address; City; State; Zip Code 6700 Oak Hill Dr. Fort Worth, Texas 76132 (if travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Attorney out-of-state PAC (ID#; Date Full name of contributor Amount of In-kind contribution contribution (\$) description (if applicable) Greg Kunasek 10/3/2014 City; State; Zip Code Contributor address; 125 405 Carlin Rd. Mansfield, Texas 76063, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Pilot Full name of contributor out-of-state PAC(ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Johnny Taylor 10/3/2014 250 Contributor address; City; State; Zip Code 7017 Cabot Estates Dr Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Construction In-kind contribution Full name of contributor out-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) Kevin Secton 10/3/2014 200 Contributor address; City; State; Zip Code 1204 Brook arbor Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID#:____ Amount of In-kind contribution Date contribution (\$) description (if applicable) Ben Doskocil 10/6/2014Sel 550 Contributor address; City; State; Zip Code 6606 Saddle Ridge Rd Arlington, Texas 76016 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements. www.ethics.state.tx.us Revised 07/28/2014

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POLITIC	CAL CONTRIBUTIONS	NS		SCHEDULE A
2015 JAN 2	Astructure complete this	form.	1 Total pages Sch 7	edule A:
2 FILER FRAME	(PHILLIPS ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (Ethics Commission Filers)	
4 □215 : 10/5/2014	 5 Full name of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 530	8 In-kind contribution description (if applicable)
			· · · · ·	of Texas, complete Schedule T)
9 Principal occup	bation / Job title (See Instructions) Sales	10 Employer (See		
Date 10/6/2014	Full name of contributor Adlai Pennington Contributor address; City; State; Zip Code 150 S. Dick Price Rd Kennedale, Texa		Amount of contribution (\$) 3000	In-kind contribution description (if applicable) Gifts for Auction
			· · · · · · · · · · · · · · · · · · ·	l of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Food Service	Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributor Dout-of-state PAC(ID#_ Alan Petche Contributor address; City; State; Zip Code 3850 Bellaire Cir Fort Worth, Texa		Amount of contribution (\$) 2500	In-kind contribution description (if applicable) Gifts for Auction
Principal occup	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
Date 10/6/2014	Self Emp. Full name of contributor Barry Bondurant Contributor address; City; State; Zip Code 1305 E. Broad St Mansfield, Tex		Amount of contribution (\$) 145	In-kind contribution description (if applicable)
			(If travel outside	 of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Public Safety	Employer (See	Instructions)	
Date 10/6/2014Ent	Full name of contributor out-of-state PAC (ID#_ Bobby Duncan Contributor address; City; State; Zip Code 4621 S. Cooper Dr. Ste 101 Arlington		Amount of contribution (\$) 3000	In-kind contribution description (if applicable) Performance at Golf Tourney
Principal occu	pation / Job title (See Instructions)	Employer (See		C. LONG VOILING VOILOUND 1)
If c	Entertainer ATTACH ADDITIONAL COPIES (contributor is out-of-state PAC, please see inst			requirements. Revised 07/28/2014

	antruction 2 cup explains how to complete this for	m.	1 Total pages Sch	edule A:
² ELECTIONS	K PHILLIPS ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (Ethics Commission Filers)	
4 D ₽¥: 10/6/2014	 5 Full name of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 3000	8 In-kind contribution description (if applicable Golf Carts for Event
9 Principal occu	pation / Job title (See Instructions) 10 Sales	Employer (See I		of Texas, complete Schedule T)
Date 10/6/2014	Full name of contributor Dout-of-state PAC (ID# Bill Carlton Contributor address; City; State; Zip Code 4886 Kennedale New Hope Rd Fort Worth,		Amount of contribution (\$) 50	In-kind contribution description (if applicable
Principal occu	76140 , pation / Job title (See Instructions)	Employer (See li		f Texas, complete Schedule T)
• •	Self Emp.	· · ·		
Date 10/6/2014	Full name of contributor Dout-of-state PAC(ID# Blake Maddux Contributor address; City; State; Zip Code 1309 Maple Terrace Dr Mansfield, Texas	,	Amount of contribution (\$) 50	In-kind contribution description (if applicable
			(If travel outside d	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Self Emp.	Employer (See I	···· ·	
Date 10/6/2014	Full name of contributor 🔲 out-of-state PAC (ID# Bobby Duncan Contributor address; City; State; Zip Code 4621 S. Cooper Dr. Ste 101 Arlington, Tex	(as 76017)	Amount of contribution (\$) 60	In-kind contribution description (if applicable
			(If travel outside o	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Entertainer	Employer (See li	nstructions)	
Date 10/6/2014Sel	Full name of contributor)	Amount of contribution (\$) 1225	In-kind contribution description (if applicable
Drincing accord	pation / Job title (See Instructions)	Employer (Sec. 1)		of Texas, complete Schedule T)
rnncipal occu	Self Emp.	Employer (See I	nstrucuons)	

POLIFICAL CONTRIBUTIONS CANNER THAN PLEDGES OR LOANS SCHEDULE A 2015 JAN 20 PM 12: 58 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A: 0 ELECTIONS ADMINISTRATOR 3 ACCOUNT # (Ethics Commission Filers) CLINT C. BURGESS 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of In-kind contribution 8 contribution (\$) description (if applicable) **Bobby McCaslin** 10/6/2014 500 6 Contributor address; City; State; Zip Code 100 Mitchell Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Construction Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description (if applicable) Brian Borzowski 10/6/2014 Contributor address; City; State; Zip Code 400 2500 US Hwy 287 Mansfield, Texas 76063, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Brian Tecklenburg 10/6/2014 230 Contributor address; City; State; Zip Code 1603 Mallard Cir Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID# In-kind contribution Amount of Date contribution (\$) description (if applicable) Brison Bursey 10/6/2014 125 Contributor address; City; State; Zip Code 131 E. Exchange Ste 201 Fort Worth, Texas 76164 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Entertainer Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Christopher Garner 10/6/2014Sal 100 Contributor address; City; State; Zip Code 1718 Los Prados Trl Arlington, Texas 76006 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sales ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

OTHERRONAN PLEDGES OR LOANS SCHEDULE A The instruction Guide explains how to complete this form. 1 Total pages Schedule A: 10 FILE ELECTIONS ADMINISTRATOCLINT C. BURGESS ACCOUNT # (Ethics Commission Filers) 4 Date BY:___ 5-Full-name of contributor 7 Amount of In-kind contribution out-of-state PAC (ID#: 8 contribution (\$) description (if applicable) Chance Herndon 10/6/2014 550 6 Contributor address; City; State; Zip Code 1601 W. Jefferson Grand Prairie, Texas 75052 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Bail Bonds** Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description (if applicable) Charles Reading 10/6/2014 Contributor address; City; State; Zip Code 50 3421 Southern Hills Dr Arlington, Texas 76111, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor out-of-state PAC (ID#:______) Date Amount of In-kind contribution contribution (\$) description (if applicable) Cheree Lambright 10/6/2014 Contributor address; City; State; Zip Code 20 2762 Jordan Way Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Accountant Full name of contributor out-of-state PAC (ID#) In-kind contribution Date Amount of description (if applicable) contribution (\$) Chris Kahlmorgan 10/6/2014 Contributor address; City; State; Zip Code 50 402 Katie Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sales Full name of contributor out-of-state PAC (ID#: In-kind contribution Date Amount of contribution (\$) description (if applicable) David Crawford 10/6/2014Att Contributor address; City; State; Zip Code 300 PO Box 13430 Arlington, Texas 76014 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTAMANTAN RLEDGES OR LOANS SCHEDULE A 2015 JAN 20 PM 12: 58 explains how to complete this form. 1 Total pages Schedule A: И ELECTIONS ADMINISTRATOR CLINT C. BURGESS 3 ACCOUNT # (Ethics Commission Filers) 4 Date -5 Full name of contributor out-of-state PAC (ID# 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) Chuck Wilson 10/6/2014 50 6 Contributor address; City; State; Zip Code 1700 E. Broad St Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Banking Date Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Colby Hale 10/6/2014 City; State; Zip Code Contributor address; 525 1 Walnut Street, Ste 145 Cleburne, Texas 76033, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Congress Staff Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution Date contribution (\$) description (if applicable) Courtney Wilson 10/6/2014 Contributor address; City; State; Zip Code 500 1581 Hwy 157 Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sales In-kind contribution Full name of contributor out-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) **David Cates** 10/6/2014 220 Contributor address; City; State; Zip Code 1417 Main St Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. Full name of contributor In-kind contribution out-of-state PAC (ID# Amount of Date contribution (\$) description (if applicable) Ed Franklin 10/6/2014Sel 325 Contributor address; City; State; Zip Code 1339 Hwy 287 South Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Emp. ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements. Revised 07/28/2014 www.ethics.state.tx.us

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2 ELECTIONS	ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (Ethics Commission Filers)	
4 D B'	5_Full name of contributor out-of-state PAC (ID# David Perez)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/0/2014	6 Contributor address; City; State; Zip Code 1321 Heritage Pkwy Mansfield, Tex	xas 76063	190	
,			(If travel outside	i of Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions) Self Emp.	10 Employer (See	Instructions)	
Date	Full name of contributor Dout-of-state PAC (ID#) Debbie Koennecke)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		60	
	1700 E. Broad St Mansfield, Texas 7	6063,		
Principal occup	eation / Job title (See Instructions) Banking	Employer (See I		of Texas, complete Schedule T)
Date 10/6/2014	Full name of contributor Dout-of-state PAC (ID#_ Devin Pfluger)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/0/2014	Contributor address; City; State; Zip Code		305	1
	2500 US Hwy 287 Mansfield, Texa	s 76063		
Principal occup	ation / Job title (See Instructions) Sales	Employer (See I		of Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Don Taylor Contributor address; City; State; Zip Code		1500	Awards for Tourney
	1301 N. Main Mansfield, Texas	76063		l
Principal occup	eation / Job title (See Instructions) Self. Emp.	Employer (See		of Texas, complete Schedule T)
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014Stat	Hon. Bill Zedler Contributor address; City; State; Zip Code		150	Gifts for Golf Tourney
	5840 West Interstate 20 Suite #110 Arl 76017	ington, Texas		Door Prize
		r		of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) State Representative	Employer (See	Instructions)	
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ELECTIONS AL	HILLIPS MINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (E	Ethics Commission Filers)
4 BØate 10/6/2014	5 Full name of contributor out-of-state PAC (ID# Gene Honermann)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/0/2014	6 Contributor address; City; State; Zip Code 220 Wilshire Coppell, Texas 750	19	415	
9 Principal occup	ation / Job title (See Instructions) 10 Self Emp.	0 Employer (See I		of Texas, complete Schedule T)
Date	Full name of contributor D out-of-state PAC (ID#		Amount of	In-kind contribution
	Glenda Davis		contribution (\$)	description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		1500	Gifts for Golf Tourney Door Prize
	1071 Country Club Dr Ste. 101 Mansfield 76063 ,	, Texas	(If travel outside o	f Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Sales	Employer (See I	nstructions)	
Date	Full name of contributor Dout-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014	Glenda Davis		contribution (\$)	description (if applicable)
10/0/2011	Contributor address; City; State; Zip Code		370	
	1071 Country Club Dr Ste. 101 Mansfield, 7	Texas 70005	(If traval outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Sales	Employer (See I		or rexus, comprete centrative ()
Date	Full name of contributor Out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Hon. Bill Zedler Contributor address; City; State; Zip Code		250	
	5840 West Interstate 20 Suite #110 Arlin 76017	gton, Texas		
Principal occup	State Representative	Employer (See I		of Texas, complete Schedule T)
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014Sen	Hon. Jane Nelson		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code 1235 S. Main Street, Suite 280 Grapevine,	Texas 76051	100	Gifts for Golf Tourney Door Prize
	1			
Principal occur	ation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS SCHEDULE A 2015 JAN 20 PM 12: 58 anstruction Guide explains how to complete this form. 1 Total pages Schedule A: 14 ELECTIONS ADMINISTRATOR CLINT C. BURGESS 3 ACCOUNT # (Ethics Commission Filers) 4 Date :---5. Eull name of contributor out-of-state PAC (ID# 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) Hon. Carey Walker 10/6/2014 110 6 Contributor address; City; State; Zip Code 100 E. Weatherford Fort Worth, Texas 76196 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Tax Assessor Date Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Hon. Danny Baas 10/6/2014 Contributor address; City; State; Zip Code 100 1200 E. Broad St. Mansfield, Texas 76063, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See instructions) Employer (See Instructions) Public Safety Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Hon. David Woodruff 10/6/2014 Contributor address; City; State; Zip Code 50 100 E. Weatherford Fort Worth, Texas 76196 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Tax Assessor Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date description (if applicable) contribution (\$) Hon. Everett Young 10/6/2014 180 Contributor address; City; State; Zip Code 100 E. Weatherford Fort Worth, Texas 76196 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Tax Assessor Full name of contributor out-of-state PAC (ID#) Amount of In-kind contribution Date contribution (\$) description (if applicable) 10/6/2014Co Hon. Roger Williams 750 Contributor address; City; State; Zip Code 1 Walnut Street, Ste 145 Cleburne, Texas 76033 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Congress ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

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2 FILER NERA ELECTION	NK PHILLIPS S ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (Ethics Commission Filers)	
4 Date8Y:	5 out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/6/2014	Hon. Joe Barton			Gifts for Golf Tourney
10/0/2011	6 Contributor address; City; State; Zip Code		150	Door Prize
	PO Box 1444 Ennis, Texas 75	120		1
			(If travel outside	l of Texas, complete Schedule T)
9 Principal occuj	pation / Job title (See Instructions) Congress	10 Employer (See	Instructions)	
Date	Full name of contributor Dut-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Hon. Joe Barton			
10/0/2014	Contributor address; City; State; Zip Code		750	1
	PO Box 1444 Ennis, Texas 7512	1,		1
			(If travel outside	l of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Congress	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Hon. Judy Rupay			Gifts for Golf Tourney
	Contributor address; City; State; Zip Code	T T C C 1 1	1500	1
	1000 Ballpark Way Suite 300 Arlington,	Texas 76011		1
				of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Self Emp.	Employer (See	Insituctions)	
Date	Full name of contributor Out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Hon. Rodney Anderson			
	Contributor address; City; State; Zip Code		150	l
	548 Edgeview Dr Grand Prairie, Te	xas 75052		1
			(If travel outside	I of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) State Representative	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014Sel	James Cianelle			
	Contributor address; City; State; Zip Code		500	
	PO Box 1277 Mansfield, Texas	76063		
		· · · · · · · · · · · · · · · · · · ·	(If travel outside	i of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions) Self Emp.	Employer (See	Instructions)	
	Sen Emp.			
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2 FILER PRAN	(PHILLIPS ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 Β θγ: 10/6/2014	5 Full name of contributor □ out-of-state PAC (ID# Hon. Ron Wright 6 Contributor address; City; State; Zip Code	······································	7 Amount of contribution (\$) 120	8 In-kind contribution description (if applicable)
	100 E. Weatherford Fort Worth, Tex	as 76196	(If travel outside o	of Texas, complete Schedule T)
9 Principal occup	ation / Job title (See Instructions) Tax Assessor	10 Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
	5001 S. Cooper Street, Suite 212 Arlingt 76017,	ton, Texas		of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Attorney	Employer (See In		
Date 10/6/2014	Full name of contributor out-of-state PAC(ID# Hon. Wendy Burgess Contributor address; City; State; Zip Code 1581 Hwy 157 Mansfield, Texas		Amount of contribution (\$) 3500	In-kind contribution description (if applicable) Gifts for Golf Tourney Auctions
	1561 Hwy 157 Maistick, Texas	/0005	(If travel outside	 of Texas, complete Schedule T)
Principal occup	etion / Job title (See Instructions) City Councilman	Employer (See I		•
Date 10/6/2014	Full name of contributor Dut-of-state PAC (ID#) 	Amount of contribution (\$) 90	In-kind contribution description (if applicable)
Principal occup	nation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	Self Emp.			
Date 10/6/2014Sal	Full name of contributor dut-of-state PAC (ID#) Гехаs 75247	Amount of contribution (\$) 2000	In-kind contribution description (if applicable) Furniture for Door Prize
				 of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Sales	Employer (See I	nstructions)	
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2015	An 200 Bud2 axpains how to complete this	form.	1 Total pages Sch イブ	edule A: 7
2 FILER NAME ELEC	FRANK PHILLIPS TIONS ADMINISTRATORINT C. BURGESS		3 ACCOUNT # (E	ithics Commission Filers)
4 Date BY:_ 10/6/2014	5 Full name of contributor □ out-of-state PAC (ID# Jason Felps)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 2500 US Hwy 287 Mansfield, Texa	s 76063	600	
			· · · ·	of Texas, complete Schedule T)
9 Phncipal occu	Detion / Job title (See Instructions) Construction	10 Employer (See I	Instructions)	
Date	Full name of contributor 🔲 cut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code	••••••••••••••••••••••••••••••••••••••	575	
	2500 US Hwy 287 Mansfield, Texas	76063,		
				of Texas, complete Schedule T)
Principal occu	bation / Job title (See Instructions) Self Emp.	Employer (See I	nstructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amountof	In-kind contribution
10/6/2014	Jeff Alsabrook		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		1000	Gifts for Auction
	1831 East Broad St Mansfield, Tex	as 76063		
			(if travel outside	of Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions) Manager	Employer (See I		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of	In-kind contribution
10/6/2014	Jeff Gossett		contribution (\$)	description (if applicable)
10,0,2011	Contributor address; City; State; Zip Code		130	l
	2500 US Hwy 287 Mansfield, Texa	as 76063		
			(If travel outside	I of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Construction	Employer (See I	nstructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014Sel	Karen Tecklenburg		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		100	
	1603 Mallard Circle Mansfield, Tex	as 76063		
		Employee (Op		of Texas, complete Schedule T)
	pation / Job title (See Instructions) Self Emp.	Employer (See I	nstructions)	
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2 FILER NATIBANK PHILLIPS ELECTIONS ADMINISTRATORCLINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)	
4 Date BY: 10/6/2014	5 Full name of contributor out-of-state PAC (ID# John Bednar			8 In-kind contribution description (if applicable)
10/0/2011	6 Contributor address; City; State; Zip Code 7025 Cabot Estates Drive Mansfield, T	exas 76063	350	
			(If travel outside	l of Texas, complete Schedule T)
9 Principal occup	petion / Job title (See instructions) Sales	10 Employer (See I	nstructions)	
Date	Full name of contributor Dout-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		1500	
	5 Calloway Ct Mansfield, Texas 760	63,	ĺ	
			(If travel outside o	of Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions) Construction	Employer (See I	nstructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014	Justin Frazell		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		10000	M/C Guitars and Auc- tion Gifts
	115 W. 3rd St Fort Worth, Texas 7	6102		
			(If travel outside	I of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Entertainer	Employer (See I	nstructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014	Justin Frazell		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		55	
	115 W. 3rd St Fort Worth, Texas	76102		
				of Taylog, complete Schoolule Th
Principal occup	pation / Job title (See Instructions) Entertainer	Employer (See I	and the second	of Texas, complete Schedule T)
Date	Full name of contributor out-of-state PAC (ID#		Amount of	In-kind contribution
10/6/2014Ba	Lance Walker	/	contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		750	
	1700 E. Broad St Mansfield, Texas	76063		
	1700 D. Droud St Munistrend, Texus	/0005		
				of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Banking	Employer (See I	nstructions)	
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² ELECTIONS	A PHILLIPS ADMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 D&¥: 10/6/2014	5 Full name of contributor out-of-state PAC (ID# Kenton Waldron)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Signs for Tournament
	6 Contributor address; City; State; Zip Code 208 East Irving Blvd Irving, Texas	s 75060	2000	
9 Principal occup	eation / Job title (See Instructions) Self Emp.	10 Employer (See		of Texas, complete Schedule T)
Date	Full name of contributor D cut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		1 80	
	PO Box 16322 Arlington, Texas 76	111 ,	(If travel outside	of Texas, complete Schedule T)
Principal occup	oation / Job title (See Instructions) Self Emp.	Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributorout-of-state PAC (ID# Kevin Johnson)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/0/2011	Contributor address; City; State; Zip Code 1200 E. Broad St. Mansfield, Texa	s 76063	150	
	1200 E. Divad St. Mansheld, Texa		(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions) Public Safety	Employer (See I	nsituations)	
Date 10/6/2014	Full name of contributor Dout-of-state PAC (D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2500 US Hwy 287 Mansfield, Tex	as 76063	80	
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Sales	Employer (See	Instructions)	
Date 10/6/2014Sal	Full name of contributor Dout-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 2500 US Hwy 287 Mansfield, Texa		60	1
	2500 05 11wy 207 Wandherd, 10A		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Sales	Employer (See	Instructions)	
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2 FILER ELECT	TRANK PHILLIPS TIONS ADMINISTRACIONT C. BURGESS			thics Commission Filers)
4 Date BY: 10/6/2014	 5 Full name of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 2000	8 In-kind contribution description (if applicable)
		·	(If travel outside	l of Texas, complete Schedule T)
9 Principal occup	ation / Job title (See Instructions) Contractor	10 Employer (See I	Instructions)	······································
Date 10/6/2014	Full name of contributor into out-of-state PAC (ID#		Amount of contribution (\$) 150	In-kind contribution description (if applicable)
	1421 Danbury Mansfield, Texas 76	063,	(If travel outside o	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Realtor	Employer (See I		
Date 10/6/2014	Full name of contributor Dout-of-state PAC(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code PO Box 18112 Fort Worth , Texa	s 76119	55	
			(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Sales	Employer (See I	nsiructions)	
Date 10/6/2014	Full name of contributor Dut-of-state PAC (ID#_ Martha Able)	Amount of contribution (\$)	In-kind contribution description (if applicable) Puppy for Auction
	Contributor address; City; State; Zip Code 12750 Rendon Rd Fort Worth , Te:	xas 76140	3000	
Principal occup	ation / Job title (See Instructions) Self Emp.	Employer (See I		of Texas, complete Schedule T)
Date 10/6/2014Pub	Full name of contributorout-of-state PAC (ID# Melissa Twedell Contributor address; City; State; Zip Code) 	Amount of contribution (\$) 60	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 904 Collier St. Fort Worth, Texas	s 76102		। of Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions) Public Safety	Employer (See		
if c	ATTACH ADDITIONAL COPIES C ontributor is out-of-state PAC, please see instr			requirements.
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	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	S		SCHEDULE A
2015.	AN 20 tion in the grade solution of the second seco	form.	1 Total pages Sch	edule A:
2 FILER NAVER	ANK PHILLIPS NS ADMINISTRATOR LINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 Date BY: 10/6/2014	 5 Full name of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 1000	8 In-kind contribution description (if applicable) Auction Host
			(If travel outside	of Texas, complete Schedule T)
9 Principal occup	Auctioneer	10 Employer (See in	nstructions)	
Date 10/6/2014	Full name of contributor 🔲 out-of-state PAC (D#		Amount of contribution (\$) 2000	In-kind contribution description (if applicable) Hole-In-One Sponsor Insurance
			(If travel outside o	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions) Auto Dealer	Employer (See Ir		
Date	Full name of contributor Uout-of-state PAC (ID#)	Amount of	In-kind contribution
10/6/2014	Matt Wayne		contribution (\$)	description (if applicable)
10/0/2011	Contributor address; City; State; Zip Code	76164	2000	Performance at Golf Tourney
	131 E. Exchange Ste 201 Fort Worth, T	exas /0104	(If travel outside	of Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions) Entertainer	Employer (See Ir		
Date	Full name of contributor 🔲 out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution
10/6/2014	Matt Wayne Contributor address; City; State; Zip Code		350	description (if applicable)
	131 E. Exchange Ste 201 Fort Worth, T	Fexas 76164		
			(If travel outside of	of Texas, complete Schedule T)
Principal occup	oation / Job title (See Instructions) Musician	Employer (See Ir	nstructions)	
Date 10/6/2014Ret	Full name of contributor out-of-state PAC(ID# Mike Leyman Contributor address; City; State; Zip Code 808 Turnberry Mansfield, Texas 7) 	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
			(If travel outside	l of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Retired	Employer (See Ir	nstructions)	
lf c	ATTACH ADDITIONAL COPIES OF ontributor is out-of-state PAC, please see instru			rəquirəmənts.

	CAL CONTRIBUTIONS	IS		SCHEDULE A
2015 JAN 2010 Paulos 50 Jains how to complete this form.		1 Total pages Schedule A:		
2 FILER NAME	RANK PHILLIPS DNS ADMINISTRATORLINT C. BURGESS		3 ACCOUNT # (E	ithics Commission Filers)
4 Date BY:	5 Full name of contributor □ out-of-state PAC (ID# Michael Barks)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/0/2011	6 Contributor address; City; State; Zip Code 1007 Terrell Ave Fort Worth, Texas	5 76104	250	
			(If travel outside	of Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions) Retired Army	10 Employer (See I		
Date	Full name of contributor Dout-of-state PAC (ID# Michael Neal)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		3750	
	PO Box 89 Mansfield, Texas 7606	3,		
	pation / Job title (See Instructions)	Employer (See li		of Texas, complete Schedule T)
Principal occup	Self Emp.		nau dedonia)	
Date	Full name of contributor Dout-of-state PAC(ID#)	Amount of	In-kind contribution
10/6/2014	Michael Smith		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code		80	
	2500 US Hwy 287 Mansfield, Texas	s 76063		
			(if travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Sales	Employer (See li		
Date	Full name of contributor Dut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Mike Gerro Contributor address; City; State; Zip Code		500	
	3801 Matlock Rd Arlington, Texa	s 76016		
				of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Banker	Employer (See I	nstructions)	
Date	Full name of contributor U out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014Plu	Ray Hammer			Plumbing Certificate
	Contributor address; City; State; Zip Code		1500	
	1904 Clover Hill Mansfield, Texas	s 76063		
			(If travel outside	of Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions) Plumbing	Employer (See I		
lf c	ATTACH ADDITIONAL COPIES OF ontributor is out-of-state PAC, please see instru			requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS SCHEDULE A 2015 JAN 20 PM 12: 59 The Instruction Solide explains how to complete this form. 1 Total pages Schedule A: ELECTIONS ADMINISTRATOR ACCOUNT # (Ethics Commission Filers) CLINT C. BURGESS 4 Bain 5. Full name of contributor out-of-state PAC (ID#: 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) Mojy Haddad 10/6/2014 City; State; Zip Code 750 6 Contributor address; 2500 NE Green Oaks Blvd Ste 200 Arlington, Texas 76006 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Architect Date Full name of contributor out-of-state PAC (ID#; Amount of In-kind contribution contribution (\$) description (if applicable) Paul Costo 10/6/2014 City; State; Zip Code Contributor address; 70 PO Box 89 Mansfield, Texas 76063, (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Self Emp. Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Amount of In-kind contribution Date contribution (\$) description (if applicable) Randy Hamilton 10/6/2014 Contributor address; City; State; Zip Code 1000 1759 Broad Park Circle S. Suite 205 Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Dentist Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) 10/6/2014 Randy Margo 960 City; State; Zip Code Contributor address; PO Box 13430 Arlington, Texas 76094 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Full name of contributor Date out-of-state PAC (ID#. Amount of In-kind contribution description (if applicable) contribution (\$) Sandi Carroll 10/6/2014Sel 8400 Contributor address; City; State; Zip Code 1339 Hwy 287 South Mansfield, Texas 76063 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
2015 JAN 20	nsfittion 591de explains how to complete this	form.	1 Total pages Sch み件	edule A:
2 FILERRANK	PHILLIPS DMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 894. 10/6/2014	 5 Full name of contributorout-of-state PAC (ID# Reggie Parsons 6 Contributor address; City; State; Zip Code 3330 Redstone Arlington, Texas 		7 Amount of contribution (\$) 50	8 In-kind contribution description (if applicable)
			(if travel outside)	 of Texas, complete Schedule T)
9 Principal occup	eation / Job title (See Instructions) Self Emp.	10 Employer (See I		
Date 10/6/2014	Full name of contributor out-of-state PAC (ID#		Amount of contribution (\$) 10000	In-kind contribution description (if applicable) 3 Gifts for Auction Item
			(If travel outside o	i of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Self Emp.	Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributor Dout-of-state PAC(ID#	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$) 1900	In-kind contribution description (if applicable)
	1339 Hwy 287 South Mansfield, Te	exas 76063		
Drin sin sl. s.s.s.v	pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
Principal occu	Self		(isinal de liens)	
Date 10/6/2014	Full name of contributor out-of-state PAC (ID#	xas 76063	Amount of contribution (\$) 170	In-kind contribution description (if applicable)
			(if travel outside	of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Construction	Employer (See I		
Date 10/6/2014Sal	Full name of contributor out-of-state PAC (ID#	/6097	Amount of contribution (\$) 80	In-kind contribution description (if applicable)
Principal occur	L pation / Job title (See Instructions)	Employer (See I		or revea, complete contechne i)
	Sales			
lf c	ATTACH ADDITIONAL COPIES C contributor is out-of-state PAC, please see instr			requirements.

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	CAL CONTRIBUTIONS	NS		SCHEDULE A
	mstruction Guize 59 lains how to complete this	s form.	1 Total pages Sch	edule A: 25
2 FILER NAME	RANK PHILLIPS ONS ADMINISTRATORLINT C. BURGESS		3 ACCOUNT # (E	ithics Commission Filers)
4 Date BY: 10/6/2014	 5 Full name of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 10000	8 In-kind contribution description (if applicable) Private Performance & Auction Gifts
			(If travel outside	l of Texas, complete Schedule T)
9 Principal occup	etion / Job title (See Instructions) Entertainer	10 Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributor Dut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	1200 E. Broad St. Mansfield, Texas 7	76063,	(If travel outside a	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions) Public Safety	Employer (See I		
Date 10/6/2014	Full name of contributor Dout-of-state PAC(ID#		Amount of contribution (\$) 3500	In-kind contribution description (if applicable) Performance at Golf Tourney
			(If travel outside	of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Entertainer	Employer (See I	nstructions)	
Date 10/6/2014	Full name of contributor Dut-of-state PAC (D#		Amount of contribution (\$) 160	In-kind contribution description (if applicable)
			(If travel outside	of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Mortgage	Employer (See I	nstructions)	
Date 10/6/2014Co	Full name of contributor Dout-of-state PAC (ID#_ Tony Meehan Contributor address; City; State; Zip Code 2151 N Holland Dr Mansfield, Tex		Amount of contribution (\$) 3300	In-kind contribution description (if applicable)
Principal occup	pation / Job title (See Instructions) Construction	Employer (See I		of Texas, complete Schedule T)
lf c	ATTACH ADDITIONAL COPIES (contributor is out-of-state PAC, please see instr			requirements.

POLITICAL CONTRIBUTIONS OTHERRITHE OF LOANS

SCHEDULE A

2015	JAN 20 PM 12: 59 Instruction Golde explains how to complete this	form.	1 Total pages Sch	
2 FILERELAND	RANK PHILLIPS IONS ADMINISTRATOR INT C. BURGESS	<u> </u>		thics Commission Filers)
4 Date BY: 10/6/2014	 5 Full neme of contributor □ out-of-state PAC (ID#		7 Amount of contribution (\$) 80	8 In-kind contribution description (if applicable)
			(If travel extended	of Texas, complete Schedule T)
9 Principal occup	etion / Job title (See Instructions) Fire Safety	10 Employer (See		or locas, complete occidate ()
Date	Full name of contributor out-of-state PAC (ID#_)	Amount of	In-kind contribution
10/6/2014	Stoney Crump Contributor address; City; State; Zip Code		contribution (\$)	description (if applicable)
	1339 Hwy 287 South Mansfield, Texas	s 76063		
		·	(If travel outside)	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See i		
	Construction			T
Date	Full name of contributor Dout-of-state PAC(ID#_ Todd McGarity)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014			160	1
	Contributor address; City; State; Zip Code	7(0(2	100	
	1339 Hwy 287 South Mansfield, T	exas /6063		
			(If travel outside	of Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions) Construction	Employer (See	Instructions)	
Date	Full name of contributor Out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Tony Tinderholt Contributor address; City; State; Zip Code		150	
	2500 US Hwy 287 Mansfield, Te	xas 76063		1
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		or lovas, complete outputte 1)
	Roofer			
Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code			
				1
Principal occur	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
, incipal occu				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULEAS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.				

	CAL CONTRIBUTIONS	NS		SCHEDULE A
2015 JAN 20	nstruction 50 de explains how to complete this	s form.	1 Total pages Sch 2つ	
2 FILERRANKE	PHILLIPS DMINISTRATOR CLINT C. BURGESS		3 ACCOUNT # (E	thics Commission Filers)
4 Byte 10/6/2014	5 Full name of contributor out-of-state PAC (ID# Travis James)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 2500 US Hwy 287 Mansfield, Texa	as 76063	140	
				of Texas, complete Schedule T)
9 Phncipal occup	ation / Job title (See Instructions) Roofer	10 Employer (See I	nstructions)	
Date	Full name of contributor Dut-of-state PAC (ID# Travis Inge)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/6/2014	Contributor address; City; State; Zip Code		700	
	P.O. Box 13296 Arlington, Texas 7	6094 ,		f Tavara according Calendula T)
Principal occup	pation / Job title (See Instructions) Sales	Employer (See I		of Texas, complete Schedule T)
Date 10/14/2014	Full name of contributor Dout-of-state PAC (ID# Brian Adkinson)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/2014	Contributor address; City; State; Zip Code		760	
	1000 N. Walnut Creek Mansfield, 7	Texas 76064		
			(If travel outside	of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Banking	Employer (See I	nsiructions)	
Date	Full name of contributor Dut-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/30/2014	Fort Worth Police Officers Assi Contributor address; City; State; Zip Code	n. PAC	1000	
	904 Collier St. Fort Worth, Texa	as 76102		
				of Texas, complete Schedule T)
Principal occup	Fort Worth Police	Employer (See I	nstructions)	
Date	Full name of contributor [] out-of-state PAC (ID#] HONI LARRY Br	oseh	Amount of contribution (\$)	In-kind contribution description (if applicable)
9/4/14	Contributor address; City; State; Zip Code 名えつ ららけん Ave		750	
	Mansfield TX76	063	(If travel outside	of Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions) Contractor	Employer (See I	nstructions)	
lf c	ATTACH ADDITIONAL COPIES C ontributor is out-of-state PAC, please see instr			requirements.

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POLITICAL	EXPENDITURES			TARRANT COUNTY
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Legal Services Soli Food/Beverage Expense Tra Polling Expense Tra	aries/Wages/Con icitation/Fundrais vel In District vel Out Of Distri ice Overhead/Re	tract Labor ing Expense ct ntal Expense	Loan Repayment/Reimbursement Transportation For internet & Related Expense Contribution of Contribution of the Strategy of the ATAP Candidate/OfficeholderPolitical Committee OTHER (anter a category not listed above)
1 Total pages Schedule F:	2 FILER NAME			3 ACCOUNT # (Ethics Commission Filers)
1-6	CLINT C. BURC	GESS		
4 Date	5 Payeename	0.	D. 11.	
7/30/2014	7 Proves addresses		Daddy	· · · · · · · · · · · · · · · · · · ·
6 Amount (\$)	7 Payee address; City; State;	Zip Code		
12.99	14455 N.	Hayden Rd	Scottsdale, A	rizona 85260 ,
8 PURPOSE	(a) Category (See categories listed at the top of this	s schedule)	(b) Description	(If travel outside of Texas, complete Schedule T)
	Advertisment Expense		—	Monthly Service Fee
	Candidate / Officeholder name		Office sough	ustin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C			Office sough	
Date	Payee name			
8/2/2014		Fire Arms	s of Fort Wor	th
Amount (\$)	Payee address; City; State;	Zip Code		
3186.44	4886 Kenne	edale New H	ope Rd Fort V	Worth, TX 76140
PURPOSE	Category (See categories listed at the top of this	s schedule)		(If travel outside of Texas, complete Schedule T) cems for TCGOP Lincoln Day Dinner
EXPENDITURE	Donation Expense		_	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name H		Office sought	t Office held
Date	Payee name			
8/30/2014		G	o Daddy	
Amount (\$)	Payee address; City; State;	Zip Code		
12.99	14455 N	N. Hayden Ro	d Scottsdale, A	Arizona 85260
PURPOSE	Category (See categories listed at the top of this	s schedule)	Description	(If travel outside of Texas, complete Schedule T) Monthly Service Fee
OF EXPENDITURE	Advertisment Expense	;	Check if A	wstin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name H		Office sough	t Office held
Date	Payee name			
9/18/2014		Walnut Cre	ek Country C	Club
Amount (\$)	Payee address; City; State;	Zip Code		
2500.00	1152 Co	ountry Club	Dr, Mansfield	, Texas 76063
PURPOSE	Category (See categories listed at the top of thi	s schedule)		(If travel outside of Texas, complete Schedule T)
	Event Expense		_	f Tournament Deposit Expense wstin, TX, officeholder IMng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name		Office sought	
······································	ATTACH ADDITIONAL COPI	ESOFTHISS	CHEDULEASI	NEEDED

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POLITICAL	EXPENDITURES			SCHEDULE F TARRANT COUNT
	EXPENDITURE	CATEGORIES	FOR BOX 8(a)	2015 1111 0.0
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	Salaries/Wages/Cd Solicitation/Fundra Travel In District Travel Out Of Dist Office Overhead/F	ising Expense rict	2015 JAN 20 PM I: Transportation Equipment & Related Expense Contributions/Donations/Medi/69/11/LLIPS Candidate CITE O TIGN Solition Control OTHER (enter a category not listed above)
	The Instruction Guide	e explains how to	complete this for	m. BY:
1 Total pages Schedule F: 2-6	2 FILER NAME CLINT C. B	URGESS		3 ACCOUNT # (Ethics Commission Filers
4 Date	5 Payee name			
9/30/2014		G	o Daddy	
6 Amount (\$)	7 Payee address; City; St	tate; Zip Code		
35	1445	5 N. Hayden Ro	l Scottsdale, Ai	rizona 85260 ,
8 PURPOSE	(a) Category (See categories listed at the to	p of this schedule)	(b) Description	(If travel outside of Texas, complete Schedule T)
				Monthly Service Fee
	Advertisment Expe	ense	Check if Au	ustin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name OH))	Office sought	t Office held
Date	Payee name			
10/3/2014			Walmart	
Amount (\$)	Payee address; City; S	tate; Zip Code		
508.72	93	0 N Walnut Cre	ek Mansfield,	, Texas 76063
PURPOSE	Category (See categories listed at the to	p of this schedule)	Description ((If travel outside of Texas, complete Schedule T) Golf balls for golfers
EXPENDITURE	Event Expense	e	Check if Au	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	•	Office sought	t Office held
Datə	Payee name			
10/4/2014		Last	Supper BBQ	
Amount (\$)	Payee address; City; St	ate; Zip Code		
350		PO Box 15455	Fort Worth, Te	exas 76119
	Category (See categories listed at the to	n of this schedule)	Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF				Lunch for golfers
EXPENDITURE	Event Expens	e	Check if A	ustin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	•	Office sough	t Office held
Date	Payee name			n
10/6/2014		Bi	ian Olson	
Amount (\$)	Payee address; City; S	tate; Zip Code	THE WANNES	
1000		PO Box 247 K	ennedale , Tex	xas 76060
PURPOSE	Category (See categories listed at the to	op of this schedule)	Description	(If travel outside of Texas, complete Schedule T)
OF	Event Expense	۲.		Lights & Sound Rental at Tourney
Complete <u>ONLY</u> if direct expenditure to benefit C	Candidate / Officeholder name		Office sought	t Office held
	ATTACH ADDITIONAL C	OPIES OF THIS	SCHEDULEASI	NEEDED

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POLITICAL	EXPENDITURES	FIL SCHEDULE F TARRANT COUNTY	
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundra Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/F	ontract Labor tising Expense trict trict Rental Expense Challen Repayment/Reimbursement Transported action of Rental Repayment Transported action of Rental Repayment Transported action of Rental Repayment Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)	
	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F: 3-6	2 FILER NAME CLINT C. BURGESS 3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name		
10/6/2014	Police/ S	ecurity at Event	
6 Amount (\$)	7 Payee address; City; State; Zip Code		
370	1200 E. Broad St. Mansfield, Texas 76063,		
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Event Expense	Police for Security at Event	
		Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held	
Date	Payee name		
10/6/2014	Worke	ers at Tounrey	
Amount (\$)	Payee address; City; State; Zip Code		
1000	1152 Country Club Dr Mansfield, Texas 76063		
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Event Expense	Volunteers at Tourney Check If Austin, TX, officeholder living expense	
Complete <u>QNLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held	
Date	Payes name		
10/6/2014	Τε	ylor Rental	
Amount (\$)	Payee address; City; State; Zip Code		
319.079	220 University Dr Fort Worth, Texas 76107		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF	Event Expense	Rental - Stage Etc.	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held	
Date	Payee name		
10/7/2014	Fairfield by Marriott Mansfield		
Amount (\$)	Payee address; City; State; Zip Code		
118.33	1480 Hwy 287 N Mansfield, Texas 76063		
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Event Expense	Musicians rooms playing at Tourney Check If Austin, TX, officeholder IMng expense	
Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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POLITICAL	EXPENDITURES			FSCHEDULE F TARRANT COUNTY
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense The Instruction Guid	E CATEGORIES Fe Salaries/Wages/Cont Solicitation/Fundraisi Travel In District Travel Out Of Distric Office Overhead/Rer le explains how to co	ract Labor L ng Expense T C t tal Expense O	2015 JAN 20 PM 2: 00 oan Repayment/Reimbursement ransportation supportions Made By Candidate Officenolder Political Contractice Candidate Officenolder Political Contractice DTHER (enter a category not listed above) BY:
1 Total pages Schedule F: 4-6	2 FILER NAME CLINT C. B	URGESS		3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/10/2014	5 Payee name Target Time			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
1498	5650 FM 1187 Fort Worth, Texas 76140,			
8 PURPOSE OF	(a) Category (See categories listed at the to	op of this schedule)		travel outside of Texas, complete Schedule T)
EXPENDITURE	Gift (Auction) Exp	ense		tion Item for Tournament
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Office sough		Office sought	Office held
Date	Payee name	~		
10/11/2014	Jim Frank			
Amount (\$)	Payee address; City; S	tate; Zip Code		
2100	9200	0 John W Carpente	er Fwy Dallas,	Texas 75247
PURPOSE OF	Category (See categories listed at the to		Description (If	travel outside of Texas, complete Schedule T) Items for Auction
EXPENDITURE	Event Expense	8	Check if Aus	tin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name)H	•	Office sought	Office held
Date	Payee name		· · · · · · · · · · · · · · · · · · ·	
10/15/2014	Greg Abbott			
Amount (\$)	Payee address; City; State; Zip Code			
250	504 Lavaca St Austin, TX 76063			
PURPOSE	Category (See categories listed at the to	op of this schedule)	Description (If	travel outside of Texas, complete Schedule T) Contribution
OF EXPENDITURE	Contribution Exp	oense	Check if Aus	tin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH		Office sought	Office held
Date	Payee name	·····		
<u>10/16/2014</u> Amount (\$)	Bayes address Other		a Guitars	
	Payee address; City; Si	tate; Zip Code		
1217.63	1923 Bomar Ave Fort Worth, Texas 76103			
PURPOSE	Category (See categories listed at the to	op of this schedule)		travel outside of Texas, complete Schedule T) itars for Golf Tournament
	Gift (Auction) Exp	bense		tin, TX, officeholder iMng expense
Complete <u>ONLY</u> if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

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Austin, Texas 78711-2070

POLITICAL	EXPENDITURES	FILESCHEDULE F TARRANT COUNTY		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundi Food/Beverage Expense Travel In District Polling Expense Travel Out Of Di Printing Expense Office Overhead	Contract Labor Loan Repayment/Reimbursement raising Expense Transportation Equipment appelated Expense Contributing Don stons Date By OR strict LL Landidate/Officeholder/Political Committee (Rental Expense OTHER (enter a category not listed above)		
	The Instruction Guide explains how to	complete this formBY:		
1 Total pages Schedule F: 5-6	2 FILER NAME CLINT C. BURGESS 3 ACCOUNT # (Ethics Commission Filers)			
4 Date	5 Payee name			
10/16/2014	Ν	Aatt Hayes		
6 Amount (\$)	7 Payee address; City; State; Zip Code			
350	1100 E Broad St Mansfield, TX 76063,			
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)		
	Contribution Expense	Contribution		
		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
10/16/2014		Matt Hayes		
Amount (\$)	Payee address; City; State; Zip Code			
1000	1100 E Broad St Mansfield, TX 76063			
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Donation item for fundraiser		
EXPENDITURE	Donation Expense	Check If Austin, TX, officeholder IMing expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held			
Date	Payee name			
10/17/2014		Creek Country Club		
Amount (\$)	Payee address; City; State; Zip Code			
14084.040	1151 Country Club Dr Mansfield, Texas 76063			
	Category (See categories listed at the top of this schedule)	Description (Iftravel outside of Texas, complete Schedule T)		
PURPOSE OF EXPENDITURE	Event Expense	Golf Tournament Course/Dinner Expense Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held		
Date	Payee name			
10/30/2014	Go Daddy			
Amount (\$)	Payee address; City; State; Zip Code			
12.99	14455 N. Hayden Rd Scottsdale, Arizona 85260			
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
OF	Advertisment Expense	Monthly Service Fee Check If Austin, TX, officeholder IMng expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought Office held		
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(512) 463-5800

POLITICAL	EXPENDITURES	FILED SCHEDULE F TARRANT COUNTY		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/C Legal Services Solicitation/Fundr Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead/ The Instruction Guide explains how to	contract Labor Loan Repayment/Reimbursement aising Expense Trace Addition Equipment & Related Expense ELECPHINGTON Constants Adde By Candidate/Officendide/Political Committee Rental Expense OTHER (enter a category not listed above)		
4.7		complete this form.		
1 Total pages Schedule F: G-G	2 FILER NAME CLINT C. BURGESS	3 ACCOUNT # (Ethics Commission Filers)		
4 Date	5 Payee name			
11/30/2014	Go Daddy			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
12.99	14455 N. Hayden Rd Scottsdale, Arizona 85260,			
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)		
		Monthly Service Fee		
	Advertisment Expense	Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name 0H	Office sought Office held		
Date	Payee name			
12/30/2014		Go Daddy		
Amount (\$)	Payee address; City; State; Zip Code			
12.99	14455 N. Hayden Rd Scottsdale, Arizona 85260			
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
	Advertisment Expense	Monthly Service Fee Check If Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held		
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
PURPOSE	Category (See categories listed at the top of this schedule)	Description (Iftravel outside of Texas, complete Schedule T)		
EXPENDITURE		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name DH	Office sought Office held		
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code	2		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Check If Austin, TX, officeholder IMing expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name 0H	Office sought Office held		
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Constrable Clint Burgess

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2700 Premier St Fort Worth TX 76/11



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