# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR FIRST  Mr Grover  NICKNAME LAST  GAYY Fickes	MI G suffix	Date Received
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ANNOESS / DO BOY- APT / SHITE #- C	RITV- STATE- ZIP CONE	Santon Segment
Change of Address  5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	\
OFFICEHOLDER PHONE			Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST John	MI /.	Receipt # Amount \$
NAME	NICKNAME LAST	SUFFIX	Date Processed
	ENDANCS		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SL	UITE #; CITY; STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 30th day before el	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day before ele	ection Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year 7 / 1 / 15	THROUGH 12 /	Day Year / 15
11 ELECTION	ELECTION DATE  Month Day Year Primary  General	ELECTION TYPE  Runoff Other Description  Special	
12 OFFICE	OFFICE HELD (If any) County Commissioner Prochet 3	13 OFFICE SOUGHT (if known	)
	<b>GO TO</b>	PAGE 2	, -

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# TARRANT COUNTY FORM C/OH COVER SHEET PG 2 2016 JAN -8 AMIO: 10

14 C/OH NAME Mr Grover G.	" Gran " Field	15 File FRANK PHILLIPS	r 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						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
Additional Pages								
-		COMMITTEE CAMPAIGN TREASURER ADDRESS						
17 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN SS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$					
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  \$ 2						
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS,	\$					
	4. TOTAL	4. TOTAL POLITICAL EXPENDITURES \$						
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$ 38,732.58					
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$					
Notar	RESA C. PARSON by Public, State of Ter Commission Expired February 6, 2018	under Title 15, Election Code	on required to be reported by me					
AFFIX NOTARY STAM	P/SEALABOVE							
Sworn to and subse	rihed before me	by the said Grover f. Fickes	, this the <b>8</b>					
day of		to certify which, witness my hand and seal of office.	_, uns une <b>q</b>					
day of Consulty		which, whites my hand and seal of office.	1,					
Therea	C. Larson	a Theresa C. Horsons	Natary					
Signature of officer a	administering oath	Printed name of officer administering oath Ti	tle of officer administering oath					

### SUBTOTALS - C/OH

	SUB	TOTALS - C/OH	FILED TARRANT COUNTY COVER: 2016 JAN -8 AM 10: 10		RM C/OH EET PG 3
19	Mr.	Grover G. "Gary" Fickes	FRAKK PHILLIPS ELECTIONS ADMINISTRATOR	ommis	sion Filers)
21		ULE SUBTOTALS OF SCHEDULE	BY:		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBU	TIONS	\$	23, 200.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITIC	CALCONTRIBUTIONS	\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES MAD	E FROM POLITICAL CONTRIBUTIONS	\$	13,992.80
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS M	ADE FROM POLITICAL CONTRIBUTIONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CRED	IT CARD	\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES MADE	FROM PERSONAL FUNDS	\$	2,934.52
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL	CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MA	DE FROM POLITICAL CONTRIBUTIONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFURENT OF FILER	INDS, AND CONTRIBUTIONS	\$	

MONE	TARY POLITICAL CONTRIBUTIONS RRAN	
		·8 AM 10: 10
	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: PHILA 1931 DMINISTRATOR
Mr. Grove	er G. "Grany" Fickes  BY:	3 Filer ID (Ethics Commission Filers)
8/4/15	5 Full name of contributor	7 Amount of contribution (\$)
8/6/13	6 Contributor address; City; State; Zip Code Grapewine, Texas 72051	1,000.00
Principal occu	ipation / Job title (See Instructions)  9 Employer (See Instructions)	ions)
Date	Full, name of contributor	Amount of contribution (\$)
8/4/15	John Lynch  Contributor address; City: State; Zip Code  5301 Mirmmar Lane Colleguille, Texas 76034	750.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ons)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
8/4/15	Contributor address; City; State; Zip Code 3950 1kuy 310 Supering Tens 76091	750.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ons)
Date / /	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
8/2/15	Full name of contributor   out-of-state PAC (ID#:)  Randal L. Dean  Contributor address; City; State; Zip Code  201 Main Street Fort Work, Texas 76102	250.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ons)

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Mr. Grove	r G. "Gary" Fickes	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	7 Amount of contribution (\$) 500.00
014114	P.O. Box 121434 Acting tow, lexas 76012	300.00
8 Principal occu	spation / Job title (See Instructions)  9 Employer (See In	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
8/7/15	Contributor address; City; State; Zip Code 201 MAN Street Fort Worth, Toops 72102	2,500.00
Principal occup	pation / Job title (See Instructions) Employer (See In	structions)
Date	Full name of contributor Sout-of-state PAC (ID#: COO2150 44  FMR LL Political Action Compiles State Federal  Fidelity PAC 4 Multi credity PAC  Contributor address; City; State; Zip Code  200 Saspar Blvd, V9B Bosian, Ma. 01210	Amount of contribution (\$)
8112/15	Contributor address; City: State; Zip Code  200 Support Blvd, V9B Buston, Ma. 012/0	1,000.00
Principal occu	pation / Job title (See Instructions) Employer (See In	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	
11/19/15	Contributor address; City; State; Zip Code P.O. Box 95104 Grapevial, Toxas 72099	100.00
Principal occu	pation / Job title (See Instructions) Employer (See In	nstructions)
		:\8
	29 <b>9014</b> 913	ERECTIONS ADMINIS
	10: 13	MA 8- NAC 310S
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE. If contributor is out-of-state PAC, please see instruction guide for addit	SNEEDED UN VI

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	6. "Gary" Fickes	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Sharew Wilson	7 Amount of contribution (\$)
เปเชโเร	6 Contributor address; City; State; Zip Code P.O. Box 282 Fort Worth, Texas 74101	250.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	ctions)
Date	Full name of contributor   out-of-state PAC (ID#:)	Amount of contribution (\$)
12)1/15	Bell Helicopter PAC  Contributor address; City; State; Zip Code  P.O. Box 482 Fort Worth, Exas 74 10 1	250.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	otions)
Date	Full name of contributor	Amount of contribution (\$)
12/1/15	Contributor address; City; State; Zip Code 1815 Par Kwood Drive Grapevine, Texas 76051	150.00
Principal occup	coation / Job title (See Instructions) Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
12/9/15	Contributor address; City; State; Zip Code P.O. Box 1222 Euless, Texas 72039	500.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
		·
	R01A2	ERANK PHILLIPS RELECTIONS ADMINISTR
	: 13	OIMA 8- HAL 310S
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additional	

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 40611 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mr. Grover G. "Gary Fickes 7 Amount of contribution (\$) 500.00 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Steven A. Mundf 12/9/15 Contributor address; 124 Seminal Drive 100.00 City; State; Zip Code Trophy Cub, Toxas 74242 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#:\_ Amount of contribution (\$) John Avila Contributor address; City; State; Zip Code 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Teresa + Rob Ruther ford Date Amount of contribution (\$) 12/9/15 25000 Contributor address; Trail City: State; Zip Code 7413 Windswept Trail Colleyville, Toxas 76034 Principal occupation / Job title (See Instructions) Employer (See Instructions) ::Y8 FRANK PHILLIPS ELECTIONS ADMINISTRATOR EI :DIMA 8- MAL 3105

ATTACH ADDITIONAL COPIES OF THIS SCHEDLNEASNENDED VI

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 5 06 11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 6 Contributor address: City; State; Zip Code 201 Main Street, Swife 801 Fort Worth, Texas 26102 250.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Charlie Gerau Campaign Contributor address; City: State; Zip Code P.O. Box 1440 Fort Worth, Texas 74101 150.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#:\_ Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) out-of-state PAC (ID#:\_ 100.00 City; State; Zip Code Employer (See Instructions) Principal occupation / Job title (See Instructions) ~:∀8 FRANK PHILLIPS ELECTIONS ADMINISTRATOR \$1:01MA 8- NAL 310S ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 19年1日 日本 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 19年1日 日本 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日 ATTACH ADDITIONAL COPIES OF THIS SCHEDUNE AS JURE 1997日

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 40611 Mr. Gover G. "Gary" Fickes 3 Filer ID (Ethics Commission Filers) Date 5 Full name of contributor Congress 12/9/15 6 Contributor address; City; State; Zip Code 12/9/15 Carrollton, Tours 75/123 7 Amount of contribution (\$) 250.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Bo V. Cunq 12/9/15 Contributor address; City; State; Zip Code 8033 Sunscape lane Fort Worth, Texas 76/23 100.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:\_\_ Date Amount of contribution (\$) Contributor address; City; State; Zip Code 3)00 Carisbrooke Gurt Glapville, Texas 76034 12/9/15 100.0P Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date

12/9/15

Full name of contributor out-of-state PAC (ID#:\_Freese and Nichols PAC

Amount of contribution (\$)

Contributor address: City; State; Zip Code 4055 International Plaza, Suite 200 Fort Worth, Exps 72109

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

FRANK PHILLIPS ELECTIONS ADMINISTRATOR

EI :01 MA 8- HAL 3105

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED VIEW 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 Mr. Grover	G. "Gary Fickes	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
12/15/15	Tony Pack 6 Contributor address: City; State; Zip Code 940 Replanville Ave Southlake, Tears 76092	1,000.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
।श्रीडी।६	Ricky Collins  Contributor address; City; State; Zip Code  13089 Hornson Rd Fort Worth, Texas 72177	200.00
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	nstructions)
Date	Full name of contributor   out-of-state PAC (ID#:	Amount of contribution (\$)
1 <i>211511</i> 5	Contributor address; City; State; Zip Code 40 Wyck Hill Inne Westlake, Flags 72222	100.00
Principal occu	pation / Job title (See Instructions) Employer (See I	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
12/15/15	Contributor address; City; State; Zip Code 2200 Lake Way North Richland Holls, Texas 72180	250.00
Principal occu	pation / Job title (See Instructions)  Employer (See I	nstructions)
		.Y8
	S9 ROTART	FRANK PHILLI ELECTIONS ADMINIS
		4A 8- WAL BIOS
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE If contributor is out-of-state PAC, please see instruction guide for additional contributors.	ASNEEDED VI North departing requirements.

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Mr. Grover	G. "Gary Fickes		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	)	7 Amount of contribution (\$)
12/15/15	Nizam Peerwaini 6 Contributor address; City; State; Zip C P.O. Box 121434 Arlington, Texas 740	0/2	500.00
8 Principal occu	pation / Job title (See Instructions)  9 Em	ployer (See Instructio	ns)
Date	Full name of contributor		Amount of contribution (\$)
12/12/15	Ed BASS  Contributor address; City; State; Zip C  201 Maria Street, Suite 3100 Fort Worth, Ears	Code 74102	1,500.00
Principal occup	ation / Job title (See Instructions) Emp	oloyer (See Instructio	ns)
Date	Full name of contributor   out-of-state PAC (ID#:		Amount of contribution (\$)
12/12/15	Ray Waddell  Contributor address; City; State; Zip C # 7 Bretten Greek Guit Dallas, Texas 73	F210	3,000.00
Principal occup	eation / Job title (See Instructions) Em	oloyer (See Instructio	ns)
Date I I	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
12/22/15	Contributor address; City; State; Zip C 4004 Airport Fuy Fort World, Texas 7411		100.00
Principal occup	eation / Job title (See Instructions) Em	ployer (See Instructio	ns)
		A Management	:48
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	8	1:01MA 8- W	1C 910Z
	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE ASWEE	porting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mr. Grover f. "Fary" Fickes out-of-state PAC (ID#: 7 Amount of contribution (\$) J. D. Johnson 250.00 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date out-of-state PAC (ID#: Scott Brackey Contributor address; City; State; Zip Code Ove Paige brook Westlake, Texas 76262 Amount of contribution (\$) 50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Virginia Muzy KA 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#: 12/28/15 City; State; Zip Code Westlake, Texas 76,212 250.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) FRANK PHILLIPS ELECTIONS ADMINISTRATOR EI :01 MA 8- NAL 3105 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS WEEDED III for contributor is out-of-state PAC, please see instruction guide for additional seporting requirements.

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 10 ot 11 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 100.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date \_\_ out-of-state PAC (ID#: Amount of contribution (\$) Contributor address; City; State; Zip Code 1802 GHow wood lane Glleyuille, Texas 74034 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Amount of contribution (\$) Dec J. Kolly, Jr Contributor address; City; State; Zip Code 201 Man Street Fort Worth, Texas 76102 1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Kelly Hart PAC Contributor address; City; State; Zip Code Fort Worth, Texas 76102 Amount of contribution (\$) 1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) FRANK PHILLIPS ELECTIONS ADMINISTRATOR E1:01MA 8- NAL 3105 ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS MINEDED AT If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## FILED MONETARY POLITICAL CONTRIBUTIONS ANT COUNTY SCHEDULE A1 The Instruction Guide explains how to complete this form. FILER NAME Mr. Grover G. Gary Fickes Date 5 Full name of contributor | out-of-state PAC (ID#: PSEL PAC Has Friend Rethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 6 Contributor address; 201 Man Street 1,500.00 City; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Amount of contribution (\$) 1,500.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) ut-of-state PAC (ID#:\_ Amount of contribution (\$) Russell Aughliw Contributor address; 3717 Fox Hollow Forth 250,00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) State; Zip Code Contributor address; City; Employer (See Instructions) Principal occupation / Job title (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 POLITICAL CONTRIBUTIONS

## TARRANT COUNTY

2016 JAN -8 AM 10: SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX REP. ADMINISTRATOR						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services	e Expense Iernorials Expense	Office Overl Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor	Travel in District Travel Out Of Dis	uipment & Related Expense
1 Total pages Schedule F1:	2 FILER N	ame over 6. G	ony" Fickes			3 Filer ID (Eth	ics Commission Filers)
4 Date 7/7/15	5 Payee na						
6 Amount (\$) <b>250.00</b>	7 Payee & 190 W. h	ddress; Wy 114, S	1	zip Code Ne, Texas	74092		
8 PURPOSE OF EXPENDITURE	1	(See Categorie	s listed at the top of this	schedule)		utside of Texas. Complet n, TX, officeholder livi / <b>Program</b>	
9 Complete ONLY if direct expenditure to benefit C/OF		late / Officeho	older name		Office sought		Office held
7/8/15	Colley	ame	s Club				
Amount (\$)	Payee a		City; State;		1034		
PURPOSE OF EXPENDITURE	Category Fees	y (See Categorie	s listed at the top of this	schedule)		tside of Texas. Complete, TX, officeholder livin	
Complete ONLY if direct expenditure to benefit C/OF		late / Officeho	older name		Office sought		Office held
Date 7/15/15	Payee Trining	ame Trojan	Football Boo	oster Clu	b		444
Amount (\$) / <i>50.00</i>	Payee a	ddress; k		Zip Code , Texas	76095		
PURPOSE OF EXPENDITURE	A 1	HSING E	is listed at the top of this	s schedule)		nside of Texas. Complete, TX, officeholder livi	ng expense
Complete ONLY if direct expenditure to benefit C/OF		date / Officeh	older name		Office sought		Office held
	AT	TACH ADDI	TIONAL COPIES	S OF THIS S	SCHEDULE AS NEE	EDED	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# TARRANT COUNTY

		EXPENDITURE CATE	EGORIES F	OR BOX BOX BO	IILLIPS	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Loan Repay Office Overl Polling Exp Printing Exp Salaries/Wa	ELECTIONS ADD ment/Reinbursement head/Rental Expense ense y: pense y:	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)	
1 Total pages Schedule F1:		over 6. "Gary" Fickes			3 Filer ID (Ethics Commission Filers)	
4 Date 7/17/15	5 Payee no					
6 Amount (\$)  1,100.00	7 Payee at	ddress; City; State;	zip Code Hursh, Tex	ias 76054		
8 PURPOSE OF EXPENDITURE	<b>A</b> 4	(See Categories listed at the top of this	s schedule)	LJ	utside of Texas. Complete Schedule T.  1, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF		late / Officeholder name		Office sought	Office held	
7/20/15	Payee na	ame 11 Football Boosler Clu	ŀΡ			
Amount (\$) 150.00	Payee as P.O. Box 2	ddress; City; State; 111103 Bed Cord, Tex		15		
PURPOSE OF EXPENDITURE		(See Categories listed at the top of this	s schedule)	<u> </u>	tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		late / Officeholder name		Office sought	Office held	
7/21/15	Payee n	ame Towe Nelson Compaig	g~			
Amount (\$) 250.00	Payee as P.O. Box		_ ' _	2099		
PURPOSE OF EXPENDITURE	Category Courrib Officence	(See Categories listed at the top of this was Downtows Made	ם ו	[]	tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		ate / Officeholder name		Office sought	Office held	
	AT	TACH ADDITIONAL COPIES	S OF THIS S	CHEDIII E AS NEE	:DED	Ī

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 2016 JAN -8 AM 10: 09

TARRANT COUNTY

SCHEDULE F1

		EXPENDITURE CAT	EGORIES F	OR BOX 8(a)	JPS	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repa Office Over Polling Exp Printing Ex	ment/Reimbursement head/Rental Expense ense	S Solicitation/Fundra Transportation Equ Travel In District Travel Out Of Distr	ipment & Related Expense
Credit Card Payment		The Instruction Guide expl	ains how to c	omplete this form.		
1 Total pages Schedule F1:		ver 6. "Gany" Fickes			3 Filer ID (Ethi	cs Commission Filers)
7/24/15	l					
6 Amount (\$) 200.00	7 Payee add	dress; City; State; GHes Blvd Nouth Ri	Zip Code Chland Hall	ls, Texas 7218	80	
8 PURPOSE OF EXPENDITURE		(See Categories listed at the top of the	nis schedule)		outside of Texas. Complete in, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/Oh		ite / Officeholder name		Office sought	-	Office held
8/3/15	Payee nar	ne Ridge High School A	Hhledic Bo	oster Club		
Amount (\$) 350.00	7420 N.	dress: City; State; Beach Street, Suite 21.	Zip Code 2 <i>PMB</i> <b>4</b> 4	s Fort Worth,	Teurs 74137	1
PURPOSE OF EXPENDITURE		(See Categories listed at the top of the sing Expense	nis schedule)	Check if Austi	utside of Texas. Complete n, TX, officeholder livin	
Complete ONLY if direct expenditure to benefit C/OH		te / Officeholder name		Office sought	.,	Office held
Date 8/3//S	Payee na	HArea Food Bank				
Amount (\$)	Payee ad	, , ,	Zip Code Ubill, lexa	5 74107		
PURPOSE OF EXPENDITURE	Category Court but Office ho	(See Categories listed at the top of the Companies Marchael Companies Compan	$\mathcal{D}$	Check if Austi	outside of Texas. Complete in, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/O		ate / Officeholder name		Office sought		Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# TARRANT COUNTY SCHEDULE F1 2016 JAN -8 AM 10: 09

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fee Foo y Gift Il Committee Leg	EXPENDITURE CATE int Expense s d/Beverage Expense Awards/Memorials Expense al Services he Instruction Guide explain	Loan Repayme Office Overhee Polling Expens Printing Exper Salaries/Wage	ELECTIONS A ent/Reimbursement ad/Rental Expense se BY: as/Contract Labor	Solicitation/Fundra Solicitation/Fundra Transportation Equ Travel In District Travel Out Of Distri	ipment & Related Expense
1 Total pages Schedule F1:		G. "Gary" Fickes			3 Filer ID (Ethi	cs Commission Filers)
4 Date 8/5/15	5 Payee name	Her: lage High School	LFootball	Booster Club		
6 Amount (\$) 400.00	7 Payee addres	011		2034		
8 PURPOSE OF EXPENDITURE	. 1	Categories listed at the top of this	schedule) (I	$\overline{}$	utside of Texas. Complete n, TX, officeholder livin	
9 Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name		Office sought		Office held
Date 8/13/15	Payee name	thletic Booster Cl	b			
Amount (\$)	Payee addres	s; City; State; Z rroll Avance S	zip Code arthlake,	Texas 74097	г	
PURPOSE OF EXPENDITURE	.1 1	Categories listed at the top of this	schedule)	$\overline{}$	tside of Texas. Complete , TX, officeholder living	
Complete ONLY if direct expenditure to benefit C/OF		Officeholder name		Office sought		Office held
8/18/15	Payee name Supperin	ve High School Fo	olbal/Ba	poster Club		and a second sec
Amount (\$)  350.00	Payee address		perme, T	_ exas 7605	7	
PURPOSE OF EXPENDITURE	4	Categories listed at the top of this	schedule)	Check if Austin	ntside of Texas. Complete	
Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name		Office sought		Office held
William Control	ATTAC	H ADDITIONAL COPIES	OF THIS SC	HEDULE AS NEE	DED	

# POLITICAL EXPENDITURES MADE FILED TARRANT COUNTY SCHEDULE F1

		2016 JAN -8 AM ID: 09	
	EXPENDITURE CATEGORIES		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office C Food/Beverage Expense Polling by Gift/Awards/Memorials Expense Printing	payment/heinfulsement Sujigitation/Fundraisin werhead/Aental Expense Travel in District Expense Travel Out Of District Other (enter a category	
1 Total pages Schedule F1: <b>5</b> o そ / &	Mr. Grover G. "Gary" Fickes	3 Filer ID (Ethics (	Commission Filers)
8/20/15	5 Payee name Rothary		
6 Amount (\$) 229.00	7 Payee address; City; State; Zip Code Grapevine, Toxas	74099	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Sch  Check if Austin, TX, officeholder living ex  Membership Due s	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought C	ffice held
8/24/15	Joe D. Johnson to Constrable		
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 136067 Lake Worth, Tex	ns 76136	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Courting traits / Downstax Made By Officeholder	Description Check if travel outside of Texas. Complete Sche	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought C	ffice held
Date 8/27/15	Andy Nguyen Campaign		
Amount (\$)	Payee address; City; State; Zip Code P.O. Box 151272 Hington, Toda	4 74015	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Court butions / Doubtions Made By Officeholder	Description Check if travel outside of Texas. Complete Sche	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought (	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEEDED	

# POLITICAL EXPENDITURES MADE TARRANT COUNTY SCHEDULE F1

			2016 JAN -8 AMI	0: 00
	EXPENDITU	RE CATEGORIES F	OR BOX 8(a)	0.03
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense (y) Giff/Awards/Memorials la al Committee Legal Services	Loan Repaty Office Over e Polling Exp	TRANA PHILLIPS TO THE TRANSPORT OF THE PROPERTY OF THE PROPERT	Highest Section Fundraising Expense the spotalistion Equipment & Related Expense avel in District avel Out Of District ther (enter a category not listed above)
1 Total pages Schedule F1:		•		Files ID (Ethica Commission Filese)
60€16	Mr. Grover G. "Gary"	Fickes	]	Filer ID (Ethics Commission Filers)
4 Date 9/10/15	Mark La Chapelle			
6 Amount (\$) 212.50	P.O. Box 347 Cop	State; Zip Code	ĩ <i>01</i> 9	
8	(a) Category (See Categories listed at t	the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Solicitation Expens	e	Check if Austin, TX	of Texas. Complete Schedule T. , officeholder living expense
			Websife Work	
9 Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder nad	me	Office sought	Office held
Date 9/18/19	Pletcher Consulting	3		
Amount (\$) <b>542.88</b>	Payee address; City; 500 Grapeville Huy, Suit	State; Zip Code	, Exas 76094	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the Category Category Categories listed at the Categories listed at the Category Cate			of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder nar	me	Office sought	Office held
9/22/15	Johathan Stick laws	Campaign		
Amount (\$) 250.00	Payee address; City;	State; Zip Code Bed Grd, Toxas	72022	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the Court is purious / Double Office hold Cr		Check if Austin, TX,	of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder na	ame	Office sought	Office held
	ATTACH ADDITIONAL	L COPIES OF THIS S	SCHEDULE AS NEEDE	D

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## FILED TARRANT COUNSCHEDULE F1

			LUID JAN T		
	EXPENDIT	URE CATEGORIES F		A1110* UU	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services	Office Over ense Polling Exp ials Expense Printing Exp	pense ages/Commatt Labor	Solicitation Fundraising Expense Transportation Editornent & Related Ex Travel In District Travel Out Of District Other (enter a category not listed above	
1 Total pages Schedule F1:		Fickes		3 Filer ID (Ethics Commission Fi	lers)
4 Date 9/23/15	5 Payee name Tim O'Hnre Campa				
6 Amount (\$)	7 Payee address; Ci	ty; State; Zip Code	ixas 74092		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Court builders/Davisy Office holder	/ 4/		ide of Texas. Complete Schedule T.  TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder	name	Office sought	Office held	
Pla5/15	Justice Debra Lehi	rmaun lampaign	,		
Amount (\$)  200.00	-	ty; State; Zip Code Justin, lexas 78	767		
PURPOSE OF EXPENDITURE	Category (See Categories listed Contributions/Danas Officender	tat the top of this schedule)	Check if Austin,	ide of Texas. Complete Schedule T. TX, office holder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder	name	Office sought	Office held	
Pate 9/29/15	Payee name HEB Chamber o	t Commerce			
Amount (\$)  210.00		ty; State; Zip Code Sed ford, Texas 74	1099		
PURPOSE OF EXPENDITURE	Category (See Categories listed	d at the top of this schedule)		ide of Texas. Complete Schedule T. TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder	rname	Office sought	Office held	
	ATTACH ADDITION	VAL COPIES OF THIS S	SCHEDULE AS NEEL	DED	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# FILED TARRANT COUNTY SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Food/Beverage Expense Po	FRANK PHILLIPS  an Repayment/Rembutsement DHI Solicitation (Processing Expense Transportation Equipment & Related Expense In District Travel Out Of District Union (Processing Expense Contract Labor Other (enter a category not listed above)	5 <del>0</del>	
Credit Card Payment	The instruction Guide explains ho	ow to complete this form.		
1 Total pages Schedule F1:	Mr. Grover G. "Gary" Ficks	3 Filer ID (Ethics Commission Filers)	)	
9/30/15	Collaguille Lions Club			
6 Amount (\$) 250.00	7 Payee address; City: State; Zip C. P.O. Bax 532 College: Ile, Texas			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Course between Downsteen's Made By Office hopes			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date 10/2/15	City of Hurst Fire Departmen	,†		
Amount (\$) 150.00	Payee address; City; State; Zip C 1505 Precinct Une Rond Hurs	ode f, Tax45 74054		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this school  Contributions / Downtons / Inde B  Office holder	ule)  Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
10/2/15	TArrowt County Republican Hos	sembly		
Amount (\$) 20.00	Payee address; City; State; Zip C P.O. Box 12209 Fort Worth, Tex	ode (45 74110-8205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Membership Dues		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# FILED TARRANT COUNTY SCHEDULE F1

	EXPENDITURE (	CATEGORIES FOR BOX 8(a)	PHILLIPS	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services	Loan RepayFibrit (Reimburseme Office Overhead Rental Expens Polling Expense	Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Mr. Grover G. "Bary" Ficker		3 Filer ID (Ethics Commission Filers)	
4 Date 10/9/15	5 Payee name Grapevine Rotary			
6 Amount (\$) 94.00		ite; Zip Code Ne, Toxas 72099		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	Check if tr	avel outside of Texas. Complete Schedule T.  Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sough	nt Office held	
Date 10/14/15	Payee name Toxows for life Coalific	on		
Amount (\$)	Payee address; City; Sta 5616 Forest Bond Drive	Helington, Teas 720	017	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Cautributions / Dountiens / Officeholder	Made By Checkiftra	avel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sough	nt Office held	
10/22/15	Sharen Wilson Comp	paign		
Amount (\$) 250.00	Payee address; City; Sta Fort We	te; Zip Code orth, Texas 76101		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Carrier Haus / Davaneus Office der	Made By Checkifte	avel outside of Texas. Complete Schedule T.  Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

FILED
TARRANT COUNTY SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) FRANK PHILLIPS				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense	Loan Repaying the think is the contract Labor.  Loan Repaying the contract Labor.  Loan	A CATION Fundraising Expense ansportation Equipment & Related Expense avel In District avel Out Of District her (enter a category not listed above)	
1 Total pages Schedule F1:	Mr Gover G. "Gary" Fickes	3	Filer ID (Ethics Commission Filers)	
10/30/15	Kelly Hawcock Campaign	No. of the Control of	ALC:	
6 Amount (\$) 250.00	7 Payee address; City, State; Zir P.U. Bax 821349 North Rich Inn	ud Hills, Texas 72182		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sol Contributions / Doustians Made of Office holder	Check if travel outside	of Texas. Complete Schedule T. officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 10/30/15	Metro Sports			
Amount (\$) 750.00	Payee address; City; State; Zip P.O. Box 1014 Trophy Cub,	Code Tex45 76262		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sci	Check if travel outside of	of Texas. Complete Schedule T. officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date 11/2/15	Payee name Rotary			
Amount (\$)	Payee address; City; State; Zip 308 N. Maw Grupevine, Te			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so	Check if travel outside of	of Texas. Complete Schedule T. officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES (	OF THIS SCHEDULE AS NEEDE	D	

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## FILED TARRANT COUN SCHEDULE F1

2016 JAN -8 AM IN: NR

		COTO OTTO ALL DU US
	EXPENDITURE CATEG	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Confice Overhead/Fehital Expense Polling Expense Printing Expense Printing Expense Salaries/Wages/Contact Labor  The Polling Expense Travel In District Travel Out Of District Other (enter a category not listed above)  The Polling Expense Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	Mr Grover G. "Gary" Fickes	3 Filer ID (Ethics Commission Filers)
4 Date 11/3/15	5 Payee name Blossoms	
6 Amount (\$) 79.39	7 Payee address; City; State; Zip	Code Texas 74179
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sci Gills/Memorials Expense.	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Flowers for Funerals
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date ///4//5	Northeast Tarrowt Lious Club	•
Amount (\$)	Payee address; City; State; Zin P.U. Box 1716 College le, Te	_
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Contribution's / Denostions Made Officeholder	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Minuteman Press	
Amount (\$) 233.90	Payee address; City; State; Zig 2527 Grave) Drive Fort W	odh, Texas 76118
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Chan paraw Mailer
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FILED FROM POLITICAL CONTRIBUTIONS TARRANT COUNTY SCHEDULE F1

				1116 18N Q 81	<del>                                      </del>	
		EXPENDITURE CATI	EGORIES FO	DR BOX 8(a)	110-01	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Food y Gift/A I Committee Lega	t Expense /Beverage Expense wards/Memorials Expense I Services • Instruction Guide expla	Office Overto Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor	Travel In District Travel Out Of Distr	pment & Related Expense
1 Total pages Schedule F1:		f. "Fory Fickes			3 Filer ID (Ethio	es Commission Filers)
4 Date ////8/15	5 Payee name TATION CO	wy GOP				
6 Amount (\$) 1,250.00	7 Payee address 2405 free		Zip Code	72118		
8 PURPOSE OF EXPENDITURE	(a) Category (See	Categories listed at the top of thi	s schedule)		tside of Texas. Complete , TX, officeholder livin	
9 Complete ONLY if direct expenditure to benefit C/Oh		Officeholder name		Office sought		Office held
Date 11/18/15	Payee name	le vous Club	The second second			
Amount (\$)  250.00	Payee address	01/1/2		034		
PURPOSE OF EXPENDITURE	Category (see Cathribution Office holds	Categories listed at the top of thi	ndc By		TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/Ol-		Officeholder name	***************************************	Office sought		Office held
Date 11/19/15	Payee name Grapevine	Rotniy				
Amount (\$) 92.00	Payee address 308 S. Mota			,099		
PURPOSE OF EXPENDITURE	Category (See	Categories listed at the top of thi	s schedule)		side of Texas. Complete TX, officeholder living	
Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	dd o to the dollars	Office sought	AMMATINE AMPLICATION	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# FILED TARRANT COUNT SCHEDULE F1

				2016 IAN O	AM 10. 0.7	
		EXPENDITURE CATE	GORIES F		AFT IU+ U /	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services The Instruction Guide explai	Printing Exp Printing Exp Salaries/Wa	ense ense ges/Contract Labor	Solicitation/Fundraising E Travel In District Travel Out Of District Other (enter a category n	
1 Total pages Schedule F1:	2 FILER NA				3 Filer ID (Ethics Co	ommission Filers)
4 Date 11/23/15	5 Payee nar	PAYSONS				
6 Amount (\$) 171.97	7 Payee add	dress; City; State;	Zip Code Texas	76053		
8 PURPOSE OF EXPENDITURE	(a) Category	(See Categories listed at the top of this	schedule)	Check if Austin,	tside of Texas. Complete Sched , TX, officeholder living expo	
Complete ONLY if direct expenditure to benefit C/Or		ate / Officeholder name		Office sought	Off	ice held
Date 11/25/15	Payee nar	ne Ilc Area Chamber	ot Comm	erce		
Amount (\$)  300.00	Payee add	dress; City; State; legville Blvd Col	Zip Code leyville,	Texas 76034		
PURPOSE OF EXPENDITURE	Category	(See Categories listed at the top of this	schedule)	<u> </u>	side of Texas. Complete Schedi TX, officeholder living expe	
Complete ONLY if direct expenditure to benefit C/Oh		te / Officeholder name		Office sought	Off	ice held
Date 12/4/15	Payee na	it County FOP	A STATE OF THE STA			
Amount (\$) 500.00	2409 G	dress; City; State; Avel Road Fort World	Zip Code , Texas	74118		
PURPOSE OF EXPENDITURE	Category Cartrior Office to	(See Categories listed at the top of this have / Downstaus Mac		Check if Austin,	side of Texas. Complete Sched TX, officeholder living expe	
Complete ONLY if direct expenditure to benefit C/Oh		te / Officeholder name		Office sought	Ol	fice held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

FILED
TARRANT COUNTY
SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) FRANK PHILLIPS FRANK PHILLIPS				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awarris/Memorials Expense	Loan Repayment/FeithButsertigit 5 / Office Overhead/Reinfall Expense Polling Expense Printing Expense 5 / Salaries/Wages/Contract-Lelier	Schotagory Articles ing Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	Mr. Grover G. "Gary" Fixes		3 Filer ID (Ethics Commission Filers)	
12/9/15	Minuteman Press			
6 Amount (\$) 871.92	7 Payee address; City; State; Zip 1527 Gravel Drive Fort World	Code 1, Texas 74118		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Printing Expanse	Check if travel or	utside of Texas. Complete Schedule T.  n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
12/9/15	Greater Keller Chamber of (	Commerce		
Amount (\$) 175.00	Payee address; City; State; Zing 420 Johnson Road Keller,	Code <b>Exas</b> 76.148		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sol	Check if travel ou	ntside of Texas. Complete Schedule T.  To the state of Texas and Texas are stated as the state of Texas are stated as the state of Texas are stated as the s	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
12/15/15	Payee name Center for Transforming Live	<b>'</b> \$		
Amount (\$)	FIZ W. 4 Street Fort World			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sol Contributions / Doughtons Made Officeholder	By Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

#### POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# FILED TARRANT COUNTY SCHEDULE F1 2016 JAN -8 AM 10: 07

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services	Expense Office O Expense Polling I emorials Expense Printing	payment/Reimburseiment () \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		& Related Expense
1 Total pages Schedule F1:				3 Filer ID (Ethics Co	nmission Filers)
4 Date 12/15/15	5 Payee name Feeds forc BBG				
6 Amount (\$) 150.00	5305 S. While Ch	opel Southake,	Texas 76092		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories Food/Bevernge		Check if Austin	tside of Texas. Complete Schedu , TX, officeholder living exper	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officehol	der name	Office sought	Offi	ce held
12/16/15	Metro Sports				100
Amount (\$) 1,050.00	Payee address; P.O. Box 1014	City; State; Zip Code	15 74262		
PURPOSE OF EXPENDITURE	Category (See Categories  Advertising Ex	isted at the top of this schedule)		side of Texas. Complete Schedul TX, officeholder living exper	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officehol	der name	Office sought	Offic	ce held
Date 12/18/15	Dee Awderson	Compaign			
Amount (\$) 250.00	Payee address; P.O. Box 1892	City; State; Zip Code Fort Worth, Texass	76101		
PURPOSE OF EXPENDITURE		listed at the top of this schedule)		tside of Texas. Complete Schedu TX, officeholder living exper	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeho	lder name	Office sought	Off	ice held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# FILED TARRANT COUNTY SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a) FRANK PHILLIPS					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fe Fo G I Committee Le	vent Expense ses cod/Beverage Expense ft/Awards/Memorials Expense ogal Services	Office Overt Polling Expe Printing Exp Salaries/Wa	ment/Reithbutsenient lead/Rental Expense inse ense ges/Contract Labor	Transportation Equ Travel In District Travel Out Of Dist	uipment & Related Expense
		The instruction Guide expl	ains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAM	f. 'Gmy' Fickes			3 Filer ID (Eth	ics Commission Filers)
4 Date /2/12/15	5 Payee name	Texas Bank				
6 Amount (\$) 29.70	7 Payee addre	ess; City; State;		1-5102		
8 PURPOSE OF EXPENDITURE	(a) Category (S	ee Categories listed at the top of the	is schedule)		outside of Texas. Complete	
9 Complete ONLY if direct expenditure to benefit C/OH		/ Officeholder name		Office sought		Office held
Date   12/28/15	Payee name	are Compaign				
Amount (\$)  250.00	Payee address	ess; City; State; Nglau Unive South	Zip Code	74092		
PURPOSE OF EXPENDITURE	Category is Coulvilland Office hold	ee Categories listed at the top of the US / Day a Afairs Mine	/ ^		nutside of Texas. Complete	
Complete ONLY if direct expenditure to benefit C/OF		/ Officeholder name		Office sought		Office held
Date	Payee nam	9	1,7866-11	A A A A A A A A A A A A A A A A A A A		
Amount (\$)	Payee addr	ess; City; State;	Zip Code			
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed at the top of th	nis schedule)		outside of Texas. Complete in, TX, officeholder livin	
Complete ONLY if direct expenditure to benefit C/OH		/ Officeholder name		Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

#### FILED TARRANT COUNTY

#### SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(2) LLIPS						
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Card Payment	Event Expense Lox Fees Off Food/Beverage Expense By Gift/Awards/Memorials Expense Pri	an Repay/oart/Aleinbursement 5 fice Overhead/Rental Expense Illing Expense nting/Expense laries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
1 Total pages Schedule G:	Mr. Grover G. "Gary" Fixes		3 Filer ID (Ethics Commission Filers)			
4 Date 7/29/15	Niki's Italian Restaurant					
6 Amount (\$)  20.24  Reimbursement from political contributions intended	7 Payee address; City; State; Zin Co 5249 Davis Blvd North Richlim					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Food / Beverage Expense	Check if travel outside	h with Strate e of Texas. Complete Schedule T. C, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held			
7/29/15	Krispy Krame Davits					
Amount (\$)  #4.##  Reimbursement from political contributions intended	Payee address; City; State; Zip Co.  3109 Ira Wads Grapevine, Te	**** 76051				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule	Check if travel outside	G: A Run e of Texas. Complete Schedule T. (, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held			
7/29/15	Payee name Blackfinn Restaurant					
Amount (\$)  42.77  Reimbursement from political contributions intended	Payee address; City; State; Zip Co 210 E. Trade Street Charlotte, NO	C 28202				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Food / Beverage Expanse	Check if travel outsid	ch with Shift Control of Texas. Complete Schedule T.  K, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

#### FILED TARRANT COUNTY

#### SCHEDULE G

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic Credit Card Payment	Food/Beverage Expense Polling Exp By Gift/Awards/Memorials Expense Printipg Exp	ense pense ages/Contract Labor.	ASTREATION/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)			
1 Total pages Schedule G:	2 FILER NAME Mr. Grover G. "Gary" Files		3 Filer ID (Ethics Commission Filers)			
4 Date 7/29/15	5 Payee name USPS	•				
6 Amount (\$)  49.00  Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 150   Hold Johnson Road College: Le	XAS 74034				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Office Wexhead  (b)	$\overline{}$	of Texas. Complete Schedule T. officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held			
9/22/15	Payee name Humperdin Ks					
Amount (\$)  28.74  Reimbursement from political contributions intended	Payee address; City; State; Zip Code 700 Six Flags Drive Arlungton, Texas	74010				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Food Beverage Expanse	$\overline{}$	of Texas. Complete Schedule T. officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held			
Plaz /15	Krispy Krome Davuts					
Amount (\$)  44.43  Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3405 In Woods Graperwe, Texas	74051	(1			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Food / Beverage Expanse		of Texas. Complete Schedule T. officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held			
	ATTACH ADDITIONAL COPIES OF THIS SC	HEDULE AS NEEDE	ED			

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	EXPENDITURE CATEGORIES FOR BOX 8(a) FRANK PHILLIPS						
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	Consulting Expense	Food/Beverage Expense Pollin	Expense	Travel In District			
	Contributions/Donations Made Candidate/Officeholder/Politic	By Gift/Awards/Memorials Expense Printin	ng Expense es/Wages/Contract Labor	Travel Out Of District			
,	Credit Card Payment	cal Committee Legal Services Salari	es/wages/ <del>wentract Labor</del>	Other (enter a category not listed above)			
_		The Instruction Guide explains how	to complete this form.				
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	30613	Mr. Grover G. "Garry" Fickes	1	(======================================			
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4	Date	5 Payee name					
	9/22/15	Northeast Torinat Chamber of Com	MEVOC				
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	20.00		TexAS 72117				
	20.00	5001 Devitor Hay Haltom City,	IEXIFY IGITY				
	Reimbursement from						
	political contributions						
	intended			,			
8		(a) Category (See Categories listed at the top of this schedule)	(b) Description	Pasi			
_	PURPOSE	- Category (coo categories notes at the top of this surface)					
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	EXPENDITURE	Food/Beverage Expanse	Check if Austin, TX	C, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held			
	Date	Payee name					
	, ,						
	9/22/15	JR Steakhouse					
_							
	Amount (\$)	Payee address; City; State; Zip Code					
	28.22	5400 Huy 121 Collegeille, Te	usa 72034				
	a0.44	5400 Huy 121 Colleyville, le					
	Reimbursement from						
	political contributions						
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	Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held			
	expenditure to benefit C/C						
		•					
	Date .	Payee name					
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	4/22/15	Bacon Bistro					
	Amount (\$)	Payee address; City; State; Zip Code					
	12.81	Payee address; City; State; Zip Code 737 Frapevials Huy Hurst, Text	45 76094				
	14.51	121 Grand Land Lange 1813 1000	• •				
	Reimbursement from political contributions						
	political contributions intended						
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		Category (See Categories listed at the top of this schedule)	(b) Description Cam	DAIGN EVENI			
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	OF	Food/Bevernge Expense		,			
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EXPENDITURE CATEGORIES FOR BOX 8(a)					
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Accounting/Banking Consulting Expense	Fees Office ( Food/Beverage Expense Polling	Overhead Flental Expense	Transportation Equipment & Related Expense		
Contributions/Donations Made	By Gift/Awards/Memorials Expense Printing	Expense Expense	Travel In District Travel Out Of District		
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older dynosia	The Instruction Guide explains how t	o complete this form.			
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40€13	My, Grover 6. Gary Fickes				
4 Date	5 Payee name	L			
9/22/15	Outback Steakhouse				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
36.42	813 Arport Twy Hurst, Towns	76055			
Reimbursement from political contributions intended					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	with Gustituati		
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9 Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought	Office held		
10/15/15	Johnny Grino's				
Amount (\$)	Payee address; City; State; Zip Code				
29.87	Payee address; City; State; Zip Code	exas 74054			
- P-i-t	7,1,4				
political contributions intended					
	Category (See Categories listed at the top of this schedule)	(b) Description Lux	aunth Shaff		
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OF EXPENDITURE	Food/Beverage Expense	l 🗁	, officeholder living expense		
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10/15/15	Chapps cate				
Amount (\$)	Payee address; City; State; Zip Code, 9101 Blud 22 Worth Richard Hill	1. 7 2000			
24.72	9101 Blue 26 North Richland HAV	15, 1exas 76/80			
Reimbursement from					
political contributions intended					
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OF EXPENDITURE	Food/Beverage Expanse	l —	, officeholder living expense		
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Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held		
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# POLITICAL EXPENDITURES

FILED TARRANT COUNTY

MADE FROM PERSONAL FUNDS SCHEDULE G 2016 JAN -8 AM 10: 05 EXPENDITURE CATEGORIES FOR BOX 8(a)

IT Expense

Loan Repayment Meimburgement 11 ST Solicitation/Fundraising Expense

Office Overhead/Herital Expense

Polling Expense

Polling Expense

Transportation Equipment & Relating Travel In District Advertising Expense Event Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Travel In District Contributions/Donations Made By Printing Expense Travel Out Of District
Other (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Salaries/Wapes/Contract Labo Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mr. Grover G. "Gary" Fickers 5 of 13 5 Payee name 4 Date Posados Cate 7 Payee address; City; State; Zip Code
1601 Airport Kuy Bollord, Texas 72022 6 Amount (\$) Reimbursement from political contributions (b) Description Dance with Gus (a) Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Expanse Check if travel outside of Texas. Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Office held Candidate / Officeholder name Office sought expenditure to benefit C/OH Payee name PACIFIC Toble Date 10/15/15 City; State; Zip Code
Forf Worth, Texas 76107 Amount (\$) Pavee address: 1200 S. University Reimbursement from political contributions intended (b) Description Drawer with Stoff Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Foot/Beverage Expanse OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Italiauni's 10/15/15 Pavee address: City; State; Zip Code Amount (\$) Hurst, Taxas 1201 Product live Rand Reimbursement from political contributions (b) Description Lynch with State Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Food/Bevernge Expanse OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH

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## FILED TARRANT COUNTY SCHEDULE G

2016 JAN -8 AM 10: 05

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reithourserriers School Control of Contr Advertising Expense Accounting/Banking Event Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Lab Travel In District Contributions/Donations Made By Travel Out Of District
Other (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mr. Grover G. "Gary" Fickes 40613 Allsups 7 Payee address; 6 Amount (\$) City; State; Zip Code Slephavuille, Toats 72401 East South loop 35.39 Reimbursement from political contributions (b) Description Gp - Dove Hun? (a) Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Evout Expanse **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH EL Raucho Grande Date Pavee address: City; State; Zip Code Amount (\$) Fort Worth, Texas 72164 1400 N. MAIN 35.47 Reimbursement from political contributions intended (b) Description Company Discussions Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Expanse OF EXPENDITURE Check if Austin, TX, officeholder living expense Office sought Office held Complete ONLY if direct Candidate / Officeholder name expenditure to benefit C/OH Payee name Abuelo's Payee address; Amount (\$) 850 AupoH Fuy Hurst, Texas 47.02 Reimbursement from political contributions ntended (b) Description Computer Discussions Category (See Categories listed at the top of this schedule) **PURPOSE** Food/Beverage Exposse Check if travel outside of Texas. Complete Schedule T. OF EXPENDITURE \_\_ Check if Austin, TX, officeholder living expense Complete ONLY if direct Office held Candidate / Officeholder name Office sought expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# FILED TARRANT COUNTY

Advertising Expense   Accounting/Banking   Event Expense   Fees   Fees   Fees   Food/Boverage Expense   Giff/Awards/Memorials Expense   Fees   Food/Boverage Expense   Giff/Awards/Memorials Expense   Fees   Food/Boverage Expense   Food/Boverage Expense   Giff/Awards/Memorials Expense   Fees   Food/Boverage Expense	EXPENDITURE CATEGORIES FOR BOX,REIN, C. PHILLIPS  Contributor Distriction Cont	POLITICAL	EXPENDITURES	TARRANT COUNTY				
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The Instruction Guide explains how to complete this form.    Total pages Schedule G.   2 FILER NAME   1	To total pages Schedule G: 2 FILER NAME 7 0 f13 M. Grover 6. "Gray" Ficks 4 Date 11/12/15 Ghorizont 5 Payee address; City: State: Zip Code 1281 E. Hoy 114 Southlake, Texas 74.092    Panthusament to mportineal contributions   Purpose   Gardidate / Officeholder name   Office sought   Office held	Candidate/Officeholder/Politic	cal Committee Legal Services Sala	ries/Wages/Contract Labor				
## Date   Payee name   Payee na	## Date   Payee name   Candidate / Officeholder name   Office sought   Office held	Credit Card Payment	The Instruction Guide explains how	to complete this form.				
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PURPOSE   Candidate / Office holder name   Category (See Categories listed at the top of this schedule)   Category (See Categories listed at the top of th	Total   Tota	11/12/15	Calabrese Restaurant					
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Reinhursement from political contributions   Reinhursement from	Revenue of the contributions   Revenue   Rev	79 18	1281 F How 114 South lake Texas	15 76092				
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Date    Payee name   Krispy Krome Down's	Date   Ili 1   Is   Payee name   Crispy kneme   Dawls		1000/DEVELOGE EXPANS	Check if Austin, TX	, officeholder living expense			
Date    Payee name   Krispy Krome Down's	Date   Ili 1   Is   Payee name   Crispy kneme   Dawls	O Complete ONLY if direct	Condidate / Officeholder name	Office sought	Office hold			
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Reimbursement from political contributions intended  Category (See Categories listed at the top of this schedule)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date  III 2   5  Payee name  Howard Wangs  Amount (\$)  Payee address; City; State; Zip Code    H71 E. Southblik Blad Southblike, Texas, 14092    Purpose OF EXPENDITURE    Category (See Categories listed at the top of this schedule)   (b) Description   Mechag with Corst tracks   Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Purpose		Payee address; City; State; Zip Cod	e * ~ ~ ~ ~ ~ ~				
Reimbursement from political contributions intended  Category (See Categories listed at the top of this schedule)  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date  III 2   5  Payee name  Howard Wangs  Amount (\$)  Payee address; City; State; Zip Code    H71 E. Southblik Blad Southblike, Texas, 14092    Purpose OF EXPENDITURE    Category (See Categories listed at the top of this schedule)   (b) Description   Mechag with Corst tracks   Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Purpose	51.94	3209 Iva Woods Grapevine, 10	cas 16094				
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Food / Beverage Expanse  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office held  Payee name  Heward Wargs  Amount (\$)  Payee address; City; State; Zip Code    H71 E. Sauthlake Blue)    Southlake, Texas 12.092    Category (See Categories listed at the top of this schedule)    Purpose OF Expenditure   Category (See Categories listed at the top of this schedule)   Category (See Categories listed at the top of this schedule)   Category (See Categories listed at the top of this schedule)   Check if ravel outside of Texas. Complete Schedule T.   Check if ravel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense  Complete ONLY if direct  Candidate / Officeholder name  Office sought  Office held	PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Food/Beverage Expanse  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Check if Austin, TX, officeholder living expense  Check if Austin, TX, officeholder living expense  Complete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Office sought  Office held	Reimbursement from	,					
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Complete ONLY if direct expenditure to benefit C/OH  Date Payee name Howard Wards  Amount (\$) Payee address; City: State; Zip Code 1471 £, Southbale Blvc. Southbale, Texas, 14092.  Purpose OF EXPENDITURE  Candidate / Officeholder name  Office sought  Office sought  Office held  Office held  Office held  Office held  Office held	Complete ONLY if direct expenditure to benefit C/OH  Date    Payee name		Find/ Reverage Expanse	Check if travel outside	of Texas. Complete Schedule T.			
Date   IIII   III   IIII   Payee name   Payee address; City; State; Zip Code   Payee address; Code   Payee address; City; State; Zip Code   Payee address; City; State; Zip Code   Payee address; City; State; Zip Code   Payee address; City; State; Zip Code   Payee address; City; State; Zip Code   Payee address; Code   Payee address; City; State; Zip Code   Payee address; Code   Payee address; Code   Payee address; City; State; Zip Code   Payee address; Code   Payee address; City; State; Zip Code   Payee address; City; City; State; Zip Code   Pa	Date   IIII   15	EXPENDITURE	roce, serenige upwee	Check if Austin, TX	, officeholder living expense			
Date   IIII   15	Date   III   1   5			Office sought	Office held			
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				Office sought	Office held			
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							
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# FILED TARRANT COUNT SCHEDULE G

		2016 IAN -9 AN IO: 05
	EXPENDITURE CATEGORIE	S FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politic	Event Expense Loan R Fees Office Food/Beverage Expense Polling By Gift/Awards/Memorials Expense Printin	Repayment/Reimburseriant Overhead/Reimburseriant Overhead/Reimburseriant Dispense Gexpense Ge
1 Total pages Schedule G:	1) FILER NAME No. Grover G. "Gary" Fickes	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name Ace Mart	
6 Amount (\$) 74.57  Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 5400 N. Davion Hwy Hallom Chy,	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Supplies - Engage and Sector's  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/6	Candidate / Officeholder name OH	Office sought Office held
Date 11/12/15	Payee name Dixie House Gote	
Amount (\$)  30.98  Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3701 E. Belkuap Fort Worth, Tox	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expanse	(b) Description Compated D'scussions  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought Office held
11/12/15	Bacaus Bistro	
Amount (\$)  21.00  Reimbursement from political contributions intended	Payee address; City; State; Zip Code 737 Simperior Hurst, Texas	76054
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Beverage Expanse	(b) Description Company Discussions  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name OH	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

FILED TARRANT COUNTY

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(4) ILL IPS FRANK FRANK FRANKERS ATOR							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Polit Credit Card Payment	e By	Event Expense Fees Food/Beverage Exp Gift/Awards/Memori Legal Services	ense als Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/V	yment/Remoursement	Solicitation/Fundra Transportation Equ Travel In District Travel Out Of Dist	uipment & Related Expense
1 Total pages Schedule G:		G. "Gony"	fickes		w tree	3 Filer ID (Eth	ics Commission Filers)
4 Date	5 Payee name					1	
6 Amount (\$)  +0.80  Reimbursement from political contributions intended	7 Payee addr	ess; City Sheet Colo	State; Zip	Code	<b>4844</b>		
8 PURPOSE OF EXPENDITURE	(a) Category (S	ee Categories listed a	t the top of this sche	edule) (I	Check if travel outsi	de of Texas. Complete Scr TX, officeholder living e	
9 Complete ONLY if direct expenditure to benefit Co		e / Officeholder	name		Office sought		Office held
Date 11/30/15							
Amount (\$)  203.17  Reimbursement from political contributions intended	Payee addr	ess; City	State: Zip	Code	953		
PURPOSE OF EXPENDITURE	Category (S	ee Categories listed a	t the top of this sche	edule) (I	$\overline{}$	de of Texas. Complete Scr TX, officeholder living e	
Complete ONLY if direct expenditure to benefit Co		e / Officeholder	name		Office sought		Office held
Date 11/30/15	Payee name						
Amount (\$)  118.14  Reimbursement from political contributions intended	118.14    Heimbursement from political contributions   1419 Repolitive Road   Herrsh, Texas 76053						
PURPOSE OF EXPENDITURE	Office O	ee Categories listed a	t the top of this sche	edule) (I		de of Texas. Complete Sci	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

# TARRANT COUNTY

SCHEDULE G MADE FROM PERSONAL FUNDS 2016 JAN -8 AM 10: 04 **EXPENDITURE CATEGORIES FOR BOX 8(a)** FRANK PHILLIPS

Loan Repayment/ReintDusserlent OR Solicitation/Fundraising Expense
Office Overhead/Reintal@penseTOR Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel In District Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Mr. Grover G. "Gary" Fickes 4 Date Theresa Parsons 6 Amount (\$) City; State; Zip Code Hurst, Texas 76053 608 Woodside Drive Reimbursement from political contributions intended (b) Description Camprigo hadratset 8 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name USPS Payee address; Amount (\$) City; State; Zip Code Hurst Post Office Hurst, Texas 74093 122.50 Reimbursement from political contributions ntended (b) Description Sharps Category (See Categories listed at the top of this schedule) **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Of the Wentend OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct Office sought Office held Candidate / Officeholder name expenditure to benefit C/OH Payee address; City: State political contributions intended escription Suples
Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Office Overhood

#### ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Candidate / Officeholder name

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office held

Check if Austin, TX, officeholder living expense

Office sought

## FILED TARRANT COUNT SCHEDULE G

	EXPENDITURE CATEGO	RIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	Event Expense Lo Fees O Food/Beverage Expense P By Gift/Awards/Memorials Expense P	FRAM  oan Repayment/Reinfors if the S  iffice Overhead/Rental Expense olling Expense rinting Expense alaries/Wages/Contract Labor	PHILLIPS Solution Equipment & Related Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a sategery not listed above)
1 Total pages Schedule G:	2 FILER NAME Mr. Grover & "Gary" Fickes		3 Filer ID (Ethics Commission Filers)
4 Date /12/11/15	5 Payee name Del Frisco Grill	,	
6 Amount (\$)  278.28  Reimbursement from political contributions intended	7 Payee address: City; State; Zip C 154 E. Third Street Fort Worth, R	ode EXAS 74.102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule food / Beverage Expense	Check if travel outsid	ed Way krach e of Texas. Complete Schedule T. X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held
Date   12/11   15	Payee name USPS		
Amount (\$)  122.50  Reimbursement from political contributions intended	Payee address; City; State; Zip C Guua Drive Hurst, Texas	74054	
PURPOSE OF EXPENDITURE	Office Over head	Check if travel outsid	<b>ps - Cam prorow Mai lex</b> le of Texas. Complete Schedule T. X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held
Date 12/11/15	Payee name		
Amount (\$)  +1.40  Reimbursement from political contributions intended	Payee address; City; State; Zip C 2501 E. State Huy 114 Southla	ke Texas 2092	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Event Expense	Check if travel outsid	r Host le of Texas. Complete Schedule T. X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought	Office held
·	ATTACH ADDITIONAL COPIES OF T	THIS SCHEDULE AS NEED	DED

#### FILED TARRANT COUNTY

#### SCHEDULE G

	EXPENDITURE CATEGORIES FOR BOX 8(8) PHILLIPS	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made	Event Expense Loan Repayibedit Peintbulsement Solid Fees Office Overhead Expense Trave Food/Beverage Expense Polling Expense Trave de By Gift/Awards/Memorials Expense Printing Expense: Trave	sportation Equipment & Related Expense el In District al Out Of Dietrict
Candidate/Officeholder/Politi Credit Card Payment	Salaries/Wages/Contract Labor Othe  The Instruction Guide explains how to complete this form.	r (enter a category not listed above)
1 Total pages Schedule G:	3 FI Mr. Gover G. "Gary" Fickes	ler ID (Ethics Commission Filers)
4 Date 12/11/15	5 Payee name IHOP	
6 Amount (\$) 41.10  Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food Beverage Expense  Check if travel outside of Texas  Check if Austin, TX, officel	s. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/		Office held
Date 12/11/15	Sushi Axiom	
Amount (\$)  30.98  Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Food / Beverage Expense  (b) Description // Description // Check if travel outside of Texas  Check if Austin, TX, officely	·
Complete ONLY if direct expenditure to benefit C/4		Office held
Date 12/11/15	11 Calabrese Restaurant	
Amount (\$)  82.29  Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  Check if travel outside of Texas  Check if Austin, TX, officet	s. Complete Schedule T.
Complete <u>ONLY</u> if direct expenditure to benefit C/4		Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	

#### FILED TARRANT COUNTY

2016 JAN -8 AM 10: 04

SCHEDULE G

TOTAL O MINO

A	ndvertising Expense accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic redit Card Payment		Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services	ense ials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	LIPS NSTRATOR Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NA				3 Filer ID (Ethics Commission Filers)	
4	Date /2/22/15	5 Payee nam			-		
6	Amount (\$)  // // // // // // // // // // // // //	7 Payee add	ress; Cit	y; State; Zip Kurst, TOCA'S	Code <b>7405</b> 4		
8	PURPOSE OF EXPENDITURE		See Categories listed a	•	Check if travel outside	Has if Hs - Enp layees  Je of Texas. Complete Schedule T.  X, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/C		ate / Officeholde	name	Office sought	Office held	
	Date 12/22/15	Payee nan	Kreme Doa	su te			
	Amount (\$)  44.45  Reimbursement from political contributions intended	Payee add	Kreme Doa Iress; Cit Waads G	y; State; Zip o mpowine, Te	Code Ex45 76051		
	PURPOSE OF EXPENDITURE		See Categories listed a		Check if travel outside	with Gustines, de of Texas. Complete Schedule T. X, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/C		ate / Officeholde	name	Office sought	Office held	
	Date 12/22/15	Payee nan	NE Mall	The characteristic			
	Amount (\$)  400.00  Reimbursement from political contributions intended	Payee add	·	y; State; Zip	<sup>Code</sup> 7 <b>1054</b>		
	PURPOSE OF EXPENDITURE		See Categories listed a		Check if travel outsic	Linds - Employees de of Texas. Complete Schedule T. X, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/C		ate / Officeholde	name	Office sought	Office held	
		ATTA	CH ADDITIONA	L COPIES OF	THIS SCHEDULE AS NEED	DED	

Grover 6. "Gany Fickes - Thilis-12/3, lis Report Athehment A, Page 1 of 4

#### FMR LLC POLITICAL ACTION COMMITTEE - STATE "FIDELITY PAC" A MULTICANDIDATE PAC

2016 JAN -8 AM 10: 04

FRANK PHILLIPS ELECTIONS ADMINISTRATOR

July 31, 2015

The Honorable Gary Fickes Gary Fickes Campaign

**Dear Commissioner Fickes:** 

I am pleased to enclose a contribution of \$1,000 from the FMR LLC Political Action Committee in connection with the May 5, 2015 event supporting your reelection. FMR LLC is the parent of the Fidelity Investments group of companies.

In addition, and as required by the Texas Ethics Law, I have enclosed a copy of the FMR LLC's Political Action Committee's Federal Elections Commission Statement of Organization.

Please do not hesitate to contact me or Karen Kennedy at 617-563-2631 should you have any questions.

Sincerely,

**Enclosure** 

Image# 15950391413

Pa, !

Grover G. "Gary" Fickes, This-12/31/15 Report Albachment A, Page 2 054

01/30/2015 11:09

**FEC** FORM 1

Use

Only

### STATEMENT OF ORGANIZATION

PAGE 1/5 -FILED TARRANT COUNTY

2016 JAN -8 AM 10: 03

Office Use Only

(Revised 06/2012)

12 FRAMBINS ADMINISTRATOR NAME OF Example: If typing, type (Check if name COMMITTEE (in fuil) over the lines. is changed) Proposition Constitute Bright FMR LLC Political Action Committee State-Federal (Fidelity PAC) 245 Summer Street ADDRESS (number and street) (Check if address is changed) Boston 02210 STATE A ZIP CODE A CITY A COMMITTEE'S E-MAIL ADDRESS .fidelitypac@fmr.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 7 7 2 Y 3 Y DATE 13 2015 **C00275046** FEC IDENTIFICATION NUMBER X IS THIS STATEMENT OR AMENDED (A) NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kathryn Dunn Type or Print Name of Treasurer 2.4.2.4.3.4 0 1 0 Kathryn Dunn 13 2015 Signature of Treasurer [Electronically Filed] Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §4379. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

Otover 6. timy Hickers, 711115-12131115 Report Attachment A, Page 3 of 4

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FILED TARRANT COUNTY

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	FEC Form 1 (Revised	02/2009)	2016 JAN -	8 AM 10=03
١	Write or Type Committee Name	e .		
		ical Action Committee	State-Federal (Fid	<del></del>
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint F	undraising Representative, or Lea	adership PAC Sponsor
E	MR LLC	11111111111	1	
L				
	Mailing Address	245 Summer Street		
		Boston	MA 0222	.10 
		CITY	STATE	ZIP CODE
	Relationship: Connected	d Organization	Joint Fundralsing Representative	Leadership PAC Sponsor
	Custodian of Records: Ider books and records.	ntify by name, address (phone number opi	tional) and position of the person is	n possession of committee
	Karen Ken	nedy		
	Full Name	,245 Summer Street		<del></del>
	Mailing Address			
			111111111111111111111111111111111111111	
		Boston	LLL LMA LLL	110
	Title or Position	CITY	STATE	ZIP CODE
	Custodian of Records		Telephone number 617	- 663 - 2631
).	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the assistant treasurer).	treasurer of the committee; and the	e name and address of
	Full Name Kethryn Du	unn .	<b></b>	1
	of Treasurer	182 Devanshire Street		
	Mailing Address	02 Devulating Seco.		<u> </u>
		Boston	MA 021 STATE	ZIP CODE
	Title or Position Treasurer		Telephone number 617	- 563 - 9304

Grover G. "Gory" Wicker, 7/1/15-12/11/15 Report Albehment A, Page 4 of 4

Image# 15950391417

# FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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Banks or Other Deposit safety deposit boxes or m	orles: List all banks or other depositories in which aintains funds.	the committee deposits funds, h	
Name of Bank, Depositor			[ADDITIONAL]
ـــــ			
Mailing Address			111111
	<u> </u>		
		يا ليا ليب	ــــا-لـــــ
	CITY 🙇	STATE 4	ZIP CODE 🛕
Name of Any Connected	Organization, Affiliated Committee, Joint Fundral Action Committee - Federal (Fidelity	eing Representative, or Leade / PAC)	[ ADDITIONAL rehip PAC Sponsor
Mailing Address	245 Summer Street		
	Boston	LI LIMA LO	2210
alla achia.	CITY.	STATE	ZIP CODE 🐇
ationship: Connected Organization	★ Affiliated Committee Joint Fundral	sing Representative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name		<del></del>	<del></del>
Mailing Address			
Title or Position	CITY &	STATE	ZIP CODE &
		Telephone number	
Joint Fundralser Particip	ant		[ ADDITIONAL ]
سسس		FEC ID number C	
,			201 ELE: BY:
			2016 JAN -8 FRANK PI LECTIONS ADD
			JAN ONS
			FRANK PHILLIPS ECTIONS ADMINISTRATO
			TE D
			2016 JAN -8 AM 10: 03 FRANK PHILLIPS ELECTIONS ADMINISTRATOR BY:
			ATC O
			🕱 🗓