

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
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3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <i>Raymond</i> <i>E.</i> NICKNAME LAST SUFFIX <i>WILLIBY</i>	OFFICE USE ONLY Date Received BY: <i>[Signature]</i> FRANK PHILLIPS ELECTIONS ADMINISTRATOR 2016 FEB - 8 PM 5:07 TARRANT COUNTY FILED Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <input type="checkbox"/> Change of Address
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5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION
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6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>VIRNELDA</i> <i>[check]</i> NICKNAME LAST SUFFIX <i>LEWIS</i>	Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
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7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE (Residence or Business)
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8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION
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9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 6th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)
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10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>01 / 01 / 16</i> <i>01 / 21 / 16</i>
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11 ELECTION	ELECTION DATE Month Day Year <i>/ /</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special
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12 OFFICE OFFICE HELD (# any)	13 OFFICE SOUGHT (if known)
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GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Raymond Williby

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

BY

FILED
TARRANT COUNTY
2016 FEB -8 PM 1:08
FRANK PHILLIPS
ELECTIONS ADMINISTRATOR

Additional Pages

17 CONTRIBUTION
TOTALS

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

\$ 0

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

\$ 0

EXPENDITURE
TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 5494.88

CONTRIBUTION
BALANCE

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

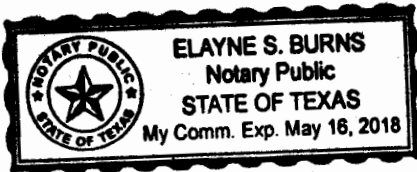
\$ 0

OUTSTANDING
LOAN TOTALS

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

\$ 0

18 AFFIDAVIT



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

Raymond Williby
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Raymond Williby, this the 5 day of February, 2016, to certify which, witness my hand and seal of office.

Elayne S. Burns
Signature of officer administering oath

ELAYNE S. BURNS
Printed name of officer administering oath

New Accounts
Title of officer administering oath

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 FILER NAME *Raymond E Williby* 3 Filer ID (Ethics Commission Filers)

4 Date *JAN 1st 11* 5 Payee name *MICHAEL SANDER*

6 Amount (\$) *200.00* 7 Payee address; City; State; Zip Code
3224 LITTLEJOHN FORT WORTH TX, 76112

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) *SET POLE'S AND SIGN TWO DAY'S WORK PLUS FOOD & REPLACE POLE'S* (b) Description
 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/OH Candidate / Officeholder name Office sought BY: *FRANK PHILLIPS ELECTIONS ADMINISTRATOR* FILED TARRANT COUNTY FEB - 8 PM 1:09

Date Payee name
Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) 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/OH Candidate / Officeholder name Office sought Office held

Date Payee name
Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description
 Check if travel outside of Texas. Complete Schedule T.
 Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Raymond Wilkiby</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>01-01-16</i>		5 Payee name <i>Fuel SHELLS GAS STATION</i>			
6 Amount (\$) <i>35.72</i>		7 Payee address; City; State; Zip Code <i>101 N CROWLEY RD. FORT WORTH</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>GASOLINE FOR ELECTION</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought

Date <i>01-01-16</i>		Payee name <i>Patchover Designs</i>		<i>214-728-6766</i>	
Amount (\$) <i>\$ 331.25</i>		Payee address; City; State; Zip Code <i>4716 Poppy Drive East Fort Worth TX 76137</i>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Custom Logo</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<i>T SHIRT</i>				

Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
Date <i>01-02-16</i>		Payee name <i>FREDRICK BROWNIE</i>				FILED TARRANT COUNTY 2016 FEB -8 PM 1:09 FRANK PHILLIPS ELECTIONS ADMINISTRATOR	
Amount (\$) <i>50.00</i>		Payee address; City; State; Zip Code <i>Homeless</i>					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS OUT FLYER & Food to Eat</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Raymond Millery</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>01-02-14</i>		5 Payee name <i>LONNIE COOPER</i>			
6 Amount (\$) <i>\$50.00</i>		7 Payee address; City; State; Zip Code <i>Homeless</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer plus Food to eat</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>01-02-14</i>		Payee name <i>DAVID CLEMONS</i>			
Amount (\$) <i>\$50.00</i>		Payee address; City; State; Zip Code <i>HOMELESS</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>PASS out Flyer plus Food to eat</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>01-02-14</i>		Payee name <i>LEE PORTER</i>			
Amount (\$) <i>\$50.00</i>		Payee address; City; State; Zip Code <i>HOMELESS</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>PASS out Flyer plus Food to eat</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

FILED
 TARRANT COUNTY
 2016 FEB -8 PM 1:09
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11-13-16</i>	5 Payee name <i>7-ELEVEN</i>	
6 Amount (\$) <i>\$47.08</i>	7 Payee address; City; State; Zip Code <i>1400 S. HULEN FORT WORTH TX 76133</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fuel For Election</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>11-13-16</i>	Payee name <i>SUSAN WOODROW</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>HOMELESS FORT WORTH TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS OUT FLYER plus Food to EAT</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>11-13-16</i>	Payee name <i>TREASA HORN</i>	
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>HOMELESS FORT WORTH TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out FLYER plus Food to EAT</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

BY: FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR
 2016 FEB - 8 PM 1:09
 TARRANT COUNTY
 FILED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME <i>Raymond Willis</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>11-23-16</i>		5 Payee name <i>JOHN LEROY</i>			
6 Amount (\$) <i>50.00</i>		7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer PLUS Food to Eat</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>11-23-16</i>		Payee name <i>JOHNATHAN WHITE</i>			
Amount (\$) <i>50.00</i>		Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>PASS out Flyer PLUS Food to Eat</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <i>11-04-16</i>		Payee name <i>JOHN LEROY</i>			
Amount (\$) <i>50.00</i>		Payee address; City; State; Zip Code <i>Homeless Fort Worth TX. 76104</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>PASS out Flyer PLUS Food to Eat</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

FILED
 TARRANT COUNTY
 2016 FEB -8 PM 1:09
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 FEB 8 PM 1:09
 RANKIN PHILLIPS
 CLERK
 ETHICS COMMISSION
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willey</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-04-16</i>	5 Payee name <i>PAUL McFARLAND</i>	
6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer PLUS Food to EAT</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <i>01-05-16</i>	Payee name <i>SHELL</i>
Amount (\$) <i>\$ 35.71</i>	Payee address; City; State; Zip Code <i>101 N CROWLEY RD FORT WORTH TX.</i>

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

Candidate / Officeholder name	Office sought	Office held
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Date <i>01-06-16</i>	Payee name <i>Tommy Reed</i>
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer PLUS Food to EAT</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Winniby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11-16-16</i>	5 Payee name <i>Alleyne Smith</i>	BY: ELECTIONS ADMINISTRATOR FRANK PHILLIPS 2016 FEB -8 PM 11:00 TARRANT COUNTY FILED
6 Amount (\$) <i>50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>	
8 PURPOSE OF EXPENDITURE <i>PASS OUT FLYER PLUS FOOD TO EAT</i>	(a) Category (See Categories listed at the top of this schedule) <i>PASS OUT FLYER PLUS FOOD TO EAT</i>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11-17-16</i>	Payee name <i>CONRAD TAYLOR</i>
Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH 76104</i>

PURPOSE OF EXPENDITURE <i>PASS OUT FLYER PLUS FOOD TO EAT</i>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11-17-16</i>	Payee name <i>JASON SEIER</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>

PURPOSE OF EXPENDITURE <i>PASS OUT FLYER PLUS FOOD TO EAT</i>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 2016 FEB - 8 PM 1:00
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond WILLIBY</i>	3 Filer (Ethics Commission Filers)
4 Date <i>01-07-16</i>	5 Payee name <i>Home DEPOT</i>	
6 Amount (\$) <i>141.89</i>	7 Payee address; City; State; Zip Code <i>7950 I-35 South Fwy Fort Worth TX 76134</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>METAL T Post FOR SIGNS</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-07-16</i>	Payee name <i>DERRICK SIMMONS</i>	
Amount (\$) <i>1,623.75</i>	Payee address; City; State; Zip Code <i>4900 SE Loop 820 Suite 204 Forest Hill TX 76140</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>45 BIG-YARD SIGNS FRONT AND BACK</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-08-16</i>	Payee name <i>KELLY HOWARD</i>	
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>HOMELESS FORT WORTH TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS OUT FLYER PLUS FOOD TO EAT</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

FILED
 TRARRANT COUNTY
 2016 FEB -8 PM 1:10
 FRANK PHILLIPS
 CLERK
 ETHICS COMMISSION
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer (Ethics Commission Filers)
4 Date <i>01-08-16</i>	5 Payee name <i>Peter Wilson</i>	
6 Amount (\$) <i>\$50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Pass out Flyer Plus Food to Eat</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-09-16</i>	Payee name <i>BENNY WILSON</i>	
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pass out Flyer Plus Food to Eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-09-16</i>	Payee name <i>Tim Osborne</i>	
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pass out Flyer Plus Food to Eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

BY: PHILIPPS
ELECTION ADMINISTRATOR
2016 FEB 8 PM 1:10
TARRANT COUNTY
FILED

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond WILLIAMS</i>	3 Filer (Ethics Commission Filers)
4 Date <i>01-10-16</i>	5 Payee name <i>Homeless Jones</i>	
6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer Plus Food to Eat</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <i>01-10-16</i>	Payee name <i>LEROY TENKINS</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer Plus Food to Eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <i>01-10-16</i>	Payee name <i>Fuel Shell</i>
Amount (\$) <i>\$41.73</i>	Payee address; City; State; Zip Code <i>101 N CROWLEY 76036</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>GASOLINE FOR ELECTION</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 CLERK
 JEFFREY R. PHILLIPS
 COUNTY ADMINISTRATOR
 FEB 8 PM 1:10

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-10-16</i>	5 Payee name <i>LOBANS</i>	
6 Amount (\$) <i>\$ 41.73</i>	7 Payee address; City; State; Zip Code <i>1125 N. BURLESON BLVD TX 76028</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Food For Employee's</i>	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-11-16</i>	Payee name <i>DRIEN Smith</i>
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-11-16</i>	Payee name <i>Rachella Epps</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

BY: ANK PHILLIPS
 ETHICS ADMINISTRATOR
 FILED
 TARRANT COUNTY
 JAN 13 2016
 PM 1:10

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilbur</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-12-16</i>	5 Payee name <i>Quinton Sanders</i>	
6 Amount (\$) <i>\$50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Pull up Poles out of the Ground & removed sign</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-12-16</i>	Payee name <i>SHELTON EASTERN</i>
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pull up Poles out of the Ground & removed signs</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-12-16</i>	Payee name <i>SHELL</i>
Amount (\$) <i>\$32.59</i>	Payee address; City; State; Zip Code <i>101 N CROWLEY RD CROWLEY TX 76036</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fuel For Election</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

FRANK SHILLIPS
 COUNTY ADMINISTRATOR
 6:53 - 8 PM 1:10
 TARRANT COUNTY
 FILER

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer <input checked="" type="checkbox"/> Ethics Commission <input type="checkbox"/> Filer(s)
4 Date <i>11-13-14</i>	5 Payee name <i>JOHNATHAN WHITE</i>	
6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Pull up poles I WAS REMOVED FROM ELECTION BALLOT</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11-13-14</i>	Payee name <i>Tommy REED</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>I WAS REMOVED FROM ELECTION BALLOT REMOVED SIGNS & POLES</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11-13-14</i>	Payee name <i>Jimmy ALFORD</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>4330 MOUNTAIN CREEK FORT WORTH TX. 76123</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>REMOVED Pole & signs From Lot's</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

2015 FEB -8 PM 1:10
 TARRANT COUNTY
 ETHICS COMMISSION
 FILER'S ADMINISTRATOR

1 Total pages Schedule F1:		2 FILER NAME <i>Raymond Wilhiby</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>11-15-14</i>		5 Payee name <i>HAROLD HAMMETH</i>			
6 Amount (\$) <i>\$ 500.00</i>		7 Payee address; City; State; Zip Code <i>4330 W VICTORY FORT WORTH TX. 76107</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <i>RETAIN A ATTY FOR ELECTION REPLACED BACK ON BALLOT</i>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>11-15-14</i>		Payee name <i>DERRICK SIMMON</i>			
Amount (\$) <i>\$ 300.00</i>		Payee address; City; State; Zip Code <i>4900 SE Loop 820 suite 204 Forest Hill 76140</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>VICTORY IN COURT ORDER MORE SIGNS</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <i>11-15-14</i>		Payee name <i>Jimmy ALFORD</i>			
Amount (\$) <i>\$ 50.00</i>		Payee address; City; State; Zip Code <i>4304 MOUNTAIN CREEK FORT WORTH TX 76123</i>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <i>REPLACE SIGN BACK INTO GROUND</i>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

BY ELECTRONIC MAIL
 2011 FEB 8 PM 1:10
 TARRANT COUNTY
 FILED
 PHILIPS
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission File #)
4 Date <i>01-15-16</i>	5 Payee name <i>Kelly Howard</i>	
6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>REPLACED SIGNS BACK WITH poles INTO the GROUND</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-15-16</i>	Payee name <i>JOHN LEROY</i>	
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>REPLACED poles back into the GROUND put up signs.</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-15-16</i>	Payee name <i>Forest Hill Lumber</i>	
Amount (\$) <i>\$ 28.33</i>	Payee address; City; State; Zip Code <i>3370 MANSFIELD AVE Fort Worth TX 76119</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Zip lock BAND with Cutter</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 26 FEB - 8 PM 1:10
 CLERK OF COURTS
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willis</i>	3 Filer ID (Political Commission Filer)
4 Date <i>01-16-16</i>	5 Payee name <i>Lonnie Coopland</i>	
6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Put down sign's plus Food to eat</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-16-16</i>	Payee name <i>Jimmy Alford</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>4304 Mountain Creek Fort Worth TX. 76123</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pull down sign's plus Food to eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-16-16</i>	Payee name <i>Ron Biedell</i>
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Put down sign's plus Food to eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-16-16</i>	5 Payee name <i>Shell</i>	BY: _____ FRANK PHILLIPS ELECTIONS ADMINISTRATOR 2016 FEB - 8 PM 1:10 TARRANT COUNTY FILED
6 Amount (\$) <i>\$ 28.92</i>	7 Payee address; City; State; Zip Code <i>101 N Fort Worth TX, 76036</i>	
8 PURPOSE OF EXPENDITURE <i>Fuel For Election</i>	(a) Category (See Categories listed at the top of this schedule) (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <i>01-17-16</i>	Payee name <i>Payless Fuel Center</i>	
Amount (\$) <i>\$ 40.23</i>	Payee address; City; State; Zip Code <i>3101 AIRPORT FREEWAY FORT WORTH TX.</i>	
PURPOSE OF EXPENDITURE <i>Fuel For Election</i>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		
Date <i>01-17-16</i>	Payee name <i>Tim Osborne</i>	
Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>	
PURPOSE OF EXPENDITURE <i>Pass out Flyer Plus Food to eat</i>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The instruction Guide explains how to complete this form.

FILED
TARRANT COUNTY
2016 FEB -8 PM 1:10
BY BANK PHILLIPS
ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1-17-16</i>	5 Payee name <i>FELIX JOHNSON</i>	
6 Amount (\$) <i>\$50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Pass out Flyer plus Food to eat.</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>1-17-16</i>	Payee name <i>Hayward Jones</i>
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pass out Flyer plus Food to eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-18-16</i>	Payee name <i>Tommy REED</i>
Amount (\$) <i>\$50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Pass out Flyer & Food to eat</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 2016 FEB 8 PM 1:10
 FRANK PHILLIPS
 ELECTION ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilkerson</i>	3 Filer ID # (Ethics Commission Filer)
4 Date <i>01-18-16</i>	5 Payee name <i>PAUL WILKERSON</i>	
6 Amount (\$) <i>\$50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer & Food to Eat</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-18-16</i>	Payee name <i>CHICKEN EXPRESS</i>	
Amount (\$) <i>17.49</i>	Payee address; City; State; Zip Code <i>8551 MEADOWBROOK BLVD. FORT WORTH 76120</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food For SERVANTS TEAM ELECTION</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-20-16</i>	Payee name <i>Home Depot</i>	
Amount (\$) <i>\$80.38</i>	Payee address; City; State; Zip Code <i>7950 I-35 South Freeway</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>13 GA STEEL U POST HEAVY DUTY</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	FILED TARRANT COUNTY 20 FEB -8 PM 1:10 STAN PHILLIPS ELECTIONS ADMINISTRATOR
4 Date <i>01-21-14</i>	5 Payee name <i>Shell</i>	
6 Amount (\$) <i>28.08</i>	7 Payee address; City; State; Zip Code <i>101 N. CROWLEY RD</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fuel For Election</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
Office held		

Date <i>01-21-14</i>	Payee name <i>Lonnie Wright</i>	
Amount (\$) <i>\$ 40.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Put Roles in the Ground & Signs Display</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
Office held		

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

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