


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:

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <i>Raymond</i> <i>E</i> NICKNAME LAST SUFFIX <i>WILKIBY</i>	OFFICE USE ONLY Date Received BY:  FRANK PHILLIPS ELECTIONS ADMINISTRATOR FILED TARRANT COUNTY 2016 FEB 22 AM 10:33 Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE <input type="checkbox"/> Change of Address	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>VIRNELDA</i> <i>J</i> NICKNAME LAST SUFFIX <i>LEWIS</i>	

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

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

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year THROUGH Month Day Year

01 / 22 / 16 *02 / 20 / 16*

11 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff Other Description
 General Special

12 OFFICE OFFICE HELD (if any) **13 OFFICE SOUGHT** (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Raymond E 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

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

FILED
TARRANT COUNTY
2016 FEB 22 AM 10:33
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

\$ 5,674.61

CONTRIBUTION
BALANCE

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

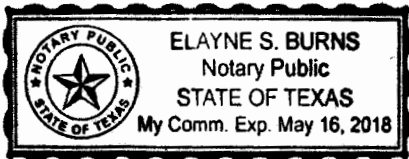
\$ 0

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 E Williby
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Raymond E. Williby, this the 22 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Raymond E Williby

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

02-01-16

STEPHEN C HORNING Lockwood
6 Contributor address; City; State; Zip Code

\$ 5,000.00

20 Woodland Ct MAUSFIELD TX 76063

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

02-16-16

ERIC McCullum

\$ 1,000.00

Contributor address; City; State; Zip Code

ARLINGTON TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

02-18-16

CHESTER, LUCKETT

\$ 500.00

Contributor address; City; State; Zip Code

4437 Grace St EAST CHGO IND 46312

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

FILED
 TARRANT COUNTY
 2016 FEB 22 AM 10:33
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR
 BY: _____

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

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.

BY
ELECTORAL
ADMINISTRATOR
2016
TARRANT COUNTY
FILED
NOV 22 AM 10:34

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12-05-16</i>	5 Payee name <i>Clyde ROOSEVELT SR.</i>	
6 Amount (\$) <i>\$45.00</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 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 <i>Vernon Williams</i>

Date <i>12-06-16</i>	Payee name <i>Vernon Williams</i>	
Amount (\$) <i>\$45.00</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 <i>Pate Dillon</i>

Date <i>12-06-16</i>	Payee name <i>Pate Dillon</i>	
Amount (\$) <i>\$45.00</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 <i>Pate Dillon</i>

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 Expenses
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (entering category not listed above)

The Instruction Guide explains how to complete this form.

EL PASO COUNTY
 CLERK PHILIP S. ADAMS
 ADMINISTRATOR
 2015 FEB 22 AM 10:33
 FILED
 TRARRANT COUNTY

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-22-16</i>	5 Payee name <i>Jimmy ALFORD</i>	
6 Amount (\$) <i>\$45.00</i>	7 Payee address; City; State; Zip Code <i>4304 MOUNTAIN CREST FORT WORTH TX 76123</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Put Pole's INTO GROUND AND PLACE Election Signs ON poles</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>01-22-16</i>	Payee name <i>ARTHUR CRENSHAW</i>	
Amount (\$) <i>\$45.00</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
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-22-16</i>	Payee name <i>GERALD LEWIS</i>	
Amount (\$) <i>\$45.00</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
	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 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 22 AM 10:33
 CLERK OF COUNTY CLERK
 BY _____
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willby</i>	3 Filer ID (Ethics Commission Filer)
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4 Date <i>01-23-16</i>	5 Payee name <i>THE Home Depot</i>
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6 Amount (\$) <i>\$9.70</i>	7 Payee address; City; State; Zip Code <i>7950 I-35 South Frwy FORT WORTH TX 76134</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>13 GA U-Post HEAVY Duty</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
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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>01-23-16</i>	Payee name <i>Jimmy Alford</i>
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Amount (\$) <i>\$40.00</i>	Payee address; City; State; Zip Code <i>4304 Mountain Crest Fort Worth TX 76123</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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>01-24-16</i>	Payee name <i>Quick Trip</i>
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Amount (\$) <i>35.40</i>	Payee address; City; State; Zip Code <i>12345 South FREEWAY</i>
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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 <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 | 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 22 AM 10:33
 CLERK OF COUNTY CLERK
 TARRANT COUNTY
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willis</i>	3 Filer ID (Ethics Commission Filer)
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4 Date <i>01-24-16</i>	5 Payee name <i>The Home Depot</i>
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6 Amount (\$) <i>18.81</i>	7 Payee address; City; State; Zip Code <i>2013 Hwy 377 KELLER TX. 76248</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Bracket Sign Holder</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
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>01-25-16</i>	Payee name <i>FELIX JOHNSON</i>
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Amount (\$) <i>50.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer plus food</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>01-26-16</i>	Payee name <i>PASS out JOHN HENSLEY</i>
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Amount (\$) <i>\$150.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer plus food</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.

BY: TARRANT COUNTY FILED
 ELECTION ADMINISTRATOR
 2016 FEB 24 10:34 AM

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>01-27-16</i>	5 Payee name <i>BT VALDEZ</i>	
6 Amount (\$) <i>\$40.00</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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>01-28-16</i>	Payee name <i>LEON POLK</i>	
Amount (\$) <i>\$45.00</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>01-28-16</i>	Payee name <i>7 ELEVEN 35418</i>	
Amount (\$) <i>41.09</i>	Payee address; City; State; Zip Code <i>35418 / 101 Sycamore School Rd. Fort Worth 76134</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fuel for Election Vehicle.</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.

FILED
 TARRANT COUNTY
 2016 FEB 22 AM 10:34
 CLERK PHILIPS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filer)
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4 Date <i>01-29-16</i>	5 Payee name <i>David Cooper</i>
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6 Amount (\$) <i>\$ 50.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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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
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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>01-30-16</i>	Payee name <i>WILLIAMS CHICKEN</i>
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Amount (\$) <i>\$ 36.38</i>	Payee address; City; State; Zip Code <i>4313 EAST BERRY FORT WORTH TX 76119</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food for election supporter</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>01-31-16</i>	Payee name <i>BT PORTLAND</i>
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Amount (\$) <i>\$ 50.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>
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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 <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 a category not listed above)
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The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 2016 FEB 22 AM 10:34
 BRANK PHILLIPS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilkby</i>	3 Filer ID (Ethics Commission Filer)
4 Date <i>02-01-16</i>	5 Payee name <i>RACE TRAX</i>	
6 Amount (\$) <i>\$32.38</i>	7 Payee address; City; State; Zip Code <i>620 E. BERRY ST FORT WORTH TX 76104</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 ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name	Office sought	Office held
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Date <i>02-01-16</i>	Payee name <i>DERRICK L SIMMONS</i>	
Amount (\$) <i>1,423.75</i>	Payee address; City; State; Zip Code <i>4900 SE LOOP 820 Suite 204</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>35 BIG YARD SIGNS FRONT AND BACK WITH PICTURE 100 BIG YARD SIGN F/B</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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Date <i>02-02-16</i>	Payee name <i>JESSIE VALDEZ</i>	
Amount (\$) <i>\$45.00</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 Flyers 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
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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.

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilhiby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-03-16</i>	5 Payee name <i>QUIKTRIP</i>	
6 Amount (\$) <i>\$38.78</i>	7 Payee address; City; State; Zip Code <i>1900 ALTA MESA BLVD FOOT WORTH TX</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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>02-04-16</i>	Payee name <i>Fred Johnson</i>	
Amount (\$) <i>\$40.00</i>	Payee address; City; State; Zip Code <i>Homeless FOOT 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
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Date <i>02-04-16</i>	Payee name <i>JASON WRIGHT</i>	
Amount (\$) <i>\$40.00</i>	Payee address; City; State; Zip Code <i>Homeless FOOT 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
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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.

8

FILED
TARRANT COUNTY
2016 FEB 22 PM 10:34
ELECTORAL ADMINISTRATION

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-04-16</i>	5 Payee name <i>THE Home Depot</i>	
6 Amount (\$) <i>\$112.70</i>	7 Payee address; City; State; Zip Code <i>7950 I-35 South FREEWAY Fort Worth TX 76134</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>locking cable tie sign holder sign frame METAL T- Post</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>02-04-16</i>	Payee name <i>STANLEY Billingsley</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>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
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Date <i>02-05-16</i>	Payee name <i>ALLEN WILLIBY</i>		
Amount (\$) <i>\$45.00</i>	Payee address; City; State; Zip Code <i>712 Collett Ct Crowley TX 76036</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Put down sign & Pass out Flyer.</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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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 Wilby</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>02-07-16</i>		5 Payee name <i>John Leroy</i>			
6 Amount (\$) <i>\$45.00</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>02-07-16</i>		Payee name <i>PAUL WILKERSON</i>			
Amount (\$) <i>\$45.00</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>02-07-16</i>		Payee name <i>SHELTON, EASTEN</i>			
Amount (\$) <i>\$45.00</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	

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 2 10:34
 TARRANT COUNTY
 FILED
 ETHICS COMMISSION
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>02-08-16</i>	5 Payee name <i>Tommy Reed</i>
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6 Amount (\$) <i>\$45.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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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
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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>02-08-16</i>	Payee name <i>Jason Wright</i>
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Amount (\$) <i>\$ 45.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>02-08-16</i>	Payee name <i>Quinton Jones</i>
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Amount (\$) <i>\$ 45.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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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 <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 a category not listed above)

The Instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 CLERK
 22 AM 10:34
 ETHEL P. HILLIPS
 CLERK
 TEXAS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Hillery</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02/08/16</i>	5 Payee name <i>SHELL</i>	
6 Amount (\$) <i>27.97</i>	7 Payee address; City; State; Zip Code <i>101 N. CRAWLEY RD.</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>02-09-16</i>	Payee name <i>Auto Zone</i>	
Amount (\$) <i>8.99</i>	Payee address; City; State; Zip Code <i>929 E. BERRY ST FORT WORTH TX</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Wire Ties</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

Date <i>02-09-16</i>	Payee name <i>MIDNIGHT HOUR DESIGNS</i>	
Amount (\$) <i>\$ 188.00</i>	Payee address; City; State; Zip Code <i>8525 BRUSHY CREEK FORT WORTH 76118</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>ELECTION FLYER</i> <i>Amount - 4,000.</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	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.

FILED
 TARRANT COUNTY
 2016 FEB 22 AM 10:34
 CLERK OF COUNTY CLERK
 H. GANN PHILLIPS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-09-14</i>	5 Payee name <i>John Renfro</i>	
6 Amount (\$) <i>\$45.00</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 <i>Peter Whitten</i>

Date <i>02-09-14</i>	Payee name <i>Peter Whitten</i>
Amount (\$) <i>\$45.00</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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Peter Whitten</i>

Date <i>02-10-14</i>	Payee name <i>7-ELEVEN</i>
Amount (\$) <i>\$27.18</i>	Payee address; City; State; Zip Code <i>300 VAUGHN BLVD FT. WORTH TX. 76119</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
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Peter Whitten</i>

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 category not listed above)
Credit Card Payment			

The instruction Guide explains how to complete this form.

FILED
 TARRANT COUNTY
 FEB 24 2016
 AM 10:34
 PHILLIPS
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willby</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>02-11-16</i>	5 Payee name <i>John Dolan</i>
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6 Amount (\$) <i>\$ 32.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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
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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>02-11-16</i>	Payee name <i>GREGORY DERNIGAN</i>
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Amount (\$) <i>\$ 32.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX. 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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>02-11-16</i>	Payee name <i>JACK WILLIAMS</i>
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Amount (\$) <i>\$ 32.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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 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>02-11-16</i>	5 Payee name <i>ADRIAN LOPEZ "FRO"</i>	
6 Amount (\$) <i>\$32.00</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</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>02-11-16</i>	Payee name <i>WHATABURGER</i>	
Amount (\$) <i>\$32.35</i>	Payee address; City; State; Zip Code <i>125 SYCAMORE SCHOOL RD.</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>LUNCH FOR ELECTION HELPER</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>02-12-16</i>	Payee name <i>RUBEN SANCHEZ</i>	
Amount (\$) <i>\$32.00</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>Homeless PASS OUT FLYER</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 & 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 Williby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12-12-16</i>	5 Payee name <i>TACO CASA</i>	BY: FRANK PHILLIPS ELECTIONS ADMINISTRATOR 016 FEB 22 AM 10:34 FILED TARRANT COUNTY TX 76119
6 Amount (\$) <i>4.63</i>	7 Payee address; City; State; Zip Code <i>8333 WICHITA ST. FORT WORTH TX 76119</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Feed my Helpere</i>	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12-13-16</i>	Payee name <i>DAVID L BROOKS</i>	
Amount (\$) <i>\$ 65.00</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</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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Date <i>12-13-16</i>	Payee name <i>ADRIAN LOPEZ FRO</i>	
Amount (\$) <i>\$ 65.00</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</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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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
 FEB 22 AM 10:35
 RAIN PHILLIPS
 JUDGE ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12-13-16</i>	5 Payee name <i>JACK WILLIAMS</i>	
6 Amount (\$) <i>\$ 65.00</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</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>12-13-16</i>	Payee name <i>JOHN DOLAN</i>
Amount (\$) <i>\$ 65.00</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</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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Date <i>12-13-16</i>	Payee name <i>Shell</i>
Amount (\$) <i>\$ 28.64</i>	Payee address; City; State; Zip Code <i>8654 S. FREEWAY</i>
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>GAS 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

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.

2016 FEB 22 10:35
 TARRANT COUNTY
 FILED
 CLERK OF COUNTY CLERK
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williams</i>	3 Filer ID: (Ethics Commission Filers)
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4 Date <i>12-13-16</i>	5 Payee name <i>WHATA BURGER</i>
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6 Amount (\$) <i>\$ 45.84</i>	7 Payee address; City; State; Zip Code <i>125 SYCAMORE SCHOOL RD.</i>
----------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>LUNCH FOR ELECTION Employee</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>12-13-16</i>	Payee name <i>DOLLARS GENERAL STORE</i>
-------------------------	--

Amount (\$) <i>10.63</i>	Payee address; City; State; Zip Code <i>200 Roberts St</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Tape For Flyer</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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Date <i>12-14-16</i>	Payee name <i>Jack William</i>
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Amount (\$) <i>\$40.00</i>	Payee address; City; State; Zip Code <i>Homeless Foot Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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
 FEB 22 AM 10:35
 RAY PHILLIPS
 FORMS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Williby</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>02-14-16</i>	5 Payee name <i>ADRIAN LOPEZ FRO</i>
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6 Amount (\$) <i>\$40.00</i>	7 Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>02-14-16</i>	Payee name <i>Church's</i>
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Amount (\$) <i>16.83</i>	Payee address; City; State; Zip Code <i>3221 MANSFIELD Fort Worth 76119</i>
-----------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food For Election Employee'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
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>02-14-16</i>	Payee name <i>Peter WRITTEN</i>
-------------------------	------------------------------------

Amount (\$) <i>\$40.00</i>	Payee address; City; State; Zip Code <i>Homeless FORT WORTH TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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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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.

2016 FEB 22 AM 10:35
 TARRANT COUNTY
 FILED
 CLERK OF COURTS
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilbur</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>12-15-16</i>	5 Payee name <i>Lonnie Cooper</i>	
6 Amount (\$) <i>\$ 60.00</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</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>12-15-16</i>	Payee name <i>David h. Brooks</i>	
Amount (\$) <i>\$ 32.00</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</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>12-15-16</i>	Payee name <i>Jack Williams</i>	
Amount (\$) <i>\$ 32.00</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</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
 ARKANSAS COUNTY
 FEB 22 AM 10:35
 TERRY CHILLIPS
 CLERK
 ETHICS COMMISSION

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

4 Date *02-15-16* 5 Payee name *NATHAN MOREANO*

6 Amount (\$) *\$32.00* 7 Payee address; City; State; Zip Code *Homeless Fort Worth TX 76104*

8 PURPOSE OF EXPENDITURE *PASS out Flyer.*
 (a) Category (See Categories listed at the top of this schedule)
 (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 Office held

Date *02-15-16* Payee name *CHICKEN & SEAFOOD*

Amount (\$) *\$56.63* Payee address; City; State; Zip Code *3854 EAST LANCASTER AVE 76119*

PURPOSE OF EXPENDITURE *Food for Election Employee.*
 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 *02-16-16* Payee name *JACK WILLIAM*

Amount (\$) *\$48.00* Payee address; City; State; Zip Code *Homeless Fort Worth TX 76104*

PURPOSE OF EXPENDITURE *PASS out Flyer*
 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 Expense | Fees | Office Overhead/Rental Expense | Transportation/Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing 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
 2012 FEB 22 PM 10:35
 CLERK PHILIP S. ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilkiby</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>02-16-16</i>	5 Payee name <i>QUINTON JONES</i>
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6 Amount (\$) <i>\$ 48.00</i>	7 Payee address; City; State; Zip Code <i>Homeless Fort Worth TX. 76104</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>02-16-16</i>	Payee name <i>Louise Cooper</i>
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Amount (\$) <i>\$ 48.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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>02-16-16</i>	Payee name <i>Ruben Sanchez</i>
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Amount (\$) <i>\$ 48.00</i>	Payee address; City; State; Zip Code <i>Homeless Fort Worth TX 76104</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>PASS out Flyer</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.

2015 FEB 22 AM 10:35
 TARRANT COUNTY
 CLERK OF COURTS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-17-14</i>	5 Payee name <i>Kathleen Ford</i>	
6 Amount (\$) <i>\$ 48.00</i>	7 Payee address; City; State; Zip Code <i>131 Parker Henderson ^{lot} 45 Fort Worth TX 76119</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>pass out Flyer</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>02-17-14</i>	Payee name <i>Sandy Johnson</i>
Amount (\$) <i>\$ 48.00</i>	Payee address; City; State; Zip Code <i>2829 Donalee St Fort Worth TX 76119</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>pass out Flyer</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>02-17-14</i>	Payee name <i>Debra Walker</i>
Amount (\$) <i>\$ 48.00</i>	Payee address; City; State; Zip Code <i>4313 Wilbarger St Fort Worth TX 76119</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>pass out Flyer</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 | 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.

BY: [Signature]
 FILED
 TARRANT COUNTY
 FEB 22 AM 10:35
 CLERK PHILIP S. [Signature]
 ELECTIONS ADMINISTRATOR

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

4 Date **12-17-16** 5 Payee name **SHARON WILKERSON**

6 Amount (\$) **\$ 48.00** 7 Payee address; City; State; Zip Code **Homeless Fort Worth TX 76104**

8 **PURPOSE OF EXPENDITURE** (a) Category (See Categories listed at the top of this schedule) **Pass out Flyer** (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 Office held

Date **12-17-16** Payee name **Michael Dubar**

Amount (\$) **\$ 289.50** Payee address; City; State; Zip Code **Homeless Fort Worth TX 76104**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **NEW Flyer #572499.** 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 **12-18-16** Payee name **CHARLES WRIGHT**

Amount (\$) **\$ 48.00** Payee address; City; State; Zip Code **Homeless Fort Worth TX 76104**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Pass out Flyer** 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
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
 2011 FEB 22 AM 10:35
 FRANK PHILLIPS
 COUNTY ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>10-2-18-16</i>	5 Payee name <i>Adrian Lopez Fro</i>	
6 Amount (\$) <i>\$ 48.00</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</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>10-2-18-16</i>	Payee name <i>JOHN DOLAN</i>	
Amount (\$) <i>\$ 48.00</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</i>	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>10-2-18-16</i>	Payee name <i>CHEVRON</i>	
Amount (\$) <i>37.86</i>	Payee address; City; State; Zip Code <i>700 E BERRY FORT WORTH TX 76119</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
	9 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
 BY: [Signature]
 CLERK
 ARRAVANT COUNTY
 FEB 22 AM 10:35
 KIM PHILLIPS
 ELECTIONS ADMINISTRATOR

1 Total pages Schedule F1: <i>02-19-16</i>	2 FILER NAME <i>Raymond Williams</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-19-16</i>	5 Payee name <i>JACK WILLIAMS</i>	
6 Amount (\$) <i>\$32.00</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</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>02-19-16</i>	Payee name <i>David Brooks</i>	
Amount (\$) <i>\$32.00</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</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>02-19-16</i>	Payee name <i>Lounie Cooper</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>Pass out Flyer</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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | | 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	2 FILER NAME <i>Raymond Willey</i>		3 Filer 19 (Ethics Commission Filers)
4 Date <i>02-19-16</i>	5 Payee name <i>John Dolan</i>		FILED TARRANT COUNTY 16 FEB 22 AM 10:30 FRANK PHILLIPS ELECTIONS ADMINISTRATION
6 Amount (\$) <i>\$32.00</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.</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>02-19-16</i>	Payee name <i>Debra Johnson</i>	
Amount (\$) <i>\$32.00</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</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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Date <i>02-19-16</i>	Payee name <i>TEXAS STYLE CHICKEN & SEAFOOD</i>	
Amount (\$) <i>\$27.09</i>	Payee address; City; State; Zip Code <i>3854 EAST LANCASTER AVE FORT WORTH</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food for Election Employee</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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

5307.78

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 22 AM 10:35
 CLERK OF COUNTY CLERK
 ELLIOTT
 ADMINISTRATOR

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Willis</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>02-20-16</i>	5 Payee name <i>LONNIE COOPER</i>	
6 Amount (\$) <i>\$48.00</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</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>02-20-16</i>	Payee name <i>David L Brooks</i>	
Amount (\$) <i>\$48.00</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.</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>02-20-16</i>	Payee name <i>JACK WILLIAMS</i>	
Amount (\$) <i>\$48.00</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.</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.

FILED
 TARRANT COUNTY
 2014 FEB 22 AM 10:35
 CLERK OF COUNTY CLERK
 ELECTIONS ADMINISTRATOR

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

4 Date *02-20-14* 5 Payee name *SHELL*

6 Amount (\$) *31.68* 7 Payee address; City; State; Zip Code
101 N CROWLEY RD.

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) *Fuel For Election Vehicle* (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 Office held

Date *02-20-14* Payee name *TEXAS STYLE CHICKEN & SEAFOOD*

Amount (\$) *\$ 40.65* Payee address; City; State; Zip Code
3854 EAST LANCASTER AVE.

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) *Food For Election Employee.* 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 *02-20-16* Payee name *GENERAL STORE*

Amount (\$) *3* Payee address; City; State; Zip Code
200 ROBERTS ST

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) *Tape For Flyer* 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 Expense | 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.

BY
 ELECTIONS ADMINISTRATOR
 BRANK PHILLIPS
 2016 FEB 22 AM 10:35
 TARRANT COUNTY
 FILED

1 Total pages Schedule F1:	2 FILER NAME <i>Raymond Wilby</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2-20-16</i>	5 Payee name <i>JOAN DOLAN</i>	
6 Amount (\$) <i>\$ 48.00</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</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>2-20-16</i>	Payee name <i>Peter Weitten</i>	
Amount (\$) <i>\$ 48.00</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</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>2-20-16</i>	Payee name <i>NATHAN MOREANO</i>	
Amount (\$) <i>\$ 48.00</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</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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