

**CANDIDATE/OFFICERHOLDER  
CAMPAIGN FINANCE REPORT**

07-16-03 P03:03 IN

**Form C/OH  
Cover Sheet PG 1**

The C/OH Instruction Guide Explains how to complete this form.		1. ACCOUNT# 03:02 IN (Ethics Commission filers)		2. Total pages filed:		
3 ...CANDIDATE/ OFFICERHOLDER NAME	TITLE	FIRST	MI	OFFICE USE ONLY		
	Honorable Clyde W					
	NICKNAME	LAST	SUFFIX	OFFICIAL RECORD CITY SECRETARY FT. WORTH, TEX		
	Picht					
4. CANDIDATE OFFICERHOLDER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE):	APT/SUITE #:	CITY:	STATE:	ZIP CODE:	
	5016 Monarda Way, Fort Worth TX 76123-1812					
5. CAMPAIGN TREASURER NAME	TITLE	FIRST	MI	Receipt #		
	Harry C					
	NICKNAME	LAST	SUFFIX	RD/PM	Amount	
	Purser			Date Processed		
6. CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE):	APT/SUITE #:	CITY:	STATE:	ZIP CODE:	
	3312 Denbury Drive, Fort Worth TX 76133					
7. CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	( 817 )	294-8381				
8. REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30 <sup>th</sup> day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15 <sup>th</sup> day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8 <sup>th</sup> day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH-FR)					
9. PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	/ 01	/ 2003	THROUGH	06 / 31	/ 2003
10. ELECTION	Month	ELECTION DATE Day	Year	ELECTION TYPE		
	05	/ 03	/ 2003	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11. OFFICE	OFFICE HELD (if any) City Council			12. OFFICE SOUGHT (if known)		
13. DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	** Direct campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **					
<input type="checkbox"/> additional pages	Name					
	Address/PO Box:	Apt./Suite #:	City:	State:	Zip Code	

GO TO PAGE 2

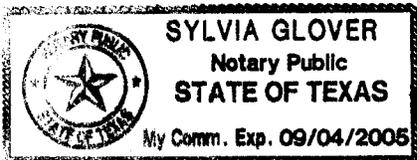
**CANDIDATE/OFFICEHOLDER REPORT  
SUPPORT & TOTALS**

**FORM CH/O  
COVER SHEET PG 2**

<b>14. C/OH NAME</b>		<b>15. ACCOUNT#</b>				
<b>16. SUPPORTING POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	** This listing includes political expenditures 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. ***					
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>				
		<b>COMMITTEE ADDRESS</b>				
	<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>				
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>					
<b>17. NO REPORTABLE ACTIVITY</b>	Month	Day	Year	Month	Day	Year
<b>18. CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS( OTHER THAN PLEDGED, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		<b>\$ 1516</b>			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		<b>\$ 29841</b>			
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		<b>\$ 282.95</b>			
	4. TOTAL POLITICAL EXPENDITURES		<b>\$ 21731</b>			
<b>OUTSTANDING LOAN TOTALS</b>	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE-LAST DAY OF THE REPORTING PERIOD					

**19. AFFIDAVIT**

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



AFFIX NOTARY STAMP/SEAL ABOVE

*[Handwritten Signature]*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

Sworn to and subscribed before me by Clyde Licht this the 16<sup>th</sup> day of July, 192003, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*      Sylvia Glover      Notary  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

4. Date 1/27/03	5. Full name of contributor Seymour J Dunne	out of state PAC	Amount of contribution (\$) 150	In-kind contribution description(if applicable)
	6. Contributor address: City: State: Zip Code PO Box 590, Lukeville AZ 85341			

 Principal occupation  
Retired

Employer (optional)

Date 1/27/03	Full name of contributor James A Ryffel	out of state PAC	Amount of contribution (\$) 500	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 3113 S Univ. Fort Worth TX 76109			

 Principal occupation  
Development

Employer (optional)

Date 3/27/03	Full name of contributor Don Woodard	out of state PAC	Amount of contribution (\$) 50	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 1300 S Univ. Fort Worth TX 76107			

 Principal occupation  
Ins.

Employer (optional)

Date 3/28/03	Full name of contributor Glenn Lynch	out of state PAC	Amount of contribution (\$) 1000	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 2920 Sycamore Rd, Fort Worth TX 76133			

 Principal occupation  
Development

Employer (optional)

Date 4/13/03	Full name of contributor Ann W Marion	out of state PAC	Amount of contribution (\$) 1000	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 801 Cherry St. Fort Worth TX 76102Fort Worth TX			

 Principal occupation  
Philanthropist

Employer (optional)

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

4. Date 4/11/03	5. Full name of contributor Lee J Chapman	out of state PAC	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
	6. Contributor address: City: State: Zip Code One Summit Av., Fort Worth TX 76102			

 Principal occupation  
Atty

Employer (optional)

Date 5/28/03	Full name of contributor Cass O Edwards	out of state PAC	Amount of contribution (\$) 250	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 4200 So Hulen St. Fort Worth TX 76109			

 Principal occupation  
Development

Employer (optional)

Date 5/28/03	Full name of contributor James Ryffel	out of state PAC	Amount of contribution (\$) 500	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 3113 S Univ. Fort Worth TX 76109			

 Principal occupation  
Devel.

Employer (optional)

Date 5/28/03	Full name of contributor Albert Komatsu	out of state PAC	Amount of contribution (\$) 100	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 802 Roaring Springs Rd. Fort Worth TX 76114			

 Principal occupation  
Architect

Employer (optional)

Date 5/28/03	Full name of contributor Beach-North Tarrant LTD	out of state PAC	Amount of contribution (\$) 1000	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code 3701 W Northwest Hwy Dallas TX 75228			

 Principal occupation  
Developmentt

Employer (optional)

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

4. Date 6/12/03	5. Full name of contributor Meto Milteff	out of state PAC	Amount of contribution (\$) 500	In-kind contribution description(if applicable)
	6. Contributor address: City: State: Zip Code 2821 Lackland Rd., Fort Worth TX 76116			

Principal occupation Atty	Employer (optional)
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Date 6/12/03	Full name of contributor Thermacor Process LP	out of state PAC	Amount of contribution (\$) 500	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 1670 Hicks Field Rd. Fort Worth TX 76131			

Principal occupation Unk	Employer (optional)
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Date 3/27/03	Full name of contributor K-PAC	out of state PAC	Amount of contribution (\$) 500	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code 201 Main. Fort Worth TX 76102			

Principal occupation PAC	Employer (optional)
-----------------------------	---------------------

Date 3/27/03	Full name of contributor Committee for Public Safety	out of state PAC	Amount of contribution (\$) 1500	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code Fort Worth TX 76102			

Principal occupation PAC	Employer (optional)
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Date 3/27/03	Full name of contributor Committee for Public Safety	out of state PAC	Amount of contribution (\$) 1500	In-kind contribution description(if applicable)
	Contributor address: City: State: Zip Code Fort Worth TX 76102			

Principal occupation PAC	Employer (optional)
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ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

4. Date

3/27/03

5. Full name of contributor

James Nichols

out of state PAC

Amount of

contribution (\$)

100

 In-kind contribution  
description(if applicable)

6. Contributor address: City: State: Zip Code

4055 Int'l Plaza, Fort Worth TX 76109

 Principal occupation  
eng

Employer (optional)

Date

3/27/03

 Full name of contributor  
Robert Herchert

out of state PAC

Amount of

contribution (\$)

100

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
4055 Int'l Plaza, Fort Worth TX 76109

 Principal occupation  
eng

Employer (optional)

Date

3/27/03

 Full name of contributor  
PSEL-PAC

out of state PAC

Amount of

contribution (\$)

500

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
201 Main, Fort Worth TX 76102

 Principal occupation  
PAC

Employer (optional)

Date

3/27/03

 Full name of contributor  
F W Harrison

out of state PAC

Amount of

contribution (\$)

1500

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
Dallas TX

 Principal occupation  
Development

Employer (optional)

Date

3/27/03

 Full name of contributor  
Robert Hobbs

out of state PAC

Amount of

contribution (\$)

500

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
8113 Anchorage PL., Fort Worth TX 76135

 Principal occupation  
Recreation

Employer (optional)

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

 4. Date  
3/27/03

 5. Full name of contributor out of state PAC  
Good Gov't Fund

 Amount of contribution (\$)   
500

In-kind contribution description(if applicable)

 6. Contributor address: City: State: Zip Code  
201 Main St, Fort Worth TX 76109

 Principal occupation  
PAC

Employer (optional)

 Date  
3/27/03

 Full name of contributor out of state PAC  
Bobby Cox

 Amount of contribution (\$)   
1000

In-kind contribution description(if applicable)

 Contributor address: City: State: Zip Code  
Fort Worth TX

 Principal occupation  
Restaurants

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Steve Hawkins

 Amount of contribution (\$)   
1500

In-kind contribution description(if applicable)

 Contributor address: City: State: Zip Code  
7755 Bellaire Dr. So. Fort Worth TX 76132

 Principal occupation  
Builder

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Fort Worth Firefighters

 Amount of contribution (\$)   
2000

In-kind contribution description(if applicable)

 Contributor address: City: State: Zip Code  
417 No Retta, Fort Worth TX 76111

 Principal occupation  
PAC

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Jason Potter

 Amount of contribution (\$)   
700

In-kind contribution description(if applicable)

 Contributor address: City: State: Zip Code  
7860 Rogue River Trail, Fort Worth TX 76137

 Principal occupation  
Recreation

Employer (optional)

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

 4. Date  
**5/02/03**

 5. Full name of contributor out of state PAC  
Joseph E Kubes

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 6. Contributor address: City: State: Zip Code  
6908 Church Park Dr., Fort Worth TX 76133

 Principal occupation  
Law Enforcement

Employer (optional)

 Date  
**5/02/03**

 Full name of contributor out of state PAC  
Neil Anderson

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
.5529 Meadow Haven Dr. Fort Worth TX 76132

 Principal occupation  
Ret.

Employer (optional)

 Date  
**5/02/03**

 Full name of contributor out of state PAC  
Linebarger Blair Goggan et. al.

 Amount of  
contribution (\$)
   
1500

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
PO Box 17426, Austin TX 78760

 Principal occupation  
Attys

Employer (optional)

 Date  
**5/02/03**

 Full name of contributor out of state PAC  
Reed Pigman Jr

 Amount of  
contribution (\$)
   
250

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
200 Texas Way, Fort Worth TX 76106

 Principal occupation  
Aviation

Employer (optional)

 Date  
**5/02/03**

 Full name of contributor out of state PAC  
James Dunaway

 Amount of  
contribution (\$)
   
250

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
1501 Merrimac Cir., Fort Worth TX 76107

 Principal occupation  
Development

Employer (optional)

**ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED**
**If contributor is out-of state PAC, please see instruction guide for additional reporting requirements.**

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date 5/02/03	5. Full name of contributor Joe Thompson out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
6. Contributor address: City: State: Zip Code 4809 Brockton Ct., Fort Worth TX 76132			
Principal occupation Utilities		Employer (optional)	
Date 5/02/03	Full name of contributor Jearl Walker out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code .8917 Bal Lake Dr. Fort Worth TX 76116			
Principal occupation Ret.		Employer (optional)	
Date 5/02/03	Full name of contributor William Meadows out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 3904 Hamilton, Fort Worth TX 76107			
Principal occupation Real Prop		Employer (optional)	
Date 5/02/03	Full name of contributor Greater FW Assoc of Realtors out of state PAC	Amount of contribution (\$) 2500	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 2650 Parkview Dr, Fort Worth TX 76106			
Principal occupation PAC		Employer (optional)	
Date 5/02/03	Full name of contributor Apartment Assoc of Tarrant Cnty out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 6350 Baker Blvd., Fort Worth TX 76116			
Principal occupation Real Estatet		Employer (optional)	

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

 2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

 4. Date  
5/02/03

 5. Full name of contributor out of state PAC  
Randall Gideon

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 6. Contributor address: City: State: Zip Code  
3812 Monticello., Fort Worth TX 76107

 Principal occupation  
Architect

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Gary K Nelson

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
7116 Francisco Dr. Fort Worth TX 76133

 Principal occupation  
Ret.

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Monnie Sagoo

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
5020 Monarda Way, Fort Worth TX 76123

 Principal occupation  
Pharma.

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
Ned Burleson

 Amount of  
contribution (\$)
   
100

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
1814 Windlea Dr, Euless TX 76040

 Principal occupation  
Env Eng

Employer (optional)

 Date  
5/02/03

 Full name of contributor out of state PAC  
James Leggett

 Amount of  
contribution (\$)
   
1000

 In-kind contribution  
description(if applicable)

 Contributor address: City: State: Zip Code  
PO Box 3540 Fort Worth TX 76147

 Principal occupation  
Adult Bev

Employer (optional)

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date 5/02/03	5. Full name of contributor G Malcolm Louden out of state PAC	Amount of contribution (\$) 1500	In-kind contribution description(if applicable)
6. Contributor address: City: State: Zip Code 500 W 7th St., Fort Worth TX 76102			
Principal occupation Devel.		Employer (optional)	
Date 5/02/03	Full name of contributor Taylor Gandy out of state PAC	Amount of contribution (\$) 500	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 1731 River Run. Fort Worth TX 76107			
Principal occupation Devel.		Employer (optional)	
Date 5/02/03	Full name of contributor James Dubose out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code PO Box 2990, Fort Worth TX 76113			
Principal occupation unk		Employer (optional)	
Date 5/02/03	Full name of contributor Ronald R Norman out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 6300 Ridglea Pl., Fort Worth TX 76116			
Principal occupation Land & Cattle		Employer (optional)	
Date 5/02/03	Full name of contributor Gene Paul Pinson out of state PAC	Amount of contribution (\$) 100	In-kind contribution description(if applicable)
Contributor address: City: State: Zip Code 134-B No Bailey , Fort Worth TX 76107			
Principal occupation Ret		Employer (optional)	

ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1. Total pages Schedule A:

2. FILER NAME  
**Clyde Picht**

3. ACCOUNT # (Ethics Commission filers)

4. Date  
4/11/03

5. Full name of contributor out of state PAC  
Harold Sample

Amount of  
contribution (\$)   
500

In-kind contribution  
description(if applicable)

6. Contributor address: City: State: Zip Code  
7953 Belladonna, Fort Worth TX 76123

Principal occupation  
CPA.

Employer (optional)

Date  
4/11/03

Full name of contributor out of state PAC  
Richard Spraberry

Amount of  
contribution (\$)   
500

In-kind contribution  
description(if applicable)

Contributor address: City: State: Zip Code  
7508 Pine St. Fort Worth TX 76134

Principal occupation  
Devel.

Employer (optional)

Date  
4/11/03

Full name of contributor out of state PAC  
Michael A Noskin

Amount of  
contribution (\$)   
100

In-kind contribution  
description(if applicable)

Contributor address: City: State: Zip Code  
6025 Sunscape, Fort Worth TX 76123

Principal occupation  
Cmptr analyst

Employer (optional)

Date

Full name of contributor out of state PAC

Amount of  
contribution (\$)

In-kind contribution  
description(if applicable)

Contributor address: City: State: Zip Code

Principal occupation

Employer (optional)

Date

Full name of contributor out of state PAC

Amount of  
contribution (\$)

In-kind contribution  
description(if applicable)

Contributor address: City: State: Zip Code

Principal occupation  
Ret

Employer (optional)

**ATTACHED ADDITIONAL COPIES OF THIS FORM AS NEEDED**

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

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form		1. Total pages Schedule F:  10	
2. FILER NAME  Clyde Picht		3. ACCOUNT # (Ethics Commission filers)	
4. Date  1/16/03	5. Payee name White Stone Golf Club	7. Amount (\$)  100	
6. Payee address : City: State: Zip Code  Hwy 377, Benbrook TX			
8. Purpose of expenditure  Golf fund raiser deposit		9. **Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date  1/16/03	Payee name T Kayoe Designs	Amount (\$)  250	
Payee address : City: State: Zip Code  2918 So Cooper, Arlington TX 76015			
Purpose of expenditure  Golf Fund Raiser towels		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date  2/08/03	Payee name Da Village	Amount (\$)  70	
Payee address : City: State: Zip Code Fort Worth TX			
Purpose of expenditure  Charitable Contribution		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form		1. Total pages Schedule F:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date <b>1/02/03</b>	5. Payee name CompUSA	7. Amount (\$) <b>107.16</b>	
6. Payee address : City: State: Zip Code 4465 Bryant Irvin Rd, Fort Worth TX			
8. Purpose of expenditure Office Equipment		9. **Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>1/11/03</b>	Payee name Benbrook Stables	Amount (\$) <b>75</b>	
Payee address : City: State: Zip Code Hwy 377 Benbrook TX			
Purpose of expenditure Horse rental for parade		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>2/06/03</b>	Payee name AMEX	Amount (\$) <b>295.02</b>	
Payee address : City: State: Zip Code PO Box 680448 Dallas TX 75265			
Purpose of expenditure Political dinner		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form

1. Total pages Schedule F:

2. FILER NAME

Clyde Picht

3. ACCOUNT # (Ethics Commission filers)

4. Date

2/06/03

5. Payee name  
Roadrunner Web Services

6. Payee address : City: State: Zip Code

6816 Fortune Rd, Fort Worth TX 76116

7.

Amount  
(\$)

215.98

8. Purpose of expenditure

Web Hosting

9. \*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

2/27/03

Payee name  
Costco

Payee address : City: State: Zip Code

5300 Overton Ridge Blvd, Fort Worth TX 76132

Amount  
(\$)

261.19

Purpose of expenditure

Office Equipment

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

3/10/03

Payee name  
Central MktPayee address : City: State: Zip Code  
4651 West Freeway, Fort Worth TX 76107Amount  
(\$)

97.68

Purpose of expenditure

Food for fund raiser

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form

1. Total pages Schedule F:

2. FILER NAME

Clyde Picht

3. ACCOUNT # (Ethics Commission filers)

4. Date

3/11/03

5. Payee name  
Air Force Association7. Amount  
(\$)

100

6. Payee address : City: State: Zip Code  
Fort Worth TX 76116

8. Purpose of expenditure

Dinner Event

9. \*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

3/16/03

Payee name  
T Kayoe DesignsAmount  
(\$)

203

Payee address : City: State: Zip Code

2918 So Cooper, Arlington TX 76015

Purpose of expenditure

Golf Fund raiser towels

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

3/24/03

Payee name  
City of Fort WorthAmount  
(\$)

496.87

Payee address : City: State: Zip Code  
6400 Pecan Valley Dr, Fort Worth TX

Purpose of expenditure

Tournament golf balls

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form

1. Total pages Schedule F:

2. FILER NAME

Clyde Picht

3. ACCOUNT # (Ethics Commission filers)

4. Date

3/11/03

5. Payee name  
Clyde Picht

7.

Amount  
(\$)

777

6. Payee address : City: State: Zip Code  
5016 Monarda Way, Fort Worth TX 76123

8. Purpose of expenditure

Reinburse web hosting from Earthlink

9. \*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

5/16/03

Payee name  
Sportswear GraphicsAmount  
(\$)

389.70

Payee address : City: State: Zip Code

110 St Louis Av., Fort Worth TX 76104

Purpose of expenditure

Ball Caps

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

5/16/03

Payee name  
Best BuyAmount  
(\$)

560.69

Payee address : City: State: Zip Code  
5700 SW Loop 820, Fort Worth TX 76132

Purpose of expenditure

Office Equipment

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form		1. Total pages Schedule F:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date <b>5/16/03</b>	5. Payee name Don Doyle	7. Amount (\$) <b>97.16</b>	
6. Payee address : City: State: Zip Code 3724 Wilkie Way, Fort Worth TX 76133			
8. Purpose of expenditure Reimburse cost of golf prizes		9. **Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name Brenda Tillman Campaign	Amount (\$) <b>500</b>	
Payee address : City: State: Zip Code 7709 Skylake Dr.Fort Worth TX 76179			
Purpose of expenditure Political contribution		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name Railhead Smokehouse	Amount (\$) <b>782.11</b>	
Payee address : City: State: Zip Code 2900 Montgomery, Fort Worth TX 76107			
Purpose of expenditure Golf Tournament food		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form		1. Total pages Schedule F:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date <b>5/16/03</b>	5. Payee name White Stone Golf Club	7. Amount (\$) <b>3637.94</b>	
6. Payee address : City: State: Zip Code 10655 Benbrook Hwy, Fort Worth TX 76126			
8. Purpose of expenditure Golf Tournament fund raiser		9. **Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name CostCo	Amount (\$) <b>109.17</b>	
Payee address : City: State: Zip Code 5300 Overton Ridge Blvd .Fort Worth TX 76132			
Purpose of expenditure election party food		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name Graphics II	Amount (\$) <b>5846.36</b>	
Payee address : City: State: Zip Code 508 So Main, Fort Worth TX 76104			
Purpose of expenditure Campaign Mailer		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form		1. Total pages Schedule F:	
2. FILER NAME <b>Clyde Picht</b>		3. ACCOUNT # (Ethics Commission filers)	
4. Date <b>5/16/03</b>	5. Payee name Lone Star Specialties	7. Amount (\$) <b>108.66</b>	
6. Payee address : City: State: Zip Code 2818 Shamrock Av, Fort Worth TX 76106			
8. Purpose of expenditure Golf Tournament prizes		9. **Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name Dawn Gibson Fire Fund	Amount (\$) <b>100</b>	
Payee address : City: State: Zip Code California Pkwy .Fort Worth TX 76134			
Purpose of expenditure Contribution		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	
Date <b>5/16/03</b>	Payee name Chris Turner	Amount (\$) <b>5356.45</b>	
Payee address : City: State: Zip Code 2420 Winton Terrace W, Fort Worth TX 76109			
Purpose of expenditure Campaign Fund raising		**Complete if direct expenditure to benefit C/OH ***** Candidate/Office holder name Office sought/held	

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form

1. Total pages Schedule F:

2. FILER NAME

Clyde Picht

3. ACCOUNT # (Ethics Commission filers)

4. Date

5/16/03

5. Payee name  
Roadrunner Web Services6. Payee address : City: State: Zip Code  
6816 Fortune Rd, Fort Worth TX 76116

7.

Amount  
(\$)

59.85

8. Purpose of expenditure

Web Service

9. \*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

5/16/03

Payee name  
Military Order of Purple Haert, Chapter 1849

Payee address : City: State: Zip Code

PO Box 161494 .Fort Worth TX 76161

Amount  
(\$)

250

Purpose of expenditure

advertising

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

5/16/03

Payee name  
Code Blue golf tournamentPayee address : City: State: Zip Code  
6400 Pecan Valley Dr, Fort Worth TXAmount  
(\$)

250

Purpose of expenditure

contribution

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

## POLITICAL EXPENDITURES

## SCHEDULE F

The Instruction Guide explains how to complete this form

1. Total pages Schedule F:

2. FILER NAME

Clyde Picht

3. ACCOUNT # (Ethics Commission filers)

4. Date

5/31/03

5. Payee name  
Postmaster

7.

Amount  
(\$)

148

6. Payee address : City: State: Zip Code  
USPS Bryant Irvin Sta, Fort Worth TX 76123

8. Purpose of expenditure

Postage

9. \*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

6/02/03

Payee name  
Petroleum ClubAmount  
(\$)

216.50

Payee address : City: State: Zip Code

777 Main St. Fort Worth TX 76102

Purpose of expenditure

membership

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held

Date

Payee name

Amount  
(\$)

Payee address : City: State: Zip Code

Purpose of expenditure

\*\*Complete if direct expenditure to benefit C/OH \*\*\*\*\*

Candidate/Office holder name

Office sought/held