Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

RECEIVED APR 12 2007 CITY OF FORT WORTH CITY SECRETARY

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 00111111

2 PAGE #: 1 of 17

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. FIRST: Patrick MI: J.

NICKNAME: Pat LAST: Krick SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

PO Box 50188
Fort Worth, TX 76105-0188

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: Ralph MI:

NICKNAME: LAST: McCloud SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

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

2412 AnnGlenn
Fort Worth, TX 76119

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(817) 535-2880

8 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)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year

01/29/2007 04/02/2007

10 ELECTION

ELECTION DATE Month Day Year: 05/12/2007

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any):

12 OFFICE SOUGHT (if known): CITY COUNCIL DIST. 4

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

Direct campaign expenditures are 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.

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

OFFICE USE ONLY

Date Received

OFFICIAL RECORD CITY SECRETARY FT. WORTH, TEX

Date Hand Delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Krick, Patrick (Mr.)

15 ACCOUNT # (Ethics Commission filers) 00111111

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of 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. ..

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 55.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 3,005.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 4,833.10
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 1,627.52
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

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.

NOTARY PUBLIC STATE OF TEXAS
CAVRINE HARRIS
Notary Public
STATE OF TEXAS
My Comm. Exp. Feb. 24, 2010

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patrick Krick, this the 12th day of April, 2007, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath
	Cavrine G. Harris	Notary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/11 Report: 3/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/31/2007	Bermes, Norman 6 Contributor address; City; State; Zip Code 316 Paloverde Fort Worth, TX 76112	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Bermes, Norman (Mrs.) 6 Contributor address; City; State; Zip Code 316 Paloverde Ln Fort Worth, TX 76112	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/11 Report: 4/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/30/2007	Brender, Lynda 6 Contributor address; City; State; Zip Code 4121 Hampshire Blvd Fort Worth, TX 76103	$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Clark, Anne 6 Contributor address; City; State; Zip Code 5513 Rocky Mountain Fort Worth, TX 76137	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 *In-kind contribution* ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 *In-kind description (if applicable)*

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/11 Report: 5/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/29/2007	Dineen, Constance 6 Contributor address; City; State; Zip Code 8656 W. 84th Circle Arvada, CO	$50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution
☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
01/30/2007	Dineen, Michael 6 Contributor address; City; State; Zip Code 4317 S. 174th Street Omaha, NE 68135	$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 *In-kind contribution*
☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 *In-kind description (if applicable)*

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/11 Report: 6/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Edwards, Mary Fort Worth, TX 6 Contributor address; City; State; Zip Code	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/22/2007	Fletcher, Peter 6 Contributor address; City; State; Zip Code 309 Highwoods Fort Worth, TX 76112	$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/11 Report: 7/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
04/01/2007	Geiger, Doreen 6413 Chauncery Fort Worth, TX 76116	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
04/01/2007	Green, Thomas Fort Worth, TX 76112	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 *In-kind contribution* ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 *In-kind description (if applicable)*

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/11 Report: 8/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Jennings, Kay 6 Contributor address; City; State; Zip Code 5701 Oakmont Fort Worth, TX 76112	$50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution
☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Johannessen, DeeJay 6 Contributor address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	$150.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 *In-kind contribution*
☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 *In-kind description (if applicable)*
Catering event

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/11 Report: 9/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/12/2007	Krick, Patrick 6 Contributor address; City; State; Zip Code 312 Willow Ridge Road Fort Worth, TX 76103	$500.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/28/2007	Luby, Dan Fort Worth, TX 6 Contributor address; City; State; Zip Code	$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/11 Report: 10/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	McCarty, Taylor 6 Contributor address; City; State; Zip Code 510 Chatham Belton, TX 76513	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Rodriguez, Joe 6 Contributor address; City; State; Zip Code 7537 Castillo Fort Worth, TX 76112	$50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/11 Report: 11/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/18/2007	Short, Kevin 6 Contributor address; City; State; Zip Code 2101 Woodberry Drive Fort Worth, TX 76112	$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/01/2007	Sibbet, Byron 6 Contributor address; City; State; Zip Code 7620 Deaver NRH, TX 76180	$75.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/11 Report: 12/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers) 00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
04/02/2007	Smith, Jason 6 Contributor address; City; State; Zip Code 2257 College Avenue Fort Worth, TX 76110	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____)	7 Amount of contribution ($)
03/09/2007	Swander, Steve 6 Contributor address; City; State; Zip Code 1912 Martel Fort Worth, TX 76103	$200.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/11 Report: 13/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
04/01/2007	Terrell, Truman Fort Worth, TX 76103	$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

4 Date	5 Full name of contributor ☐ out-of-state PAC(ID#_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
04/01/2007	White, Charlotte 5608 Oakmont Fort Worth, TX 76112	$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 *In-kind contribution* ☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 *In-kind description (if applicable)*

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date

17 Means of transportation	18 Purpose of travel

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 14/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/18/2007	Civic Strategies LLC	$920.13

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Consulting Materials

☐ *Payment for travel outside Texas (complete boxes 10-16)*

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date

15 Means of transportation

16 Purpose of travel

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
03/21/2007	Civic Strategies LLC	$347.50

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Materials

☐ Payment for travel outside Texas (complete boxes 10-16)

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date

15 Means of transportation

16 Purpose of travel

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 15/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/01/2007	Civic Strategies LLC	$1,500.00

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Consulting Materials

☐ *Payment for travel outside Texas (complete boxes 10-16)*

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date

15 Means of transportation	16 Purpose of travel

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/2 Report: 16/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
01/29/2007	City of Fort Worth Fort Worth, TX 76101	$100.00 ☒ Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)

☐ *Payment for travel outside Texas (complete boxes 9-15)*

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date

14 Means of transportation	15 Purpose of travel

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
04/01/2007	Civic Strategies LLC	$1,852.47 ☐ Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Consulting Materials

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date

14 Means of transportation	15 Purpose of travel

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 17/17

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/14/2007	US Postal Service Fort WOrth, TX 76105	$39.00 ☐ Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Stamps

☐ *Payment for travel outside Texas (complete boxes 9-15)*

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date

14 Means of transportation	15 Purpose of travel

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
02/14/2007	US Postal Service Fort WOrth, TX 76105	$74.00 ☐ Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
PO Box rental

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date

14 Means of transportation	15 Purpose of travel