

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

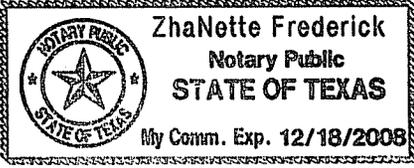
14 C/OH NAME Krick, Patrick (Mr.)	15 ACCOUNT # (Ethics Commission filers) 00111111
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures by political committees to support 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. ..	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

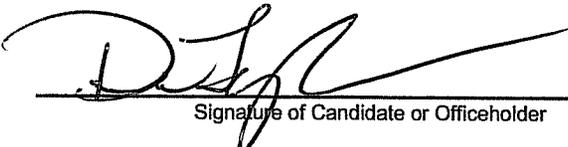
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 75.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,270.17
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 48.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,027.37
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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.

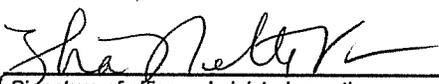


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said DeeJay Johannessen, agent for, this the 16 day of July, 2007, to certify which, witness my hand and seal of office. Patrick J. Krick



Signature of officer administering oath

ZhaNette Frederick

Print name of officer administering oath

Notary

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/4 Report: 3/8	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boston, Jo Ann 6 Contributor address; City; State; Zip Code 900 Green River Trail Fort Worth, TX 76103	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cabell, Mary Contributor address; City; State; Zip Code PO Box 8527 Fort Worth, TX 76124	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carr, Tom Contributor address; City; State; Zip Code 2501 Parkview Drive Fort Worth, TX 76102	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Evans, Paul and Jan Contributor address; City; State; Zip Code 4617 Wooded Acres Arlington, TX 76016	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freeman, Tom and Nancy Contributor address; City; State; Zip Code 241 Willow Ridge Road Fort Worth, TX 76112	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/8	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall, Carl and Jeanne 6 Contributor address; City; State; Zip Code 4912 Granite Shaols Fort Worth, TX 76112	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/11/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawkins, Michaelynn Contributor address; City; State; Zip Code 2801 Meadow Creek Bedford, TX 76021	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/10/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hirt, Cathy and Darrell Contributor address; City; State; Zip Code 1201 Hillcrest Fort Worth, TX 76107	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Koska, Mary Jo Contributor address; City; State; Zip Code 5612 Woodhollow Drive Fort Worth, TX 76103	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krick, Patrick Contributor address; City; State; Zip Code 312 Willow Ridge Road Fort Worth, TX 76103	Amount of contribution (\$) \$750.17	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/4 Report: 5/8	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lunsford, David 6 Contributor address; City; State; Zip Code 612 Westwood Fort Worth, TX 76117	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/11/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Stephen 6 Contributor address; City; State; Zip Code 3904 Driskell Blvd. Fort Worth, TX 76107	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moncrief, W.A. 6 Contributor address; City; State; Zip Code 950 Commerce Street Fort Worth, TX 76102	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/11/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) NAry, RJ and JJ 6 Contributor address; City; State; Zip Code 917 Highwoods Trail Fort Worth, TX 76112	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 05/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schwensen, William 6 Contributor address; City; State; Zip Code 501 Green River Trail Fort Worth, TX 76103	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 7/8**2** FILER NAME Krick, Patrick (Mr.)**3** ACCOUNT # (Ethics Commission filers)
00111111**4** Date

05/17/2007**5** Payee name
Civic Strategies LLC**6** Payee address; City; State; Zip Code
1201 W. Park Row
Arlington, TX 76013**7** Amount
(\$)

\$2,479.37**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Materials

(If travel outside of Texas, complete Schedule T) **9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Cotton Creek ClubAmount
(\$)

05/31/2007

Payee address; City; State; Zip Code
9055 John T White Road
Arlington, TX 76010

\$500.00

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

Poll Watch Party

(If travel outside of Texas, complete Schedule T) ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Greater Meadowbrook Shopping NewsAmount
(\$)

05/10/2007

Payee address; City; State; Zip Code
2320 Oakland Blvd
Fort Worth, TX 76103

\$1,000.00

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

(If travel outside of Texas, complete Schedule T) ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

CANDIDATE/OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

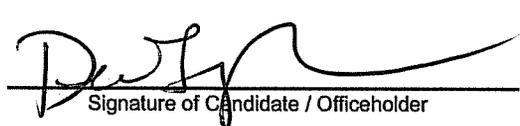
The Instruction Guide explains how to complete this form.
** Complete only if 'Report Type' on page 1 is marked 'Final Report' **

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1 C/OH NAME Krick, Patrick (Mr.)	2 ACCOUNT # (Ethics Commission filers) 00111111
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3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



 Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER
** Complete A & B below only if you are not an officeholder **

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

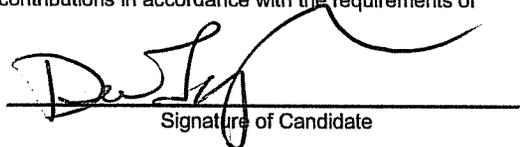
I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.



 Signature of Candidate

5 OFFICEHOLDER
** Complete this section only if you are an officeholder **

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

 Signature of Officeholder