

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

additional pages

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	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,430.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	10,615.05
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CONTRIBUTION BALANCE

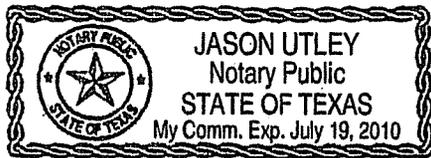
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,757.20
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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.



Patrick J. Krick
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Patrick J Krick, this the 4 day of May, 20 07, to certify which, witness my hand and seal of office.

Jason D. Utley
Signature of officer administering oath

Jason D. Utley
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: 1/22 Report: 3/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Angle, John 6 Contributor address; City; State; Zip Code 2420 S. Adams Fort Worth, TX 76110	7 Amount of contribution (\$) \$200.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bailey, John 6 Contributor address; City; State; Zip Code PO Box 9450 Fort Worth, TX 76147	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 2/22 Report: 4/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bandars, Kathleen 6 Contributor address; City; State; Zip Code 7515 S 45th Bellevue, NE 68157	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barrett, Dan 6 Contributor address; City; State; Zip Code 200 Western Place Fort Worth, TX 76107	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 3/22 Report: 5/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/25/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Behan, Michael 6 Contributor address; City; State; Zip Code 844 Sylvan Fort Worth, TX 76120	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/27/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Boscardin, Steven 6 Contributor address; City; State; Zip Code 3286 Birch Road Grapevine, TX 76051	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 4/22 Report: 6/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brender, Art 6 Contributor address; City; State; Zip Code 4121 Hampshire Blvd Fort Worth, TX 76103	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burns, Joel 6 Contributor address; City; State; Zip Code 2420 S. Adams Fort Worth, TX 76110	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 5/22 Report: 7/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burton, John	7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 2200 Hemphill Fort Worth, TX 76110			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Callaway, Cass	7 Amount of contribution (\$) \$50.00	
6 Contributor address; City; State; Zip Code 1200 W. Freeway Fort Worth, TX 76102			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 6/22 Report: 8/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Callaway, Cass 6 Contributor address; City; State; Zip Code 1200 W. Freeway Fort Worth, TX 76102	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Crader, Mike and Mary 6 Contributor address; City; State; Zip Code 1904 Nottingham Fort Worth, TX 76112	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 7/22 Report: 9/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/13/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dineen, Michael 6 Contributor address; City; State; Zip Code 4317 S 174th Omaha, NE 68135	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Edwards, Michael and Martha 6 Contributor address; City; State; Zip Code 309 Willow Ridge Fort Worth, TX 76103	7 Amount of contribution (\$) \$25.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 8/22 Report: 10/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ellis, Jeffrey 6 Contributor address; City; State; Zip Code 1925 Division Chicago, IL 60622	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/03/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Erwin, Ronnie 6 Contributor address; City; State; Zip Code 1736 Yolanda Fort Worth, TX 76112	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 9/22 Report: 11/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/26/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Felber, Michael			7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 101 Summit Ave #101 Fort Worth, TX 76102					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fletcher, Peter and Evonne			7 Amount of contribution (\$) \$200.00	
6 Contributor address; City; State; Zip Code 309 Highwoods Fort Worth, TX 76112					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 10/22 Report: 12/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/30/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fort Worth Citizens for Responsible Government			7 Amount of contribution (\$) \$600.00	
6 Contributor address; City; State; Zip Code 2010 Queen Street Fort Worth, TX 76103					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gould, Warren			7 Amount of contribution (\$) \$200.00	
6 Contributor address; City; State; Zip Code 3704 Crestline Fort Worth, TX 76107					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 11/22 Report: 13/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gude, Robert	7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 1500 Cienegas Fort Worth, TX 76112			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/25/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Heiskell, Michael	7 Amount of contribution (\$) \$500.00	
6 Contributor address; City; State; Zip Code 600 Texas St Fort Worth, TX 76102			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 12/22 Report: 14/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hightower, Chris			7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hirsh, Stephanie			7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code 4721 Henican Place Metairie, LA 70003					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 13/22 Report: 15/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/09/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hruska, Elizabeth			7 Amount of contribution (\$) \$25.00	
6 Contributor address; City; State; Zip Code 2400 A Street Lincoln, NE 68502					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/19/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Krick, Michael Omaha, NE			7 Amount of contribution (\$) \$100.00	
6 Contributor address; City; State; Zip Code					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 14/22 Report: 16/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 05/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Krick, Patrick			7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code 312 Willow Ridge Road Fort Worth, TX 76103					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lovett, Karen			7 Amount of contribution (\$) \$25.00	
6 Contributor address; City; State; Zip Code 2837 Townsend Fort Worth, TX 76110					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 15/22 Report: 17/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/10/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McCoy, Hillary 6 Contributor address; City; State; Zip Code 2005 Western Terrace Arlington, TX 76013	7 Amount of contribution (\$) \$25.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/20/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McKone, Peter 6 Contributor address; City; State; Zip Code 6616 Forest River Fort Worth, TX 76112	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 16/22 Report: 18/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pierce, Jo 6 Contributor address; City; State; Zip Code 308 Ascot Euless, TX 76040	7 Amount of contribution (\$) \$25.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 05/02/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Quick, Bobbie Jo 6 Contributor address; City; State; Zip Code 812 Rock Springs Drive Las Vegas, NV 89128	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 17/22 Report: 19/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reznicek, Joseph 6 Contributor address; City; State; Zip Code 701 Commerce Dallas, TX 75202	7 Amount of contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Scott, Don 6 Contributor address; City; State; Zip Code 2918 Wingate Fort Worth, TX 76107	7 Amount of contribution (\$) \$200.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 18/22 Report: 20/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shropshire, Mike and Barbara 6 Contributor address; City; State; Zip Code 804 Shady Glen Fort Worth, TX 76120	7 Amount of contribution (\$) \$200.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/14/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Smith, Jason 6 Contributor address; City; State; Zip Code 2257 College Avenue Fort Worth, TX 76110	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 19/22 Report: 21/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/04/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sortino, Madeline 6 Contributor address; City; State; Zip Code 1114 Hackney Drive Papillion, NE 68046	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/11/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sortino, Michael 6 Contributor address; City; State; Zip Code 18 South 6th Ave Papillion, NE 68046	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 20/22 Report: 22/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/23/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sortino, Michael 6 Contributor address; City; State; Zip Code 18 South 6th Ave Papillion, NE 68046	7 Amount of contribution (\$) \$3,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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 04/22/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Spies, Mary Jane 6 Contributor address; City; State; Zip Code 2113 NW Pleasant Akeny, IA 50023	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> 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: 21/22 Report: 23/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 05/01/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stacy, Sidney		7 Amount of contribution (\$) \$100.00		
6 Contributor address; City; State; Zip Code 205 Willow Ridge Road Fort Worth, TX 76112					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/29/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Strange, Anita		7 Amount of contribution (\$) \$25.00		
6 Contributor address; City; State; Zip Code 7524 Woodfield Fort Worth, TX 76112					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 22/22 Report: 24/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/23/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Terrell, Truman		7 Amount of contribution (\$) \$105.00		
6 Contributor address; City; State; Zip Code 5025 Marble Falls Fort Worth, TX 76103					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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 04/23/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas, Lisa		7 Amount of contribution (\$) \$25.00		
6 Contributor address; City; State; Zip Code 2214 Fairmount Fort Worth, TX 76110					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> 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: 1/3 Report: 25/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/17/2007	5 Payee name Civic Strategies LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$1,412.97	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Materials <input type="checkbox"/> 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 04/23/2007	5 Payee name Civic Strategies LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$4,379.71	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Materials and fees <input type="checkbox"/> 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: 2/3 Report: 26/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 04/28/2007	5 Payee name Civic Strategies LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$1,669.20	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Materials <input type="checkbox"/> 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 05/02/2007	5 Payee name Civic Strategies LLC 6 Payee address; City; State; Zip Code 1201 W. Park Row Arlington, TX 76013	7 Amount (\$) \$2,607.62	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Materials <input type="checkbox"/> 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: 3/3 Report: 27/30	
2 FILER NAME Krick, Patrick (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00111111	
4 Date 05/02/2007	5 Payee name Pay Pal El Paso, TX 79998 6 Payee address; City; State; Zip Code	7 Amount (\$) \$217.82	
8 Purpose of payment (See instructions regarding type of information required.) on-line transaction fees <input type="checkbox"/> 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 04/30/2007	5 Payee name Wells Fargo 6 Payee address; City; State; Zip Code 6707 Brentwood Stair Fort Worth, TX 76112	7 Amount (\$) \$13.00	
8 Purpose of payment (See instructions regarding type of information required.) bank fees <input type="checkbox"/> 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: 1/3 Report: 28/30

2 FILER NAME Krick, Patrick (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00111111

4 Date 04/14/2007	5 Payee name Donut Shop	7 Amount (\$) \$18.50
6 Payee address; City; State; Zip Code 1213 Woodhaven Fort Worth, TX 76112		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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

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 04/21/2007	5 Payee name Donut Shop	7 Amount (\$) \$18.50
6 Payee address; City; State; Zip Code 1213 Woodhaven Fort Worth, TX 76112		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

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

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: 2/3 Report: 29/30	
2 FILER NAME Krick, Patrick (Mr.)			3 ACCOUNT # (Ethics Commission filers) 00111111		
4 Date 04/28/2007	5 Payee name Donut Shop		7 Amount (\$) \$18.50		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
6 Payee address; City; State; Zip Code 1213 Woodhaven Fort Worth, TX 76112					
8 Purpose of expenditure (See instructions regarding type of information required.) Volunteer breakfast <input type="checkbox"/> 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 04/19/2007	5 Payee name Lowes		7 Amount (\$) \$77.72		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
6 Payee address; City; State; Zip Code 111 Eastchase Parkway Fort Worth, TX 76120					
8 Purpose of expenditure (See instructions regarding type of information required.) Sign Supplies <input type="checkbox"/> 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: 3/3 Report: 30/30**2 FILER NAME** Krick, Patrick (Mr.)**3 ACCOUNT #** (Ethics Commission filers)
00111111

4 Date 04/27/2007	5 Payee name Lowes 6 Payee address; City; State; Zip Code 111 Eastchase Parkway Fort Worth, TX 76120	7 Amount (\$) \$95.71 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Sign Supplies 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 04/28/2007	5 Payee name US Postal Service 6 Payee address; City; State; Zip Code 1475 Handley Drive Fort Worth, TX 76105	7 Amount (\$) \$85.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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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	