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

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

RECEIVED
MAY -1 2009
CITY OF FORT WORTH
CITY SECRETARY

The C/OH Instruction Guide explains how to complete this form.

1a ACCOUNT # (Ethics Commission Filer's)

2 Total pages filed

OFFICE USE ONLY

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TEX

Date Received

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST: Suzette; NICKNAME LAST: Watkins; SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE: 1801 Bomar Ave. Ft. Worth, TX 76103
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION: (817) 683-0428
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST: Susan; MI: E.; NICKNAME LAST: Coulter; SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE: 3467 Sagecrest Terrace Ft. Worth, TX 76109
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION: (817) 922-8462
9 REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report - Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year: 3 31 2009 THROUGH Month Day Year: 4 29 2009
11 ELECTION	ELECTION DATE Month Day Year: 5 9 2009; ELECTION TYPE ☐ Primary ☐ Runoff ☒ General ☐ Special
12 OFFICE	OFFICE HELD (if any)
13 OFFICE SOUGHT (if known)	City Council, D8
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS ☐ additional pages	** 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

GO TO PAGE 2

Revised 06/27/2008

05-01-09 P04:54 IN

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: Suzette Watkins

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

** This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

COMMITTEE TYPE
- [ ] GENERAL
- [ ] SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

[ ] additional pages

18 CONTRIBUTION TOTALS

CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) UNLESS ITEMIZED	$ 1018.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 2751.28
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 0
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 1770.85
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 980.43
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0

19 AFFIDAVIT

CATARINA S. JUAREZ
Notary Public, State of Texas
My Commission Expires
NOV. 7, 2011

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ms Suzette, this the 1st day of May, 20 09, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
Catarina S Juarez	Catarina S Juarez	Notary

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 2

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/1/09	Aztec Environmental 1913 E. Lancaster Ave. Ft. Worth, TX 76103	$100.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/13/09	Air Conditioning Contractors 2008 E. Randol Mill, Arlington, TX 76011	$150.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/23/09	Hammer & Nails Club 6464 Brentwood Stair, Ste. 100 Ft. Worth, TX 76112	$250.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/23/09	James Ford 1109 Ironwood Ct. Ft. Worth, TX 76028	$100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/27/09	Adrian Murray 125 Willow Ridge Rd Ft. Worth, TX 76103	$200.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

Revised 06/27/2008

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 2

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/3/09	C.B Sportsworld 1920 E. Lancaster Ft. Worth, TX 76103		$76.00 shirts

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See instructions)

10 Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/29/09	Sue Johnson 2818 Morton St Ft. Worth, TX 76107		$713.28 printing

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions)

Employer (See instructions)

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

Revised 06/27/2008

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission field)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
4/1/09	Gary Riding Ft. Worth, TX 76103	19.00

8 Purpose of payment (See instructions regarding type of information required): Canvassing

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/6/09	Gary Riding Ft. Worth, TX 76103	$50.00

Purpose of payment (See instructions regarding type of information required): Canvassing

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/7/09	Classic Graphics 3021 Ramona Dr. Ft. Worth, TX 76116	$359.93

Purpose of payment (See instructions regarding type of information required): Signs

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/10/09	Steven Barber Ft. Worth, TX 76103	30.00

Purpose of payment (See instructions regarding type of information required): Canvassing

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Revised 06/27/2008

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Surette Watkins

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
4/11/09	Gary Riding Ft. Worth, TX 76103	$ 40.00

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

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/11/09	Steven Barker Ft. Worth, TX 76103	$ 40.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/8/09	Home Depot Bridge St. Ft. Worth, TX 76103	$ 67.95

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/6/09	Office Depot Carol St. Ft. Worth, TX	$ 97.39

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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Revised 04/27/2005

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

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / 6 Payee address City State Zip Code	7 Amount ($)
4/14/09	Steven Barker Ft. Worth, TX 76103	$20.00

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

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address City State Zip Code	Amount ($)
4/16/09	Classic Graphics 3021 Ramona Dr. Ft. Worth, TX 76116	304.18

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address City State Zip Code	Amount ($)
4/19/09	Steven Barker Ft. Worth, TX 76103	$35.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address City State Zip Code	Amount ($)
4/21/09	Steven Barker Ft. Worth, TX	$30.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Revised 06/27/2008

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
4/21/09	Gary Riding Ft. Worth, TX 76103	$30.00

8 Purpose of payment (See instructions regarding type of information required): Canvassing

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/28/09	Lowes Ft. Worth, TX	$21.61

Purpose of payment (See instructions regarding type of information required): Stakes

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/28/09	Office Depot Carol St. Ft. Worth, TX	$19.45

Purpose of payment (See instructions regarding type of information required): paper

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/17/09	Home Depot Bridge St. Ft. Worth, TX 76103	$6.48

Purpose of payment (See instructions regarding type of information required): Stakes

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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Revised 06/27/2008

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Suzette Watkins

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
4/29/09	Classic Graphics 3021 Ramona Dr. Ft. Worth, TX 76116	$17.86

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

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/29/09	Sue Johnson 2818 Morton St. Ft. Worth, TX 76107	$540.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/23/09	Steven Barber Ft. Worth, TX 76103	$21.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4/23/09	Gary Riding Ft Worth, TX 76103	$21.00

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

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Revised 08/27/2008