

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME

Danny Scarth

15 ACCOUNT # (Ethics Commission Filers)

16 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	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

\$ *—*

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ *23,595.00*

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ *302.50*

4. TOTAL POLITICAL EXPENDITURES

\$ *5786.09*

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ *104,647.00*

OUTSTANDING LOAN TOTALS

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

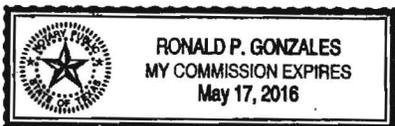
\$ *—*

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.

[Handwritten Signature]

Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Daniel L. Scarth*, this the *29* day of *May*, 20 *13*, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Ronald P. Gonzales
Printed 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 Total pages Schedule A: 15/8	
2 FILER NAME Daniel L. Scarth		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/12/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Riley	7 Amount of contribution (\$) 100⁰⁰	8 In-kind contribution description (if applicable)
6 Contributor address, City, State, Zip Code 4117 Walnut Creek Ct FW, TX 76137		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/12/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Rutherford	Amount of contribution (\$) 20⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 2001 ARBOR CREST DR. ARLINGTON, TX 76012		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wanda Conlin & Don Boren	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 1755 Martel Ave. Ft. Worth, TX 76103		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eddie & Bette Robinson	Amount of contribution (\$) 100⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 6104 Cholla Ct. FW, TX 76112		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jim Wyatt	Amount of contribution (\$) 25⁰⁰	In-kind contribution description (if applicable)
Contributor address; City, State, Zip Code 921 Highwoods Trl FW, TX 76112		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/12/13

5 Full name of contributor out-of-state PAC (ID# _____)

Margaret H. Farlow

6 Contributor address; City; State; Zip Code

845 Havenwood Ln., South
Ft. Worth, TX 76112

7 Amount of contribution (\$)

50⁰⁰

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

George Harper

Contributor address; City; State; Zip Code

816 Havenwood Ln., South
Ft. Worth, TX 76112

Amount of contribution (\$)

50⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

FRANCIS E. MCCARTHY

Contributor address; City; State; Zip Code

1208 West Magnolia Ave., Ste 212
Ft. Worth, TX

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Jim & Karen Dixon

Contributor address; City; State; Zip Code

576 N. Beach St.
Fort Worth, TX 76111

Amount of contribution (\$)

500⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Lineberger, Goggan, Blaire & Sampson

Contributor address; City; State; Zip Code

P.O. Box 17428
Austin, TX 78760

Amount of contribution (\$)

2500⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:

3 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/12/13

5 Full name of contributor out-of-state PAC (ID# _____)

Conservative Voters Forum

6 Contributor address; City; State; Zip Code

c/o S. La Boyteaux

1144 Terrace Trl., Hurst, TX 76060

7 Amount of contribution (\$)

500⁰⁰

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Ms. C.H. Murtaugh

Contributor address; City; State; Zip Code

729 Putter Dr.

Ft. Worth, TX 76112

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

A. E. Boyd

Contributor address; City; State; Zip Code

7248 Ellis Rd.

Ft. Worth, TX 76112

Amount of contribution (\$)

25⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Mike & Linda Groomer

Contributor address; City; State; Zip Code

4900 Lakeside Cir.

F.W., TX 76180

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Colleen Tiernan

Contributor address; City; State; Zip Code

6021 Cholla

FW, TX 76112

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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.

4 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/12/13

5 Full name of contributor out-of-state PAC (ID# _____)

Bill & Beatriz Mann

6 Contributor address; City; State; Zip Code

7536 Yolanda
Ft. Worth, TX 76112

7 Amount of contribution (\$)

100⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Linda Jacobson

Contributor address; City; State; Zip Code

3095 Bellaire Ranch #225
Ft. Worth, TX 76102

Amount of contribution (\$)

75⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor out-of-state PAC (ID# _____)

Charles & Elaine Edmonds

Contributor address; City; State; Zip Code

721 Green River Trl.
Ft. Worth, TX 76113

Amount of contribution (\$)

50⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Carl & Paula Langley

Contributor address; City; State; Zip Code

725 Putter DR
Ft. Worth, TX 76112

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor out-of-state PAC (ID# _____)

Allen Hodges III

Contributor address; City; State; Zip Code

306 W. 7th Street
FW, TX 76102

Amount of contribution (\$)

500⁰⁰

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 for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/12/13

5 Full name of contributor

Scott Polokov

6 Contributor address; City; State; Zip Code

300 Blackburn St., #401
Dallas, TX 75204

7 Amount of contribution (\$)

1,000⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/12/13

Full name of contributor

Arnold & Harriett Gachman

Contributor address; City; State; Zip Code

1229 Shady Oaks Ln.
Fort Worth, TX 76107

Amount of contribution (\$)

200⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor

Exxon Mobile PAC

Contributor address; City; State; Zip Code

5959 Las Colinas, TX 75039

Amount of contribution (\$)

500⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor

Roy and Sylvia Coleman

Contributor address; City; State; Zip Code

2400 Handley Ederville Rd.
Ft. Worth, TX 76112

Amount of contribution (\$)

1,000⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/12/13

Full name of contributor

Mercantile Partners

Contributor address; City; State; Zip Code

2650 Meacham Blvd
Fort Worth, TX 7613

Amount of contribution (\$)

2000⁰⁰

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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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A.

6 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/12/13

5 Full name of contributor out-of-state PAC (ID# _____)

Hammer & Nail Club

6 Contributor address; City; State; Zip Code

100 E. 15th Street, Ste 600
Ft. Worth, TX 76111

7 Amount of contribution (\$)

2000⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/15/13

Full name of contributor out-of-state PAC (ID# _____)

Good Government Fund

Contributor address; City; State; Zip Code

201 Main St.
Ft. Worth, TX 76102

Amount of contribution (\$)

3000⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/13

Full name of contributor out-of-state PAC (ID# _____)

Greg & Catherine Upp

Contributor address; City; State; Zip Code

6108 Terrace Oaks
FW, TX 76112

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/13

Full name of contributor out-of-state PAC (ID# _____)

Ken and Coela Newell

Contributor address; City; State; Zip Code

6000 Lantana Ln.
FW, TX 76112

Amount of contribution (\$)

3,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/13/13

Full name of contributor out-of-state PAC (ID# _____)

Greater FW Association of Realtors

Contributor address; City; State; Zip Code

2650 Parkview DR.
FW, TX 76102

Amount of contribution (\$)

2,500⁰⁰

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 for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

7 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/17/13

5 Full name of contributor

Chester & Casie Cadieux III

6 Contributor address; City; State; Zip Code

6808 E. 109th Street
Tulsa, OK 74130

7 Amount of contribution (\$)

250⁰⁰

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/17/13

Full name of contributor

Betsy Price Campaign

Contributor address; City; State; Zip Code

P.O. Box 100066
Ft. Worth, TX 76185

Amount of contribution (\$)

250⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/21/13

Full name of contributor

John & Sandi Ross

Contributor address; City; State; Zip Code

716 Oakwood TR.
Ft. Worth, TX 76112

Amount of contribution (\$)

100⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/17/13

Full name of contributor

Mike Moncrief Campaign

Contributor address; City; State; Zip Code

777 Taylor St.
Ft. Worth, TX 76102

Amount of contribution (\$)

250⁰⁰

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/13

Full name of contributor

Jim & Charlotte Finley

Contributor address; City; State; Zip Code

1308 Lake St.
Ft. Worth, TX 76102

Amount of contribution (\$)

2000⁰⁰

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 for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

8 of 8

2 FILER NAME

Daniel L. Scarth

3 ACCOUNT# (Ethics Commission Filers)

4 Date

4/24/13

5 Full name of contributor

Cliff and Francis Taylor

6 Contributor address; City; State; Zip Code

925 Doral Dr.
Ft. Worth, TX 76112

7 Amount of contribution (\$)

50⁰⁰

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/24/13

Full name of contributor

Charlie & Carol McBride

Contributor address; City; State; Zip Code

6620 Yolanda
Ft. Worth, TX 76112

Amount of contribution (\$)

100⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 5/2/13	5 Payee name Global Mail
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6 Amount (\$) 950⁰⁰	7 Payee address; City; State; Zip Code 576 Beach St. Ft. Worth, TX 76111
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising/Postage	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/2/13	Payee name Ft. Worth Star Telegram
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Amount (\$) 69⁹⁵	Payee address; City; State; Zip Code 600 Taylor St. Ft. Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Expense/overhead	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/2/13	Payee name Ryan's Grocery
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Amount (\$) 24.73	Payee address; City; State; Zip Code 815 W. Magnolia Ft. Worth, TX 76104
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/1/13	Payee name Lena Pope Home
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Amount (\$) 50⁰⁰	Payee address; City; State; Zip Code 3800 Hulen, Ste 150 FW, TX 76107
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 11	2 FILER NAME: Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date: 4/30/13	5 Payee name: EXXON Mobile
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6 Amount (\$): \$ 55.61	7 Payee address; City; State; Zip Code: #4790 Ft. Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel in District	(b) Description (If travel outside of Texas, complete Schedule T)
--------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 4/30/13	Payee name: The Home Depot #653
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Amount (\$): 21⁵⁰	Payee address; City; State; Zip Code: Bridge St. Ft. Worth 76112
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising (Sign Material)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 4/29/13	Payee name: America Cancer Society
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Amount (\$): 200⁰⁰	Payee address; City; State; Zip Code: GA, Online Charity
---	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift/Awards/Memorials	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date: 4/29/13	Payee name: The Home Depot #653
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Amount (\$): 78⁰²	Payee address; City; State; Zip Code: Bridge St, Ft. Worth, TX 76112
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising/ Sign expense	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 of 11	2- FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/29/13	5 Payee name Chili's Grill
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6 Amount (\$) 60.61	7 Payee address; City; State; Zip Code Ft. Worth TX (University Park)
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Event, Campaign Staff	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/13	Payee name Global Mail
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Amount (\$) 800.00	Payee address; City; State; Zip Code 576 Beach St. Ft Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense/ Postage	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/25/13	Payee name T & P TAVERN
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Amount (\$) 25.80	Payee address; City; State; Zip Code 221 W. Lancaster Ft. Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Beverage Expense (Staff)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/24/13	Payee name Sal Espino Campaign
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Amount (\$) 500.00	Payee address; City; State; Zip Code 1205 N. Main St. Ft. Worth, TX 76106
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution Made by Candidate/Office Holder	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 4 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/24/13	5 Payee name Bob's Steakhouse
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6 Amount (\$) 171⁸¹	7 Payee address; City; State; Zip Code 1300 Houston St F.W. TX 76102
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage/Event	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/13	Payee name Jeanine Ricks
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Amount (\$) 300⁰⁰	Payee address; City; State; Zip Code 720 Oakwood Tr. Ft. Worth, TX 76112
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries, Wages, Contract Labor	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/13	Payee name Lowes #2546
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Amount (\$) 76²⁹	Payee address; City; State; Zip Code Ft. Worth, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising (Sign) Expense	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/22/13	Payee name Los Asaderos
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Amount (\$) 44²⁰	Payee address; City; State; Zip Code 1501 Main St Ft. Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense Campaign Staff	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F: 5 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/22/13	5 Payee name American Legion PD	
6 Amount (\$) 259⁸²	7 Payee address; City; State; Zip Code 6801 Manhattan Blvd Ft. Worth, TX 76112	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign event with Betsy Price
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/22/13	Payee name T & P Tavern	
Amount (\$) 14⁰⁰	Payee address; City; State; Zip Code 221 W. Lancaster Ft. Worth, TX 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Beverage (Campaign Staff)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/22/13	Payee name No Frills Grill	
Amount (\$) 60⁹⁹	Payee address; City; State; Zip Code 1550 East Chase Pkwy Fort Worth 7120	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage (Constituent)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/19/13	Payee name Spec's	
Amount (\$) 67⁰⁷	Payee address; City; State; Zip Code 1560 East Chase Pkwy Ft. Worth, TX 76120	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage (Campaign event)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 6 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/19/13	5 Payee name Wells Fargo Bank	
6 Amount (\$) 250	7 Payee address; City; State; Zip Code Ft. Worth, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees (Bank)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/19/13	Payee name James Rutherford	
Amount (\$) 203 ⁰⁰	Payee address; City; State; Zip Code 2011 ARBOR CREST Arlington, TX 76012	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Salaries/Wages/contract labor	(signs installation)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/19/13	Payee name EXXON Mobil #3591	
Amount (\$) 57 ⁷²	Payee address; City; State; Zip Code Ft. Worth, TX 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Travel in District	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/18/13	Payee name MLD Video Inc	
Amount (\$) 390 ³⁰	Payee address; City; State; Zip Code 2526 Brenner DR. Dallas, TX 75226	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising	(Video Equipment Rental)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 7 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4/18/13	5 Payee name Office Depot	
6 Amount (\$) 4305	7 Payee address; City; State; Zip Code Office Depot #3249 1600 Eastchase (Kw) 76120	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/17/13	Payee name Bob's Steakhouse	
Amount (\$) 4800	Payee address; City; State; Zip Code 1300 Houston St Ft Worth, TX 76102	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/17/13	Payee name Paris Coffee Shop	
Amount (\$) 736	Payee address; City; State; Zip Code 704 W. Magnolia Ave. Ft. Worth, TX	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/16/13	Payee name Wendy's #5265	
Amount (\$) 2259	Payee address; City; State; Zip Code Ft. Worth, TX 76112	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 8 of 11	2 FILER NAME Daniel L. Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/15/13	5 Payee name American Legion PD
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6 Amount (\$) 50⁰⁰	7 Payee address; City; State; Zip Code 6801 Manhattan Blvd Ft. Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage (staff)	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/13	Payee name Shell Oil #57545270
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Amount (\$) 60³⁰	Payee address; City; State; Zip Code Ft. Worth, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel in District	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/13	Payee name Piola
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Amount (\$) 126¹³	Payee address; City; State; Zip Code 3700 Mattison Ft. Worth, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage (sister city charity event)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/13	Payee name Bob's Steak Chop House
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Amount (\$) 48⁰⁰	Payee address; City; State; Zip Code 1300 Houston Ft. Worth, TX 76102
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense (Consultant Mtg)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 9 of 11	2 FILER NAME Daniel L Scarth	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/15/13	5 Payee name The Ten Spot
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6 Amount (\$) 2165	7 Payee address; City; State; Zip Code 2600 W. 7th Ft. Worth, TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Gifts/Awards/Memorials Expense	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/12/13	Payee name Wells Fargo
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Amount (\$) 250	Payee address; City; State; Zip Code Ft. Worth, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees/Bank	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/12/13	Payee name James Rutherford
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Amount (\$) 20300	Payee address; City; State; Zip Code 2011 Arbor Crest Arlington, TX 76012
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Labor/Contract Labor (sign installation)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/12/13	Payee name Time Warner/charter Comm 8
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Amount (\$) 29265	Payee address; City; State; Zip Code 1320 South University Dr. FW, TX 76107
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense (Media Purchase)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>10 of 11</i>	2 FILER NAME <i>Daniel L. Searth</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>4/11/13</i>	5 Payee name <i>Taverna</i>	
6 Amount (\$) <i>39.14</i>	7 Payee address; City; State; Zip Code <i>450 Throckmorton Ft. Worth TX 76102</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food Beverage (Constituent)</i>	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>4/10/13</i>	Payee name <i>Greater Meadowbrook News</i>	
Amount (\$) <i>197.00</i>	Payee address; City; State; Zip Code <i>2320 Oakland Blvd Ft. Worth TX 76103</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising Expense (Ad)</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>4/10/13</i>	Payee name <i>Susan Jackson</i>	
Amount (\$) <i>90.00</i>	Payee address; City; State; Zip Code <i>316 N. Bailly Ft. Worth TX 76107</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Salaries/Wages/Contract Labor</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>4/10/13</i>	Payee name <i>Corner Bakery</i>	
Amount (\$) <i>3.34</i>	Payee address; City; State; Zip Code <i>615 Main Ft Worth, TX</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Food/Beverage Expense (Constituent)</i>	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>11 of 11</i>	2 FILER NAME <i>Daniel L. Searth</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>4/8/13</i>	5 Payee name <i>Albertson's</i>
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6 Amount (\$) <i>26.88</i>	7 Payee address; City; State; Zip Code <i>East Loop 820 Ft Worth, TX 76112</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/8/13</i>	Payee name <i>Wells Fargo</i>
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Amount (\$) <i>250</i>	Payee address; City; State; Zip Code <i>Ft. Worth, TX 76112</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fees/Bank</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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