CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT # (Ethics Commission Filers)

2 Total pages filed: 13

OFFICE USE ONLY
Date Received
RECEIVED APR 11 2013 CITY OF FORT WORTH CITY SECRETARY
Date Hand-delivered or Postmarked
Receipt #
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr.
FIRST: Paul
MI: A
NICKNAME
LAST: Gardner
SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX: 3833 Drexmore Rd
APT / SUITE #:
CITY: Ft Worth
STATE: TX
ZIP CODE: 76244

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (817)
PHONE NUMBER: 946 9555
EXTENSION

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mrs
FIRST: Lindsey
MI: A
NICKNAME
LAST: Gardner
SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE): 3833 Drexmore Rd
APT / SUITE #:
CITY: Ft. Worth
STATE: Tx
ZIP CODE: 76244

8 CAMPAIGN TREASURER PHONE
AREA CODE: (817)
PHONE NUMBER: 337 - 0502
EXTENSION

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: 01 / 09 / 13
THROUGH
Month / Day / Year: 04 / 01 / 13

11 ELECTION
ELECTION DATE Month / Day / Year: 05 / 11 / 13
ELECTION TYPE
☐ Primary
☐ Runoff
☑ General
☐ Special

12 OFFICE
OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)
Ft. Worth City Council District 4

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Paul A. Gardner

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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 5,325.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$
	4. **TOTAL POLITICAL EXPENDITURES**	$ 9,158.09
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ (3,833.09)
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

18 AFFIDAVIT

MARY J KAYSER NOTARY PUBLIC STATE OF TEXAS EXPIRES 01-11-2017

AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said Paul Gardner, this the 11th day of April, 20 13, 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
Mary J Kayser	MARY J KAYSER	City Secretary

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 4

2 FILER NAME: Paul A Gardner

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)
1/15/13	Paul A. Gardner 3833 Drexmore Rd Ft. Worth Tx 76244	25.00	

(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)
1/22/13	Larry E. Lyons 10113 Paintbrush Dr Ft Worth TX 76244	4000.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Divisional Mgr
Employer (See Instructions): Cornwell Tools

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
1/29/13	Matthew Yates 3001 Rustic Meadows Dr Bedford TX 76021	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)
1/31/13	William Parrish 2329 Mistletoe Dr Ft. Worth TX 76110	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)
1/31/13	Sue Parrish 2329 Mistletoe Dr. Ft. Worth Tx 76110	100.00	

(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 foradditional 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: 4

2 FILER NAME: Paul A. Gardner

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/2/13	Bill Arias 7108 Saucon Valley Dr Ft. Worth TX 76132	500.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Sr. VP

10 Employer (See Instructions): Bobby Cox Co.

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/13/13	Rita Connelly 8904 Brook Hill Lane Ft Worth TX 76244	5.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/13	Charles Whitcher Jr. 3406 Mona Lee Lane Houston TX 77080	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/21/13	Barron Nimitz 5117 Merced Dr Ft. Worth TX 76137	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/21/13	John Ingebritson 703 W. Magnolia Ave Apt A Ft Worth, TX 76104	50.00	

(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

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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

2 FILER NAME: Paul A. Gardner

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/22/13	Robert S. Hall 2215 Red Hawk Ln Euless TX 76039	50.00	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/23/13	Adam Vincze 8357 Capital Reef Ct Ft. Worth, Tx 76137	100.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/23/13	Shane Hatcher 1110 Red Bud Lane Aledo TX 76008	5.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/25/13	Tom McMeans 8404 Island Ct. Ft. Worth TX 76137	25.00	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/27/13	Stephen Kelso 3725 Bigleaf Ln Ft. Worth TX 76137	25.00	

(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

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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

2 FILER NAME: Paul A. Gardner

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3/2/13	Ronnie Dempsey 7820 Teal Dr. Ft. Worth TX 76137	10.**	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions):

10 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/18/13	John Hamilton 103 Clear Brook Ct Southlake TX 76092	5.**	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3/19/13	Scott Denbina 4232 Pepperbrush Dr Ft. Worth, TX 76137	25.**	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / 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 ☐ out-of-state PAC (ID#:) / 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 foradditional 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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME: Paul A. Gardner	3 ACCOUNT # (Ethics Commission Filers)

4 Date: 2/19/13	5 Payee name: Lindsey Mays	
6 Amount ($): 250.00	7 Payee address; City; State; Zip Code: 4213 Silverberry Ave Ft. Worth TX 76137	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Salaries / wages / contract labor	(b) Description (If travel outside of Texas, complete Schedule T): contract labor for campaign services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 3/7/13	Payee name: Lindsey Mays	
Amount ($): 250.00	Payee address; City; State; Zip Code: 4213 Silverberry Ave Ft Worth TX 76137	
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): contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 3/8/13	Payee name: Kwik Kopy Printing	
Amount ($): 591.00	Payee address; City; State; Zip Code: 1850 Handley Dr Ft. Worth TX 76112	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Advertising Expense	Description (If travel outside of Texas, complete Schedule T): Ad in greater meadowbrook newspaper
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 3/8/13	Payee name: Picante Sports Bar	
Amount ($): 23.25	Payee address; City; State; Zip Code: 2108 E. Rosedale Ft. Worth TX 76104	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Food / Beverage Expense	Description (If travel outside of Texas, complete Schedule T): Lunch with constituent/Advisor
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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
	Paul Gardner	

4 Date	5 Payee name
3/20/13	Push Digital
6 Amount ($)	**7 Payee address; City; State; Zip Code**
2,162.40	Po Box 7431 Columbia SC 29202

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)
	Advertising Expense	Yard sign design and Product

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

Date	Payee name
1/4/13	Push Digital
Amount ($)	**Payee address; City; State; Zip Code**
14.99	Po Box 7431 Columbia SC 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Domain Registration

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

Date	Payee name
2/20/13	Push Digital
Amount ($)	**Payee address; City; State; Zip Code**
122.71	Po Box 7431 Columbia SC 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Yard sign Postage

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

Date	Payee name
2/20/13	Push Digital
Amount ($)	**Payee address; City; State; Zip Code**
10.44	Po Box 7431 Columbia SC 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	email - press release

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME: Paul Gardner	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
1/30/13	Angelo's BBQ

6 Amount ($)	7 Payee address; City; State; Zip Code
19.65	2533 White Settlement Rd Ft. Worth TX 76107

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)
	Food / Beverage Expense	Lunch w/ water

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

Date	Payee name
1/30/13	City of Ft. Worth

Amount ($)	Payee address; City; State; Zip Code
100.00	1000 Throckmorton 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)
	Fees	Filing Fee

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

Date	Payee name
2/4/13	Angelo's BBQ

Amount ($)	Payee address; City; State; Zip Code
13.53	2533 White Settlement Rd Ft. Worth TX 76107

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food / Beverage Expense	Lunch w/water

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

Date	Payee name
1/28/13	USPS

Amount ($)	Payee address; City; State; Zip Code
46.00	3101 W 6th St Ft. Worth, TX 76107

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	office overhead/rental expense	Postage

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME: Paul Gardner	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
2/20/13	USPS
6 Amount ($)	**7 Payee address; City; State; Zip Code**
46.00	3101 W 6th St Ft. Worth TX 76107

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)
	office overhead / rental expense	Postage

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

Date	Payee name
2/20/13	Target
Amount ($)	**Payee address; City; State; Zip Code**
34.14	301 Carroll St Ft Worth TX 76107

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	office overhead / rental expense	Stationary

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

Date	Payee name
1/31/13	Rally / Piryx
Amount ($)	**Payee address; City; State; Zip Code**
200.00	144 2nd St 1st Floor San Francisco CA 94105

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Food / Beverage Expense	Event Cost

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

Date	Payee name
3/8/13	Gyna Bivens
Amount ($)	**Payee address; City; State; Zip Code**
50.00	5913 McKaskle Dr Ft Worth TX 76119

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Contribution made by Candidate	Donation to Campaign

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME: Paul Gardner	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
3/11/13	Push Digital

6 Amount ($)	7 Payee address; City; State; Zip Code
602.29	Po Box 7431 Columbia Sc 29202

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)
	Advertising Expense	Palm Cards

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

Date	Payee name
1/9/13	Push Digital

Amount ($)	Payee address; City; State; Zip Code
237.00	Po Box 7431 Columbia Sc 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Advertising Expense	Camelot Software Subscription

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

Date	Payee name
1/9/13	Push Digital

Amount ($)	Payee address; City; State; Zip Code
750.00	Po Box 7431 Columbia SC 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting Expense	Retainer

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

Date	Payee name
2/1/13	Push Digital

Amount ($)	Payee address; City; State; Zip Code
750.00	Po Box 7431 Columbia Sc 29202

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Consulting Expense	Retainer

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME Paul Gardner	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/25/13	5 Payee name Chase Bank	
6 Amount ($) 30.00	7 Payee address; City; State; Zip Code 600 Bailey Ft. Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Bank Wire Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 3/29/13	Payee name Chase Bank	
Amount ($) 30.00	Payee address; City; State; Zip Code 600 Bailey Ft. Worth TX 76107	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Bank Wire Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 3/26/13	Payee name Rally.org / Piryx	
Amount ($) 74.69	Payee address; City; State; Zip Code 144 2nd St 1st Floor San Francisco CA 94105	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation / Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
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

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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 FILER NAME Pat Gardner	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3/1/13	5 Payee name Push Digital	
6 Amount ($) 750.00	7 Payee address; City; State; Zip Code PO Box 7431 Columbia SC 29202	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Retainer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 2/1/13	Payee name Push Digital	
Amount ($) 2,000.00	Payee address; City; State; Zip Code PO Box 7431 Columbia SC 29202	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Website Design
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
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	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED