# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

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: 20

OFFICE USE ONLY

Date Received

RECEIVED
JUL 17 2013
CITY SECRETARY

Date Hand-Delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST: Daniel MI: L.
NICKNAME LAST: Scarth SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
505 Highwoods Trail
Ft Worth, TX 76112

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (817) PHONE NUMBER 446.7311 EXTENSION

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST: John MI: D.
NICKNAME LAST: Burge SUFFIX

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
829 Firewheel Trail
Ft. Worth, TX 76112

8 CAMPAIGN TREASURER PHONE

AREA CODE (817) PHONE NUMBER 457.3338 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: 5/04/13 THROUGH Month Day Year: 7/15/13

11 ELECTION

ELECTION DATE Month Day Year: 5/11/13

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any): City Council District 4

13 OFFICE SOUGHT (if known): City Council District 4

GO TO PAGE 2

# 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

☐ 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) | $ 7,525.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED | $ 615.00 |
| | 4. **TOTAL POLITICAL EXPENDITURES** | $ 14,493.24 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | $ 97,679.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ — |

**18** AFFIDAVIT

RONALD P. GONZALES
Notary Public, State of Texas
My Commission Expires
May 17, 2012

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 Daniel L. Scarth, this the 17th day of July, 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 |
|---|---|---|
| Ronald P. Gonzales | Ronald P. Gonzales | Notary |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 1 of 2

2 FILER NAME: Daniel L. Scarth

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) |
|---|---|---|---|
| 5/27/13 | Fort Worth Roundtable LLC<br>101 Summit Ave. Ste 208<br>Fort Worth, TX 76102 | 500.00 | |

(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) |
|---|---|---|---|
| 5/27/13 | Greater FW Real Estate Council<br>201 Commerce St. Ste 2400<br>Fort Worth, TX. 76102 | 1,000.00 | |

(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) |
|---|---|---|---|
| 5/27/13 | Apartment Association of Tarrant Co.<br>6250 Baker Blvd.<br>Richland Hills 76118 | 2,000.00 | |

(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) |
|---|---|---|---|
| 5/27/13 | Linebarger Goggan<br>PO Box 17428<br>Austin, TX 78760 | 1,000.00 | |

(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) |
|---|---|---|---|
| 5/27/13 | Don Hansen<br>4001 N. Main St.<br>Ft Worth, TX 76106 | 1000.00 | |

(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: 2 of 2

2 FILER NAME: Daniel L. Scarth

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) |
|---|---|---|---|
| 5/27/13 | Ross & Cheryl Calhoun<br>3709 Santiago Ct.<br>Irving, TX 75062 | 500.00 | |

9 Principal occupation / Job title (See Instructions):
10 Employer (See Instructions):

(If travel outside of Texas, complete Schedule T)

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 5/27/13 | T. J. Harris<br>8040 Valley Dr.<br>N Richland Hills, 76182 | 200.00 | |

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

(If travel outside of Texas, complete Schedule T)

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 5/27/13 | Joe & Elsa Paniagua<br>8125 Mount Shasta<br>Ft. Worth, TX 76127 | 100.00 | |

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

(If travel outside of Texas, complete Schedule T)

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 5/27/13 | Lewis Marchbanks<br>254 Westview Cir.<br>Arlington, TX 76013 | 100.00 | |

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

(If travel outside of Texas, complete Schedule T)

| Date | Full name of contributor / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 5/27/13 | Q PAC<br>300 Commerce St. Ste. 3200<br>Fort Worth, TX 76102 | 1,125.00 | |

Principal occupation / Job title (See Instructions):
Employer (See Instructions):

(If travel outside of Texas, complete Schedule T)

**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**

1 of

**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: 14

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 7/15/13

5 Payee name: Cowtown Dinner

6 Amount ($): 51.68

7 Payee address; City; State; Zip Code: 110 Main St. Ft. Worth, TX 76102

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Food & Beverage

(b) Description (If travel outside of Texas, complete Schedule T): Staff luncheon

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

---

Date: 7/15/13

Payee name: Starbucks

Amount ($): 4.22

Payee address; City; State; Zip Code: Ft. Worth, TX 76102

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food & Beverage

Description (If travel outside of Texas, complete Schedule T): Constituent meeting

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

---

Date: 7/12/13

Payee name: Wolfegang Puck

Amount ($): 95.14

Payee address; City; State; Zip Code: #6317 1001 Performance Place Grand Prairie, TX 75050

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event Expense

Description (If travel outside of Texas, complete Schedule T): Fund Raiser - Tobi Jackson

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

---

Date: 7/11/13

Payee name: Brewed

Amount ($): 6.60

Payee address; City; State; Zip Code: 801 Magnolia 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): Constituent Meeting

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**

2 of

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 7/9/13

5 Payee name: Paris Coffee Shop

6 Amount ($): 3 74

7 Payee address; City; State; Zip Code: 700 Magnolia Ft. Worth, TX 76104

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): Constituent Mtg

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 7/8/13

Payee name: American Legion PO

Amount ($): 30 04

Payee address; City; State; Zip Code: 6801 Manhattan Blvd Ft. Worth, TX 76120

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food & Beverage

Description (If travel outside of Texas, complete Schedule T): Constituent Meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 7/3/13

Payee name: Deluxe Grill

Amount ($): 25 00

Payee address; City; State; Zip Code: 2600 W. 7th Ft. Worth, TX 76107

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food & Beverage

Description (If travel outside of Texas, complete Schedule T): Staff Meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 7/2/13

Payee name: Austin CD.

Amount ($): 1200 00

Payee address; City; State; Zip Code: 2401 Scott Ave Ft. Worth, TX 76103

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Event Expense

Description (If travel outside of Texas, complete Schedule T): Fundraiser - Tobi Jackson

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

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# POLITICAL EXPENDITURES

**SCHEDULE F**

3 of

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 6/27/2013

5 Payee name: Pop's Safari

6 Amount ($): 139.82

7 Payee address; City; State; Zip Code: 2929 Morton, Ft. Worth, TX 76107

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Food & Beverage

(b) Description (If travel outside of Texas, complete Schedule T): Constituent Meeting / Dinner

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 6/24/13

Payee name: Wells Fargo Bank

Amount ($): 2.50

Payee address; City; State; Zip Code: ATM Transaction Fee

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting / Banking / Fees

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: 6/24/13

Payee name: Wells Fargo Bank

Amount ($): 2.50

Payee address; City; State; Zip Code: ATM Transaction

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting / Banking / Fees

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: 6/24/13

Payee name: Olen Jack's Grille

Amount ($): 17.75

Payee address; City; State; Zip Code: 770 Rd to Six Flags, Arlington, TX 76011

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food / Beverage

Description (If travel outside of Texas, complete Schedule T): Staff meeting

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**

4 of

**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) |
|---|---|---|
| 16 | Daniel L. Scarth | |

| 4 Date | 5 Payee name |
|---|---|
| 6/21/13 | TAP Tavern |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| 69.00 | 221 W. Lancaster<br>Ft. Worth, TX 76102 |

| 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) |
|---|---|---|
| | Event Expense | Fundraising Planning Meeting |

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

| Date | Payee name |
|---|---|
| 6/19/13 | Yucatan Taco Stand |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 20.21 | 909 W. Magnolia<br>Ft. Worth, TX 76104 |

| 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 | Staff Meeting |

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

| Date | Payee name |
|---|---|
| 6/17/13 | H3-Ranch |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 46.36 | H3 Ranch - 109 East Exchange<br>Ft. Worth, TX 76164 |

| 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 | Meeting with Constituent/Contributor |

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

| Date | Payee name |
|---|---|
| 6/14/13 | Global Mail |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 776.03 | 576N Beach Street<br>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) |
|---|---|---|
| | Printing Expense | |

| 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**

5 of

**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: 5 of 16 | 2 FILER NAME: Daniel L. Scarth | 3 ACCOUNT # (Ethics Commission Filers) |

| | | | |
|---|---|---|---|
| 4 Date: 6/14/13 | 5 Payee name: Global Mail | | |
| 6 Amount ($): 645.81 | 7 Payee address; City; State; Zip Code: 546 N. Beach Str. Ft Worth, TX | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule): Advertising | (b) Description (If travel outside of Texas, complete Schedule T): Mail Pieces | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 6/14/13 | Payee name: Jason's Deli #038 | | |
| Amount ($): 125.76 | Payee address; City; State; Zip Code: Bedford, TX | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Food / Beverage | Description (If travel outside of Texas, complete Schedule T): Community Meeting / WCD | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 6/12/13 | Payee name: Turning Point Natl | | |
| Amount ($): 500.00 | Payee address; City; State; Zip Code: 433 Pacific Terrell, TX | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Contribution/Donation | Description (If travel outside of Texas, complete Schedule T): Fundraiser | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 6/10/13 | Payee name: Wells Fargo | | |
| Amount ($): 2.50 | Payee address; City; State; Zip Code: ATM Transaction | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Fees/Accounting Banking | 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**

6d

**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) |
|---|---|---|
| 16 | Daniel L. Scarth | |

| 4 Date | 5 Payee name |
|---|---|
| 6/7/13 | American Legion |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| 24.64 | 6801 Manhattan Blvd Ft. Worth, TX 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) |
|---|---|---|
| | Food/Beverage Expense | Constituent Meeting |

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

| Date | Payee name |
|---|---|
| 6/7/13 | Wells Fargo |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 2.50 | ATM Withdrawal |

| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) | 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 |
|---|---|
| 6/6/13 | Wells Fargo |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 2.50 | ATM Withdrawal |

| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
|---|---|---|
| | Fees / Accounting Banking | |

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

| Date | Payee name |
|---|---|
| 6/5/13 | Houlihan's #185 |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 31.29 | 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) |
|---|---|---|
| | Food Beverage Expense | Constituent Meeting |

| 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 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.** 74

| 1 Total pages Schedule F: | 2 FILER NAME | 3 ACCOUNT # (Ethics Commission Filers) |
|---|---|---|
| 16 | Daniel L Scarth | |

| 4 Date | 5 Payee name |
|---|---|
| 6/7/13 | Lone Star Grand Prairie |

| 6 Amount ($) | 7 Payee address; City; State; Zip Code |
|---|---|
| 103.00 | 1000 Lone Star, Grand Prairie TX 75050 |

| 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) |
|---|---|---|
| | Event Expense | Intergovernmental Mtg c̄ Ron Jenson |

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

| Date | Payee name |
|---|---|
| 6/10/13 | Wells Fargo |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 2.50 | ATM Withdrawal |

| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule) | Description (If travel outside of Texas, complete Schedule T) |
|---|---|---|
| | Fees/Accounting/Banking | |

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

| Date | Payee name |
|---|---|
| 6/4/13 | Best Buy |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 27.04 | 9581 Sage Meadow Trail 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) |
|---|---|---|
| | Office Overhead | Memory Stick |

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

| Date | Payee name |
|---|---|
| 6/3/13 | Metro PCS |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| 80.00 | 1100 Bridgewood Drive 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) |
|---|---|---|
| | Office Overhead | Campaign Phone |

| 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**

8 of

**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) |
|---|---|---|
| 16 | Daniel L. Scarth | |

| | | | |
|---|---|---|---|
| 4 Date: 6/3/13 | 5 Payee name: Casa Manana | | |
| 6 Amount ($): 1,000.00 | 7 Payee address; City; State; Zip Code: 3101 W. Lancaster, Ft. Worth, TX 76107 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule): Contribution/Donation | (b) Description (If travel outside of Texas, complete Schedule T): Fundraiser for Casa Mana | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 6/3/13 | Payee name: Gordon Boswell | | |
| Amount ($): 59.48 | Payee address; City; State; Zip Code: 1220 Pennsylvania Ave. Ft. Worth, TX | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Gift/Rewards/Memorial | Description (If travel outside of Texas, complete Schedule T): Flowers for Widow of Jerry Waller | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 5/20/13 | Payee name: Mercury Chop House | | |
| Amount ($): 45.24 | Payee address; City; State; Zip Code: 111 Main St. Ft. Worth, TX 76102 | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Food/Beverage | Description (If travel outside of Texas, complete Schedule T): Constituent Meeting | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

| | | | |
|---|---|---|---|
| Date: 5/20/13 | Payee name: American Legion | | |
| Amount ($): 41.10 | Payee address; City; State; Zip Code: 6801 Manhattan Ave Ft. Worth, TX 76120 | | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Food/Beverage | Description (If travel outside of Texas, complete Schedule T): Breakfast Meeting with Developers | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

9 of

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5/17/13

5 Payee name: Wells Fargo

6 Amount ($): 2.50

7 Payee address; City; State; Zip Code: ATM Transcation Fee

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Fees/Accounting/Banking

(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: 5/16/13

Payee name: Bob's Steakhouse

Amount ($): 95.00

Payee address; City; State; Zip Code: 1300 Houston Str Ft. Worth, TX 76102

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food Beverage

Description (If travel outside of Texas, complete Schedule T): Meeting c̄ local legislators

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/15/13

Payee name: Shaw's Patio Grill

Amount ($): 35.93

Payee address; City; State; Zip Code: 1057 W. Magnolia Ft. Worth, TX 76104

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food/Beverage

Description (If travel outside of Texas, complete Schedule T): Staff Meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/14/13

Payee name: Frank Moss Campaign

Amount ($):

Payee address; City; State; Zip Code: Online Payment

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Fundraising Expense

Description (If travel outside of Texas, complete Schedule T): Contribution

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

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# POLITICAL EXPENDITURES

**SCHEDULE F**

11 of

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5/14/13

5 Payee name: Wells Fargo

6 Amount ($): 2 50

7 Payee address; City; State; Zip Code: ATM Withdrawal

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Fees / Accounting / Banking

(b) Description (If travel outside of Texas, complete Schedule T): Fee

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/14/13

Payee name: Pops Safari

Amount ($): 65 69

Payee address; City; State; Zip Code: 2929 Morton St. Ft. Worth, TX 76107

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food / Beverage

Description (If travel outside of Texas, complete Schedule T): Constituent Dinner

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/13/13

Payee name: Exxon Mobile #4790

Amount ($): 57 61

Payee address; City; State; Zip Code: Ft. Worth, TX

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): Community Meeting

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/16/13

Payee name: Cheers Spirits

Amount ($): 97 37

Payee address; City; State; Zip Code: Eastchase Center Ft. Worth, TX

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food/Beverage

Description (If travel outside of Texas, complete Schedule T): Campaign Victory Party

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

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# POLITICAL EXPENDITURES

**SCHEDULE F**

12 of

**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: 16 | 2 FILER NAME: Daniel L. Scarth | 3 ACCOUNT # (Ethics Commission Filers) |
| 4 Date: 5/13/13 | 5 Payee name: Robotalker.com | |
| 6 Amount ($): 151.00 | 7 Payee address; City; State; Zip Code: Robotalker.com | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule): Advertising | (b) Description (If travel outside of Texas, complete Schedule T): Electronic Phone Calls |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date: 5/10/13 | Payee name: Flying Fish | |
| Amount ($): 23.72 | Payee address; City; State; Zip Code: 300 E. Abram, Arlington, TX 76010 | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Food/Beverage | Description (If travel outside of Texas, complete Schedule T): Constituent meeting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date: 5/9/13 | Payee name: Chuy's | |
| Amount ($): 83.95 | Payee address; City; State; Zip Code: 7th Street, Ft. Worth, TX | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Food / Beverage | Description (If travel outside of Texas, complete Schedule T): City Staff luncheon |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought / Office held |

| | | |
|---|---|---|
| Date: 5/8/2013 | Payee name: Wells Fargo | |
| Amount ($): 2.50 | Payee address; City; State; Zip Code: ATM Withdrawal | |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Fees / Accounting/Banking | 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 |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

13 of

**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) |
|---|---|---|
| 16 | Daniel L. Scarth | |

| | |
|---|---|
| 4 Date: 5/8/13 | 5 Payee name: Best Buy |
| 6 Amount ($): 303.00 | 7 Payee address; City; State; Zip Code: 9581 Sage Meadow Trail, Ft. Worth, TX |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule): Office Overhead<br>(b) Description (If travel outside of Texas, complete Schedule T): Laptop for Campaign |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: <br>Office sought: <br>Office held: |

| | |
|---|---|
| Date: 5/8/13 | Payee name: Mulhollands |
| Amount ($): 70.36 | Payee address; City; State; Zip Code: 1332 N. Main, Ft. Worth, TX 76106 |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Advertising Expense<br>Description (If travel outside of Texas, complete Schedule T): Logo Shirts for Volunteers |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: <br>Office sought: <br>Office held: |

| | |
|---|---|
| Date: 5/7/13 | Payee name: Greater Meadowbrook News |
| Amount ($): 394.00 | Payee address; City; State; Zip Code: 2320 Oakland Blvd., Ft. Worth, TX 76124 |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Advertising<br>Description (If travel outside of Texas, complete Schedule T): Advertising/Newspaper |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: <br>Office sought: <br>Office held: |

| | |
|---|---|
| Date: 5/7/13 | Payee name: Global Mail |
| Amount ($): 375.34 | Payee address; City; State; Zip Code: 576 N. Beach Street, Ft. Worth, TX |
| PURPOSE OF EXPENDITURE | Category (See categories listed at the top of this schedule): Printing Expense<br>Description (If travel outside of Texas, complete Schedule T): |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name: <br>Office sought: <br>Office held: |

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# POLITICAL EXPENDITURES

**SCHEDULE F**

149

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5/7/13

5 Payee name: Home Depot #6534

6 Amount ($): -27.04

7 Payee address; City; State; Zip Code: Beidge Wood Ft. Worth, TX 76112

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Other

(b) Description (If travel outside of Texas, complete Schedule T): Return of supplies

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/6/13

Payee name: Wells Fargo

Amount ($): -2.50

Payee address; City; State; Zip Code: ATM Transaction

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Accounting / Banking Fees

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: 5/2/13

Payee name: Time Warner Cable

Amount ($): 2931.00

Payee address; City; State; Zip Code: 1320 South University Ft. Worth, TX

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising

Description (If travel outside of Texas, complete Schedule T): TV ADS

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

---

Date: 5/6/13

Payee name: Home Depot #6534

Amount ($): 167.11

Payee address; City; State; Zip Code: Beidgewood Ft. Worth, TX 76112

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Advertising

Description (If travel outside of Texas, complete Schedule T): Sign Supplies

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name:

Office sought:

Office held:

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# POLITICAL EXPENDITURES

**SCHEDULE F**

15 of

**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: 16

2 FILER NAME: Daniel L. Scarth

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 5/6/13

5 Payee name: Home Depot

6 Amount ($): 172 12

7 Payee address; City; State; Zip Code: Bridgewood Ft. Worth, TX 76112

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Advertising

(b) Description (If travel outside of Texas, complete Schedule T): Sign Supplies

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

---

Date: 5/8/13

Payee name: T&P Tavern

Amount ($): 32 00

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

Description (If travel outside of Texas, complete Schedule T): Staff Planning Meeting

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

---

Date: 5/02/13

Payee name: No Frills Grill

Amount ($): 26 51

Payee address; City; State; Zip Code: Eastchase Plaza Ft. Worth, TX

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Food/Beverage

Description (If travel outside of Texas, complete Schedule T): Constituent Meeting

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

---

Date: 5/03/13

Payee name: Jim Rutherford

Amount ($): 400 00

Payee address; City; State; Zip Code: 2011 Arborcrest Arlington, TX 76012

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Contract Labor

Description (If travel outside of Texas, complete Schedule T): Campaign Signs

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

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# POLITICAL EXPENDITURES

**SCHEDULE F**

16 of

**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: 16 | 2 FILER NAME Daniel L. Scurth | 3 ACCOUNT # (Ethics Commission Filers) |
| 4 Date 5/02/12 | 5 Payee name Susan Jackson | |
| 6 Amount ($) 500.00 | 7 Payee address; City; State; Zip Code 316 N. Baily Ft. Worth, TX 76107 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See categories listed at the top of this schedule) Contract labor | (b) Description (If travel outside of Texas, complete Schedule T) Adminstration, Campaign labor |
| 9 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 |

| | | |
|---|---|---|
| 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 |

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