

**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 Filer ID	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST ALAN	MI
	NICKNAME	LAST BLAYLOCK	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4801 CARGILL CIR FT. WORTH, TX 76244		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Brian	MI
	NICKNAME	LAST Black	SUFFIX
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); 9136 Tate Ave.	APT / SUITE #;	CITY; STATE; ZIP CODE Fort Worth TX 76244
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 01/01/2022	THROUGH	Month Day Year 03/28/2022
10 ELECTION	ELECTION DATE Month Day Year 05/07/2022		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None	12 OFFICE SOUGHT (if known) Fort Worth City Council, District 4	



GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

2 of 9

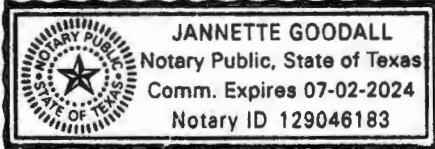
13 C / OH NAME BLAYLOCK, ALAN	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%"> <tr> <td style="width:30%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

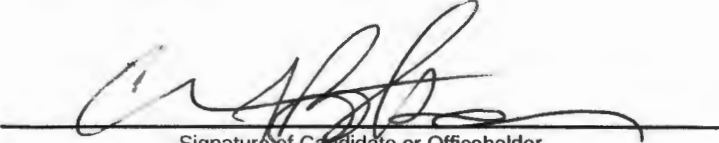
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,020.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	9,624.45
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	18,270.82
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	25,000.00

17 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.

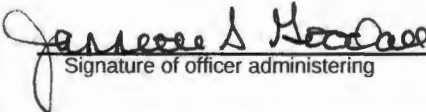


AFFIX NOTARY STAMP/ SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Alan J. Blaylock, this the 6th day of April, 2022, to certify which, witness my hand and seal of office.



Signature of officer administering

Jannette S. Goodall

Printed name of officer administering

Notary

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME BLAYLOCK, ALAN		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,020.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 9,624.45
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/9
2 FILER NAME BLAYLOCK, ALAN		3 Filer ID
4 Date 03/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaylock, James	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 7229 Fransisco Dr. Fort Worth, TX 76133		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaylock, Mindy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 4801 CARGILL CIR FT. WORTH, TX 76244		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Range Resources
Date 03/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaylock, Mindy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 4801 CARGILL CIR FT. WORTH, TX 76244		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Range Resources
Date 03/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickerson, Scott	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 10109 Buffalo Grove Road Fort Worth, TX 76108		
Principal occupation / Job title (See Instructions) Fire Rescue		Employer (See Instructions) DFW Airport
Date 03/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feirtag, Beverly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4812 Seneca Dr. Fort Worth, TX 76137		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/9
2 FILER NAME BLAYLOCK, ALAN		3 Filer ID
4 Date 03/26/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Janna	7 Amount of Contribution (\$) \$75.00
6 Contributor address; City; State; Zip Code 9725 Sam Bass Trail Fort Worth, TX 76244		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions)
Date 03/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina, Todd	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 9712 Sam Bass Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed
Date 03/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Lisa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 105 Copperfield Ct Weatherford, TX 76087		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Novartis
Date 02/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Picciuti, Charles	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 9709 Sam Bass Trail Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1660 Keller Parkway Keller, TX 76248		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Range Production Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/9
2 FILER NAME BLAYLOCK, ALAN		3 Filer ID
4 Date 03/18/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rankin, Ken	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 642 Highland Meadow Drive Highland Village, TX 75077		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rankin, Michael	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 125 Wilderness Way Santa Rosa Beach, FL 32459		
Principal occupation / Job title (See Instructions) Financial Planner		Employer (See Instructions) Self
Date 03/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jane	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 3800 Sundown Dr. Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker III, James	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3800 Sundown Dr. Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 7/9	2 FILER NAME BLAYLOCK, ALAN	3 Filer ID
4 Date 03/28/2022	5 Payee name Anedot	
6 Amount (\$) \$44.50	7 Payee address; City; State; Zip Code 1340 Poydras Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cc processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2022	Payee name Murphy Nasica & Associates	
Amount (\$) \$143.25	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2022	Payee name Murphy Nasica & Associates	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 8/9	2 FILER NAME BLAYLOCK, ALAN	3 Filer ID
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4 Date 03/15/2022	5 Payee name Murphy Nasica & Associates
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6 Amount (\$) \$6,089.06	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard and Road Signs
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/15/2022	Payee name Murphy Nasica & Associates
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/22/2022	Payee name Murphy Nasica & Associates
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Amount (\$) \$290.37	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 9/9	2 FILER NAME BLAYLOCK, ALAN	3 Filer ID
4 Date 03/25/2022	5 Payee name Murphy Nasica & Associates	
6 Amount (\$) \$557.27	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Grassroots
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held
	Office sought	