

SWORN COMPLAINT BEFORE THE TEXAS ETHICS COMMISSION

An individual must be a resident of the state of Texas to be eligible to file a sworn complaint with the Texas Ethics Commission. The complainant is required to attach to the complaint a copy of one of the following documents:

- complainant's driver's license or personal identification certificate issued under Chapter 521 of the Transportation Code, or commercial driver's license issued under Chapter 522 of the Transportation Code; or
- a utility bill, bank statement, government check, paycheck or other government document that shows the name and address of the complainant and is dated not more than 30 days before the date on which the complaint is filed.

Effective September 1, 2009, an individual may also be eligible to file a sworn complaint with the Texas Ethics Commission if the individual owns real property in the state of Texas. Under this provision, the complainant will be required to attach to the complaint a copy of a property tax bill, notice of appraised value, or other government document that shows the name of the complainant, shows the address of the real property in Texas, and identifies the complainant as the owner of the real property.

| OFFICE USE ONLY | |
|--|--|
| Docket Number | |
| Date Hand-delivered or Date Postmarked | |
| HAND DELIVERED RECEIVED MAY 23 2012 | |
| Texas Ethics Commission | |

I. IDENTITY OF COMPLAINANT

| | | | | | |
|---|-------------------------------|-------------------------|----------------|------------------------------|--------------|
| 1 COMPLAINANT NAME | MS / MRS / MR <u>MR</u> | FIRST <u>Tony</u> | MI <u>K</u> | | |
| | NICKNAME | LAST <u>McDonald</u> | SUFFIX | | |
| 2 COMPLAINANT PHYSICAL ADDRESS | ADDRESS | APT / SUITE #: | CITY: | STATE: | ZIP CODE |
| | <u>5105 Prairie Dunes Dr.</u> | | <u>Austin</u> | <u>Tx</u> | <u>78747</u> |
| <small>(Full home or business address, including street, city, state, and zip code)</small> | | | | | |
| 3 COMPLAINANT MAILING ADDRESS | ADDRESS | APT / SUITE #: | CITY: | STATE: | ZIP CODE |
| <input checked="" type="checkbox"/> (check if same as above) | | | | | |
| <small>(Full home or business address, including street, city, state, and zip code)</small> | | | | | |
| 4 COMPLAINANT TELEPHONE NUMBER | AREA CODE | PHONE NUMBER | EXT | 5 COMPLAINANT E-MAIL ADDRESS | |
| | <u>512</u> | <u>923-6893</u> | | | |

II. IDENTITY OF RESPONDENT

| | | | | | |
|---|---|-------------------|----------------|---|--------------|
| 6 RESPONDENT NAME | MS / MRS / MR | FIRST | MI | | |
| | NICKNAME <u>Mr.</u> | LAST <u>Roger</u> | SUFFIX | | |
| | | <u>Fisher II</u> | | | |
| 7 RESPONDENT POSITION OR TITLE | <u>Running for State Representative District 92</u> | | | | |
| 8 RESPONDENT PHYSICAL ADDRESS | ADDRESS | APT / SUITE #: | CITY: | STATE: | ZIP CODE |
| | <u>3217 Sapphire St.</u> | | <u>Bedford</u> | <u>Tx</u> | <u>76021</u> |
| <small>(Full home or business address, including street, city, state, and zip code)</small> | | | | | |
| 9 RESPONDENT MAILING ADDRESS | ADDRESS | APT / SUITE #: | CITY: | STATE: | ZIP CODE |
| <input type="checkbox"/> (check if same as above) | <u>P.O. Box</u> | <u>211 981</u> | <u>Bedford</u> | <u>Tx</u> | <u>76095</u> |
| <small>(Full home or business address, including street, city, state, and zip code)</small> | | | | | |
| 10 RESPONDENT TELEPHONE NUMBER | AREA CODE | PHONE NUMBER | EXT | 11 RESPONDENT E-MAIL ADDRESS (IF KNOWN) | |
| | <u>817</u> | <u>812</u> | <u>6863</u> | <u>Campaign@voterogerfisher.com</u> | |

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III. NATURE OF ALLEGED VIOLATION

Include the specific law(s) or rule(s) alleged to have been violated. The Texas Ethics Commission has jurisdiction to enforce only the following laws: (1) Title 15 of the Election Code; (2) Chapters 302, 303, 305, 572, 2004 of the Gov't Code; §334.025 and §335.055 of the Local Gov't Code; (4) Subchapter C, Chapter 159 of the Local Gov't Code, in connection with a county judicial officer who elects to file a financial statement with the commission; (5) §2152.064 and §2155.003 of the Gov't Code; (6) §306.005 of the Gov't Code.

Respondent Roger Fisher, in violation of TEX. ELEC. CODE §§ 254.031 and 254.064, knowingly accepted a \$2,500 political contribution from Texans for Economic Development on or about May 9, 2012 which was within the reporting period of April 20, 2012 through May 19, 2012 (period covered for the 8th Day before election report) and knowingly and intentionally failed to report the contribution on his most recent report to the Texas Ethics Commission. TEX. ELEC. CODE § 254.041 provides for a criminal penalty for failure to include required information in a report to the Texas Ethics Commission.

ATTACH ADDITIONAL PAGES AS NEEDED

IV. STATEMENT OF FACTS**Page 3**

State the facts constituting the alleged violation(s), including the dates on which or the period of time in which the alleged violation(s) occurred. Identify allegations of facts not personally known to the complainant, but alleged on information and belief. Please use simple, concise, and direct statements.

Based on information and belief, and according to Form GPAC filed by Texans for Economic Development on or about May 21, 2012, Respondent knowingly accepted a political contribution from Texans for Economic Development, a general-purpose committee. See Exhibit A.

Based on information and belief, and according to Form C/OH filed by Respondent on or about May 21, 2012, Respondent failed to report a political contribution he accepted from Texans for Economic Development on or about May 9, 2012. See Exhibit B.

Based on information and belief, Respondent violated TEX. ELEC. CODE § 254.031 by failing to report statutorily required information on a political contribution he received from Texans for Economic Development. Additionally, Respondent violated TEX. ELEC. CODE § 254.064(c) by failing to file a complete report with the Texas Ethics Commission that included all political contributions received during the time period beginning the 39th day before the election and continuing through the 10th day before the election in that he failed to report a political contribution that was accepted during the reporting period from Texans for Economic Development.

ATTACH ADDITIONAL PAGES AS NEEDED

V. LISTING OF DOCUMENTS AND OTHER MATERIAL**Page 4**

List all documents and other materials filed with this complaint. Additionally, list all other documents and other materials that are relevant to this complaint and that are within your knowledge, including their location, if known.

1. A true and correct copy of the Form GPAC filed by Texans for Economic Development on or about May 21, 2102, stating that a political contribution was made to Respondent on or about May 9, 2012, is attached as "Exhibit A."
2. A true and correct copy of Form C/OH filed by Respondent on or about May 21, 2012 that does not contain any information regarding the acceptance of a political contribution from Texans for Economic Development is attached as "Exhibit B."
3. A true and correct copy of one of the documents required under §571.122(b-1) of the Government Code is attached to this Sworn Complaint.

ATTACH ADDITIONAL PAGES AS NEEDED

**VI. AFFIDAVIT
BASED ON PERSONAL KNOWLEDGE**

(Execute this affidavit if the acts alleged are within your direct personal knowledge.)

I, _____, complainant,
swear that I am a resident of the state of Texas. I swear that I have knowledge of the
facts alleged in this complaint and that the information contained in this complaint is
true and correct.

Signature of Complainant

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of
_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

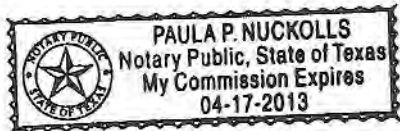
Title of officer administering oath

**VII. AFFIDAVIT
BASED ON INFORMATION AND BELIEF**

(Execute this affidavit if the acts alleged are not within your direct personal knowledge, but are based on reasonable belief.)

I, Tony K McDonald, complainant,
swear that I am a resident of the state of Texas. I swear that I have reason to believe
and do believe that the violation alleged in this complaint has occurred. The source
of my information and belief is

documents attached as exhibits A and B,
which are also available as public documents
filed with the Texas Ethics Commission.



[Signature]
Signature of Complainant

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tony K McDonald, this the May 22nd day of
May, 2012, to certify which, witness my hand and seal of office.

Paula P. Nuckolls
Signature of officer administering oath

PAULA P. NUCKOLLS
Printed name of officer administering oath

Notary Public
Title of officer administering oath

**A COMPLAINT WILL BE DISMISSED IF A COPY OF ONE OF THE FOLLOWING
DOCUMENTS IS NOT ATTACHED AS PROOF OF TEXAS RESIDENCY.**

Please check one of the boxes below to indicate the copy of the document you have attached to the complaint:

- Texas driver's license

- personal identification certificate
(issued under Chapter 521 of the Transportation Code)

- commercial driver's license
(issued under Chapter 522 of the Transportation Code)

- utility bill *

- bank statement *

- government check *

- paycheck *

- other government document *

* with name and address of complainant and dated not more than 30 days before the date on which the complaint is filed *

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

| | | | |
|---|--|--|---------------------------|
| The GPAC INSTRUCTION GUIDE explains how to complete this form. | | 1 ACCOUNT # (Ethics Commission filers) 00059603 | 2 PAGE # 1 of 5 |
| 3 COMMITTEE NAME Texans for Economic Development | | OFFICE USE ONLY | |
| | | Date Received | |
| | | Date Hand-delivered or Date Postmarked | |
| 4 COMMITTEE ADDRESS | ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE PO Box 685138 Austin, TX 78768-5138 | Receipt # | Amount |
| <input type="checkbox"/> Change of Address | | Date Processed | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mr. Tommy | | |
| | NICKNAME LAST SUFFIX Azopardi | | |
| 6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1122 Colorado Street Suite 208 Austin, TX 78701 | | |
| 7 CAMPAIGN TREASURER'S MAILING ADDRESS | STREET OR PO BOX: APT/SUITE#: CITY: STATE: ZIP CODE PO Box 685138 Austin, TX 78768-5138 | | |
| <input type="checkbox"/> Change of Address | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 473-0861 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 04/20/2012 05/19/2012 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 05/29/2012 | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special | |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM GPAC
COVER SHEET PG 2**

| | | |
|---|--|--------------------------------|
| 12 | COMMITTEE NAME Texans for Economic Development | ACCOUNT # 00059603 |
| 13 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (identify by name or, if applicable, classify by party) | A. Supported B. Opposed |
| | 2. Measures (describe by date and location of election and nature of issue) | A. Supported B. Opposed |
| | 3. Officeholders Assisted (identify by name or, if applicable, classify by party) | |
| 14 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$100 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold. | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 25,000.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 182,306.21 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

15 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.

Tommy J Azopardi

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20____, 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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|--|--|---|
| 1 PAGE # Schedule: 1/3 Report: 3/5 | 2 FILER NAME Texans for Economic Development | 3 ACCOUNT # (TEC filers) 00059603 |
|--|--|---|

| | |
|-----------------------------|--|
| 4 Date 05/09/2012 | 5 Payee name Cecil Bell Campaign |
|-----------------------------|--|

| | |
|---|--|
| 6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address City; State; Zip Code PO Box 819 Magnolia, TX 77355 |
|---|--|

| | | |
|---------------------------------|---|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution |
|---------------------------------|---|---|

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

| | |
|---------------------------|---|
| Date 05/09/2012 | Payee name Ed Thompson Campaign |
|---------------------------|---|

| | |
|---|---|
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address City; State; Zip Code 2205 Broadway Pearland, TX 77581 |
|---|---|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution |
|-------------------------------|---|---|

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

| | |
|---------------------------|--|
| Date 05/09/2012 | Payee name Jim Pruitt Campaign |
|---------------------------|--|

| | |
|---|--|
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address City; State; Zip Code 110 S Goliad Rockwall, TX 75087 |
|---|--|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution |
|-------------------------------|---|---|

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

| | |
|---------------------------|--|
| Date 05/09/2012 | Payee name John Raney Campaign |
|---------------------------|--|

| | |
|---|--|
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address City; State; Zip Code PO Box 11461 College Station, TX 77842-1146 |
|---|--|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution |
|-------------------------------|---|---|

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--------------|
| 1 PAGE # Schedule: 2/3 Report: 4/5 | | 2 FILER NAME Texans for Economic Development | | 3 ACCOUNT # (TEC filers) 00059603 | |
| 4 Date 05/09/2012 | | 5 Payee name Lee Duggan Campaign | | | |
| 6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address City; State; Zip Code 6440 Oilfield Road Sugar Land, TX 77479-9658 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 05/09/2012 | | Payee name Mike Hamilton Campaign | | | |
| Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address City; State; Zip Code PO Box 30171 Lumberton, TX 77657 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 05/09/2012 | | Payee name Myra Crownover Campaign | | | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address City; State; Zip Code PO Box 1784 Lake Dallas, TX 75065 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 05/09/2012 | | Payee name Roger Fisher Campaign | | | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address City; State; Zip Code PO Box 211981 Bedford, TX 76095 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|---|--|---|
| 1 PAGE # Schedule: 3/3 Report: 5/5 | 2 FILER NAME Texans for Economic Development | 3 ACCOUNT # (TEC filers) 00059603 |
| 4 Date 05/09/2012 | 5 Payee name Tony Dale Campaign | |
| 6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address City; State; Zip Code 104 Breakaway Road Cedar Park, TX 78613-6991 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political Contribution |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| | |
|----------------------------------|--|
| 1 ACCOUNT # 00068263 | 2 PAGE # 1 of 39 |
|----------------------------------|--|

| | | | |
|---|---|------------------------|---|
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Mr. Roger | OFFICE USE ONLY | NICKNAME LAST SUFFIX Fisher II |
| 4 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) | | Date Received |
| | <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit | | Date Hand-delivered or Date Postmarked |
| | <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) | | Receipt # Amount |
| 5 ORIGINAL PERIOD COVERED | Month Day Year Month Day Year 04/20/2012 THROUGH 05/19/2012 | | Legal Totals |
| | | | Date Processed |
| | | | Date Imaged |

6 EXPLANATION OF CORRECTION
A Payee name was corrected in Schedule F.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Roger D Fisher II

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by _____ this the _____ day of _____, 20____,
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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Fisher II, Roger (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00068263

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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. ..

| | | |
|---|----------------|--------------------------------------|
| <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE TYPE | COMMITTEE NAME |
| | | COMMITTEE ADDRESS |
| | | COMMITTEE CAMPAIGN TREASURER NAME |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS |

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 37,690.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 58,665.20

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 5,199.32

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 3,500.00

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.

Roger D Fisher II

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|--|---|---|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 1/20 Report: 4/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/07/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ABbott, Jonathan & Karen (Mr.) 6 Contributor address; City; State; Zip Code Bedford, TX 76021 | 7 Amount of contribution (\$) \$25.00 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ABC PAC Contributor address; City; State; Zip Code Austin, TX 78767 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) AGC - Texas Building Branch PAC Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allen, Rodney or Vicki (Mr.) Contributor address; City; State; Zip Code Mansfield, TX 76063 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrus, Leon or Lori (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 2/20 Report: 5/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/19/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Atmos Energy Corporation PAC 6 Contributor address; City; State; Zip Code Dallas, TX 75240 | 7 Amount of contribution (\$) \$500.00 | 8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Axton, Rachel & Scott (Ms.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/16/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ball, Kimberly (Ms.) Contributor address; City; State; Zip Code Arlington, TX 76016 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, William or Janice (Mr.) Contributor address; City; State; Zip Code Haslet, TX 76052 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/10/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrera, Anna (Ms.) Contributor address; City; State; Zip Code Arlington, TX 76016 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 3/20 Report: 6/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackman, John & Betty (Mr.) 6 Contributor address; City; State; Zip Code Denham Springs, LA 70726 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) Vice President | | 10 Employer (See Instructions) Reese Associates | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blackman, Ralph (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$80.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bowles, William & Lou (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Chris (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/19/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Buinger, Gene (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 4/20 Report: 7/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/27/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burgess, Lisa (Ms.) 6 Contributor address; City; State; Zip Code Frisco, TX 75033 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/23/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burleson, Kevin (Mr.) Contributor address; City; State; Zip Code Euless, TX 76040 | Amount of contribution (\$) \$75.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bynum, Perry or Lisa (Mr.) Contributor address; City; State; Zip Code Euless, TX 76040 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byron Cook Campaign Contributor address; City; State; Zip Code Corsicana, TX 75151 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cannon, Thure (Mr.) Contributor address; City; State; Zip Code Austin, TX 78749 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 5/20 Report: 8/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capps, Chad (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75231 | 7 Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capps, Jon or Donna (Mr.) Contributor address; City; State; Zip Code Crandall, TX 75114 | Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cargile, Andy or Karen (Mr.) Contributor address; City; State; Zip Code Hurst, TX 76054 | Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Champney, Raymond (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlie Geren Campaign Contributor address; City; State; Zip Code Fort Worth, TX 76101 | Amount of contribution (\$) \$3,000.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 6/20 Report: 9/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/10/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cossota, Jason (Mr.) 6 Contributor address; City; State; Zip Code Eules, TX 76039 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cowan, Rebecca (Ms.) Contributor address; City; State; Zip Code Frisco, TX 75035 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dabney, Trish (Ms.) Contributor address; City; State; Zip Code Eules, TX 76040 | Amount of contribution (\$) \$75.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Aaron (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Kevin or Jane (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 7/20 Report: 10/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Kevin or Jane (Mr.) 6 Contributor address; City; State; Zip Code Bedford, TX 76021 | 7 Amount of contribution (\$) \$250.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dickerson, Eva (Ms.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eubanks, Sue (Ms.) Contributor address; City; State; Zip Code Eules, TX 76039 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eye-PAC of the Texas Ophthalmological Association Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/19/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Farco, Steven & Julie (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Mason-Dallas, Inc. | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 8/20 Report: 11/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/07/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Felton, Mark or Marla (Mr.) 6 Contributor address; City; State; Zip Code Lubbock, TX 79424 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fort Worth Firefighters Committee Contributor address; City; State; Zip Code Fort Worth, TX 76107 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gafford, Ronald (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75204 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gole, Robert & Karmel (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffin, James or Wynette (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$250.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 9/20 Report: 12/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/08/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hall, Andrew (Mr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75206 | 7 Amount of contribution (\$) \$1,000.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) Sales Representative | | 10 Employer (See Instructions) Sherwin Williams | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanson, Mark (Mr.) Contributor address; City; State; Zip Code Arlington, TX 76012 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Mike & Cheryl (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harvey, Robert (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Helton, Charles (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 10/20 Report: 13/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hendrickson, Michael or Holley (Mr.) 6 Contributor address; City; State; Zip Code Bedford, TX 76021 | 7 Amount of contribution (\$) \$250.00 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 05/03/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henson, Doug (Mr.) Contributor address; City; State; Zip Code Allen, TX 75013 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Vice President | | Employer (See Instructions) Sherwin Williams | |
| Date 05/02/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Mark (Mr.) Contributor address; City; State; Zip Code Euless, TX 76039 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hinkle, K. Daniel (Mr.) Contributor address; City; State; Zip Code Sugar Land, TX 77478 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Government Affairs Consultant | | Employer (See Instructions) Self Employed (Dan Hinkle Consulting) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogan, F.D. (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75356 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 11/20 Report: 14/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hopkins, Kent & Sarah (Mr.) 6 Contributor address; City; State; Zip Code Euless, TX 76039 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, Kyle & Christen (Mr.) Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/27/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Idziak, Ben (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Israel, Phil (Mr.) Contributor address; City; State; Zip Code Shreveport, LA 71106 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacobsen, Lydia (Ms.) Contributor address; City; State; Zip Code McCamey, TX 79752 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 12/20 Report: 15/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/08/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacobsen, Tom (Mr.) 6 Contributor address; City; State; Zip Code Bedford, TX 76021 | 7 Amount of contribution (\$) \$25.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/23/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Ellen (Ms.) Contributor address; City; State; Zip Code Euless, TX 76040 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Melissa or Gregory (Ms.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/03/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larson, Tim & Sandy (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/04/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ledbetter, William (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 13/20 Report: 16/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowrie, Robert or Linda (Mr.) 6 Contributor address; City; State; Zip Code Martinez, GA 30907 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mahan, Levin & Lindsey (Mr.) Contributor address; City; State; Zip Code Grapevine, TX 76051 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) May, Sid (Mr.) Contributor address; City; State; Zip Code Hurst, TX 76054 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCammon, James (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Jason (Mr.) Contributor address; City; State; Zip Code Euless, TX 76039 | Amount of contribution (\$) \$20.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 15/20 Report: 18/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/14/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morton, Megan (Ms.) 6 Contributor address; City; State; Zip Code Euless, TX 76039 | 7 Amount of contribution (\$) \$20.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nelson, Derrick & Tiffany (Mr.) Contributor address; City; State; Zip Code Fort Worth, TX 76155 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neubauer, Pamela (Ms.) Contributor address; City; State; Zip Code Dallas, TX 75225 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) n/a | |
| Date 05/05/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norris, Jane (Ms.) Contributor address; City; State; Zip Code Dallas, TX 75214 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/02/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ordorica, Edgar (Mr.) Contributor address; City; State; Zip Code Houston, TX 77096 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 16/20 Report: 19/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/15/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pannell, Lyndell & Karen (Mr.) 6 Contributor address; City; State; Zip Code Bedford, TX 76021 | 7 Amount of contribution (\$) \$150.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Radimecky, Valen (Mr.) Contributor address; City; State; Zip Code Argyle, TX 76226 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Susan (Ms.) Contributor address; City; State; Zip Code Euless, TX 76039 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Susan (Ms.) Contributor address; City; State; Zip Code Euless, TX 76039 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Daniel & Marjorie (Mr.) Contributor address; City; State; Zip Code Hurst, TX 76053 | Amount of contribution (\$) \$20.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 17/20 Report: 20/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saleh, Mary (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Euless, TX 76040 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 05/09/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sartor, Terry (Mr.) <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/05/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmidt, Bob & Helen (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209 | Amount of contribution (\$) \$200.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sinisi, Jason (Mr.) <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sloan, Sally (Ms.) <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 18/20 Report: 21/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/07/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sloan, Sally (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116 | 7 Amount of contribution (\$) \$100.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Solheid, Michael & Leslie (Mr.) <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034 | Amount of contribution (\$) \$50.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/05/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speed, William or Carol (Mr.) <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tennant, FD and Tony (Mr.) <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022 | Amount of contribution (\$) \$25.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 05/19/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Energy Associations PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 19/20 Report: 22/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 05/07/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Medical Association PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701 | 7 Amount of contribution (\$) \$2,500.00 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| 10 Employer (See Instructions) | | | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas Parent PAC Contributor address; City; State; Zip Code Austin, TX 78703 | Amount of contribution (\$) \$2,500.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Employer (See Instructions) | | | |
| Date 05/08/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Timothy, Enoch or Dorothy (Mr.) Contributor address; City; State; Zip Code Colleyville, TX 76034 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Employer (See Instructions) | | | |
| Date 05/07/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valero PAC Contributor address; City; State; Zip Code San Antonio, TX 78269 | Amount of contribution (\$) \$1,000.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Employer (See Instructions) | | | |
| Date 04/23/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vaughan, Elaine (Ms.) Contributor address; City; State; Zip Code Galveston, TX 77551 | Amount of contribution (\$) \$500.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) Caterer | | (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> | |
| Employer (See Instructions) Self Employed (Catering by Benno) | | | |

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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| The INSTRUCTION GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 20/20 Report: 23/39 | |
| 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (Ethics Commission filers) 00068263 | |
| 4 Date 04/26/2012 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Richard & Virginia (Mr.) 6 Contributor address; City; State; Zip Code Hurst, TX 76054 | 7 Amount of contribution (\$) \$50.00 | 8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 05/14/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) WCS - Texas Solution PAC Contributor address; City; State; Zip Code Dallas, TX 75240 | Amount of contribution (\$) \$5,000.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/26/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilder, Tom (Mr.) Contributor address; City; State; Zip Code Bedford, TX 76021 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 04/23/2012 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winston, Matt & Nicole (Mr.) Contributor address; City; State; Zip Code Frisco, TX 75034 | Amount of contribution (\$) \$100.00 | In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 1/14 Report: 25/39 | 2 FILER NAME Fisher II, Roger (Mr.) | 3 ACCOUNT # (TEC filers) 00068263 |
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| 4 Date 05/15/2012 | 5 Payee name Central Market |
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| 6 Amount (\$) \$92.53 | 7 Payee address City; State; Zip Code 1425 E. Southlake Blvd. Southlake, TX 76092 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Decorations |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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|---------------------------|--------------------------------------|
| Date 04/22/2012 | Payee name City of Bedford |
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|--------------------------------|---|
| Amount (\$) \$100.00 | Payee address City; State; Zip Code 2400 School Lane Bedford, TX 76021 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facility Rental |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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|---------------------------|-----------------------------|
| Date 05/15/2012 | Payee name Costco |
|---------------------------|-----------------------------|

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|--------------------------------|--|
| Amount (\$) \$108.69 | Payee address City; State; Zip Code 2601 E. State Highway 114 Southlake, TX 76092 |
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| 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) <input type="checkbox"/> Volunteer Meal |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 04/25/2012 | Payee name Custom Wristbands.com |
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| Amount (\$) \$97.02 | Payee address City; State; Zip Code 4050 Wright Road, Suite 100 Houston, TX 77477 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Team Buttons |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
|--|-------------------------------|----------------|--------------|

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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|--|--|---|--|--|--------------|
| 1 PAGE # Schedule: 2/14 Report: 26/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/11/2012 | | 5 Payee name Dicks Sporting Goods | | | |
| 6 Amount (\$) \$274.63 | | 7 Payee address City: State; Zip Code 1101 Melbourne Road, #8000 Hurst, TX 76053 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Polling Place Tents | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 04/24/2012 | | Payee name Expressionary.com | | | |
| Amount (\$) \$149.82 | | Payee address City: State; Zip Code 2435 Goodwin Lane New Braunfels, TX 78135 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Stationery | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 05/15/2012 | | Payee name Fedex Office | | | |
| Amount (\$) \$75.76 | | Payee address City: State; Zip Code 1301 W. Glade Road, Suite 168 Eules, TX 76039 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Printing | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 04/25/2012 | | Payee name Grey Wolf Promotions | | | |
| Amount (\$) \$779.40 | | Payee address City: State; Zip Code 2900 State Highway 121, #175 Bedford, TX 76021 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Volunteer Shirts | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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|---|---|---|
| 1 PAGE # Schedule: 3/14 Report: 27/39 | 2 FILER NAME Fisher II, Roger (Mr.) | 3 ACCOUNT # (TEC filers) 00068263 |
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|-----------------------------|---|
| 4 Date 05/04/2012 | 5 Payee name Grey Wolf Promotions |
|-----------------------------|---|

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|---------------------------------|---|
| 6 Amount (\$) \$75.73 | 7 Payee address City: State: Zip Code 2900 State Highway 121, #175 Bedford, TX 76021 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Shirts |
|---------------------------------|---|--|

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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|---------------------------|----------------------------------|
| Date 04/30/2012 | Payee name HBank Texas |
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| Amount (\$) \$6.00 | Payee address City: State: Zip Code P.O. Box 2327 Grapevine, TX 76099 |
|------------------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Accounting/Banking | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service Charge |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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|---------------------------|--|
| Date 04/25/2012 | Payee name HEB Chamber of Commerce |
|---------------------------|--|

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|--------------------------------|--|
| Amount (\$) \$200.00 | Payee address City: State: Zip Code P.O. Drawer 969 Bedford, TX 76095 |
|--------------------------------|--|

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Chamber Tournament Sponsor |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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|---------------------------|--|
| Date 04/25/2012 | Payee name Keller Party Rental |
|---------------------------|--|

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| Amount (\$) \$116.91 | Payee address City: State: Zip Code 111 Minnie Street Keller, TX 76248 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Rental |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 PAGE # Schedule: 4/14 Report: 28/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/15/2012 | | 5 Payee name Market Street | | | |
| 6 Amount (\$) \$59.54 | | 7 Payee address City; State; Zip Code 5605 Colleyville Blvd. Colleyville, TX 76034 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Decorations | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Metro PCS | | | |
| Amount (\$) \$43.00 | | Payee address City; State; Zip Code 2901 Martin Drive, Suite A Bedford, TX 76021 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Phone | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Metro PCS | | | |
| Amount (\$) \$103.87 | | Payee address City; State; Zip Code 2901 Martin Drive, Suite A Bedford, TX 76021 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Phone | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/20/2012 | | Payee name Metroplex Republican Women | | | |
| Amount (\$) \$100.00 | | Payee address City; State; Zip Code 6312 Meadow Lakes Drive North Richland Hills, TX 76180 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Spring Shootout Sponsor | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES **SCHEDULE F**

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

| | | |
|---|---|---|
| 1 PAGE # Schedule: 5/14 Report: 29/39 | 2 FILER NAME Fisher II, Roger (Mr.) | 3 ACCOUNT # (TEC filers) 00068263 |
|---|---|---|

| | | | | | |
|---------------------------------|--|--------------|---|-------------------------------|----------------|
| 4 Date 04/25/2012 | 5 Payee name NYPD Deli | | | | |
| 6 Amount (\$) \$21.45 | 7 Payee address City: State: Zip Code 304 S. Industrial Blvd. Euless, TX 76040 | | | | |
| 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) <input type="checkbox"/> Volunteer Food | | |
| | <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Candidate / Officeholder name</td> <td style="width: 20%;">Office sought:</td> <td style="width: 20%;">Office held:</td> </tr> </table> | | | Candidate / Officeholder name | Office sought: |
| Candidate / Officeholder name | Office sought: | Office held: | | | |

| | | | | | |
|-------------------------------|--|--------------|--|-------------------------------|----------------|
| Date 04/25/2012 | Payee name Office Depot | | | | |
| Amount (\$) \$96.08 | Payee address City: State: Zip Code 201 S. Industrial Blvd. Euless, TX 76040 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies | | |
| | <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Candidate / Officeholder name</td> <td style="width: 20%;">Office sought:</td> <td style="width: 20%;">Office held:</td> </tr> </table> | | | Candidate / Officeholder name | Office sought: |
| Candidate / Officeholder name | Office sought: | Office held: | | | |

| | | | | | |
|--------------------------------|--|--------------|--|-------------------------------|----------------|
| Date 04/25/2012 | Payee name Party City | | | | |
| Amount (\$) \$108.03 | Payee address City: State: Zip Code 2800 State Highway 121 Euless, TX 76039 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Decorations | | |
| | <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Candidate / Officeholder name</td> <td style="width: 20%;">Office sought:</td> <td style="width: 20%;">Office held:</td> </tr> </table> | | | Candidate / Officeholder name | Office sought: |
| Candidate / Officeholder name | Office sought: | Office held: | | | |

| | | | | | |
|-------------------------------|--|--------------|--|-------------------------------|----------------|
| Date 04/25/2012 | Payee name Party City | | | | |
| Amount (\$) \$58.32 | Payee address City: State: Zip Code 2800 State Highway 121 Euless, TX 76039 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Decorations | | |
| | <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Candidate / Officeholder name</td> <td style="width: 20%;">Office sought:</td> <td style="width: 20%;">Office held:</td> </tr> </table> | | | Candidate / Officeholder name | Office sought: |
| Candidate / Officeholder name | Office sought: | Office held: | | | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--------------|
| 1 PAGE # Schedule: 6/14 Report: 30/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 04/23/2012 | | 5 Payee name Piryx | | | |
| 6 Amount (\$) \$3.38 | | 7 Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| 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) <input type="checkbox"/> Transaction Fee | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 04/25/2012 | | Payee name Piryx | | | |
| Amount (\$) \$31.50 | | Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 04/27/2012 | | Payee name Piryx | | | |
| Amount (\$) \$9.00 | | Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |
| Date 05/02/2012 | | Payee name Piryx | | | |
| Amount (\$) \$9.00 | | Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: | Office held: |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 PAGE # Schedule: 7/14 Report: 31/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/03/2012 | 5 Payee name Piryx | | | | |
| 6 Amount (\$) \$49.50 | 7 Payee address City; State; Zip Code 144 Second Street San Francisco, CA 94105 | | | | |
| 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) <input type="checkbox"/> Transaction Fee | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/04/2012 | Payee name Piryx | | | | |
| Amount (\$) \$1.13 | Payee address City; State; Zip Code 144 Second Street San Francisco, CA 94105 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/07/2012 | Payee name Piryx | | | | |
| Amount (\$) \$11.25 | Payee address City; State; Zip Code 144 Second Street San Francisco, CA 94105 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transacti on Fee | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name Piryx | | | | |
| Amount (\$) \$4.50 | Payee address City; State; Zip Code 144 Second Street San Francisco, CA 94105 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 PAGE # Schedule: 8/14 Report: 32/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/10/2012 | | 5 Payee name Piryx | | | |
| 6 Amount (\$) \$6.75 | | 7 Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| 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) <input type="checkbox"/> Transaction Fee | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 05/15/2012 | | Payee name Piryx | | | |
| Amount (\$) \$6.75 | | Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 05/16/2012 | | Payee name Piryx | | | |
| Amount (\$) \$2.25 | | Payee address City: State: Zip Code 144 Second Street San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Transaction Fee | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 05/05/2012 | | Payee name Red Barn BBQ | | | |
| Amount (\$) \$132.48 | | Payee address City: State: Zip Code 4913 Colleyville Blvd. Colleyville, TX 76034 | | | |
| 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) <input type="checkbox"/> Volunteer Meal | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 PAGE # Schedule: 9/14 Report: 33/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/12/2012 | | 5 Payee name Red Barn BBQ | | | |
| 6 Amount (\$) \$81.97 | | 7 Payee address City; State; Zip Code 4913 Colleyville Blvd. Colleyville, TX 76034 | | | |
| 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) <input type="checkbox"/> Volunteer Meals | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Staples | | | |
| Amount (\$) \$39.99 | | Payee address City; State; Zip Code 2800 State Highway 121, Suite 1000 Eules, TX 76039 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Business Cards | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Staples | | | |
| Amount (\$) \$56.28 | | Payee address City; State; Zip Code 2800 State Highway 121, Suite 1000 Eules, TX 76039 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Business Cards | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Subway | | | |
| Amount (\$) \$37.43 | | Payee address City; State; Zip Code 3225 Harwood Road, Suite D Bedford, TX 76021 | | | |
| 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) <input type="checkbox"/> Volunteer Food | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 PAGE # Schedule: 10/14 Report: 34/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 04/25/2012 | | 5 Payee name Subway | | | |
| 6 Amount (\$) \$35.71 | | 7 Payee address City; State; Zip Code 3225 Harwood Road, Suite D Bedford, TX 76021 | | | |
| 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) <input type="checkbox"/> Volunteer Lunch | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/23/2012 | | Payee name Tarrant County GOP | | | |
| Amount (\$) \$200.00 | | Payee address City; State; Zip Code 2405 Gravel Drive Fort Worth, TX 76118 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Half Page Ad SD9 | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name The Eppstein Group | | | |
| Amount (\$) \$15,000.00 | | Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Consulting Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Consulting | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name The Eppstein Group | | | |
| Amount (\$) \$2,206.14 | | Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|---|---|---|---|--|
| 1 PAGE # Schedule: 11/14 Report: 35/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 04/25/2012 | 5 Payee name The Eppstein Group | | | | |
| 6 Amount (\$) \$4,018.78 | 7 Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$3,500.00 | Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website Development | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$1,096.03 | Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$465.48 | Payee address City; State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | | Office sought: | Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

| | | | | | |
|--|---|---|---|---|--|
| 1 PAGE # Schedule: 12/14 Report: 36/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/09/2012 | 5 Payee name The Eppstein Group | | | | |
| 6 Amount (\$) \$1,623.75 | 7 Payee address City: State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$8,249.33 | Payee address City: State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/09/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$3,159.21 | Payee address City: State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| | Candidate / Officeholder name | | Office sought: | Office held: | |
| Date 05/15/2012 | Payee name The Eppstein Group | | | | |
| Amount (\$) \$6,254.98 | Payee address City: State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 | | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials | | |
| | Candidate / Officeholder name | | Office sought: | Office held: | |

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 13/14 Report: 37/39 | 2 FILER NAME Fisher II, Roger (Mr.) | 3 ACCOUNT # (TEC filers) 00068263 |
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| 4 Date 05/16/2012 | 5 Payee name The Eppstein Group |
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| 6 Amount (\$) \$8,141.81 | 7 Payee address City: State; Zip Code 4055 International Plaza, Suite 600 Fort Worth, TX 76109 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Materials |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 04/22/2012 | Payee name Tom Thumb Grocery Store |
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| Amount (\$) \$14.15 | Payee address City: State; Zip Code 3300 Harwood Road Bedford, TX 76021 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Food |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 04/25/2012 | Payee name Tom Thumb Grocery Store |
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| Amount (\$) \$75.94 | Payee address City: State; Zip Code 3300 Harwood Road Bedford, TX 76021 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Event Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Host Thank You Gifts |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 04/25/2012 | Payee name Tom Thumb Grocery Store |
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| Amount (\$) \$11.99 | Payee address City: State; Zip Code 3300 Harwood Road Bedford, TX 76021 |
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| 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) <input type="checkbox"/> Volunteer Lunch |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 14/14 Report: 38/39 | | 2 FILER NAME Fisher II, Roger (Mr.) | | 3 ACCOUNT # (TEC filers) 00068263 | |
| 4 Date 05/07/2012 | | 5 Payee name Tom Thumb Grocery Store | | | |
| 6 Amount (\$) \$32.46 | | 7 Payee address City; State; Zip Code 3300 Harwood Road Bedford, TX 76021 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Event Expense | | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Host Thank You Gift | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name U.S. Postmaster | | | |
| Amount (\$) \$60.00 | | Payee address City; State; Zip Code 1300 Harwood Road Bedford, TX 76021 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PO Box Rental | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |
| Date 04/25/2012 | | Payee name Wal Mart | | | |
| Amount (\$) \$44.30 | | Payee address City; State; Zip Code 4101 Highway 121 Bedford, TX 76021 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Event Expense | | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Host Thank You Notes | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought: Office held: | |

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

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| 1 PAGE # Schedule: 1/1 Report: 39/39 | 2 FILER NAME Fisher II, Roger (Mr.) | 3 ACCOUNT # (TEC filers) 00068263 |
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| 4 Date 04/25/2012 | 5 Business name Qualtex, Inc. |
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| 6 Amount (\$) \$832.45 | 7 Business address City; State; Zip Code 906 Stanley Drive Euless, TX 76040 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) OTHER - Postage | (b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Postage |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 04/25/2012 | Business name Qualtex, Inc. |
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| Amount (\$) \$225.00 | Business address City; State; Zip Code 906 Stanley Drive Euless, TX 76040 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Letter Stock |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
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| Date 05/19/2012 | Business name Qualtex, Inc. |
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| Amount (\$) \$267.75 | Business address City; State; Zip Code 906 Stanley Drive Euless, TX 76040 |
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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER - Postage | Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraiser Postage |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: | Office held: |
|---|-------------------------------|----------------|--------------|