

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 8 7 plc

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	Mrs.	Patricia		Date Received	
	NICKNAME	LAST	SUFFIX		
	Pat	Carlson			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	421 Forest River Ct.,	Fort Worth, TX.	76112		4/27/2023
Change of Address					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
	(817)	819-8020			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$
		John			①
				Date Processed	4/27/2023
				Date Imaged	4/27/2023

Carlson

7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	421 Forest River Ct.,	Fort Worth, TX.	76112		
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(817)	819-8022			
9 REPORT TYPE	☐ January 15	☐ 30th day before election	☐ Runoff	☐ 15th day after campaign treasurer appointment (Officeholder Only)	
	☐ July 15	☐ 8th day before election	☐ Modified Limit	☐ Final Report (Attach C/OH - FR)	
10 PERIOD	Month	Day	Year	Month	Day Year

CANDIDATE / OFFICER / ELECTION REPORT
CANDIDATE / OFFICER / ELECTION REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
Patricia "Pat" Carlson

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS 1 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 1875.00

EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 8201.80

CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 0.00

OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE

Patricia Carlson

len

ection

2

SUBTOTALS - C/O

FORM C/OH COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
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12.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
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	SCHEDULE E: LOANS	\$	0.00
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	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	0.00
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6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		0.00
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7	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	0.00
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0.00

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	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	8201.80
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10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	0.00
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800
3

out-of-state PAC (ID# _____)

out-of-state PAC (ID# _____)

out-of-state PAC (ID# _____)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4

2 FILER NAME

Patricia "Pat" Carlson

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

7 Amount of contribution (\$)

Melba McDow

4-15-23

200.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

Total: none Schedule A1

out-of-state PAC (ID#:)

out-of-state PAC (ID#:)

2 FILER NAME

Patricia "Pat" Carlson

3 Filer ID (Ethics Commission Filers)

4 Date

4-14-23

5 Full name of contributor

Susan Wright

out-of-state PAC (ID#:)

7 Amount of contribution (\$)

100.00

6 Contributor address;

5505 Override Dr., Arlington, TX. 76017

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

4-8-23

Full name of contributor

Lois Kapp

Amount of contribution (\$)

100.00

Contributor address;

4505 Blue Lake Ct., Fort Worth, TX. 76108

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

red

Employer (See Instructions)

OPTIONAL POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the information is not applicable, DO NOT include this page in the report

out-of-state PAC (ID# _____)

1 Total pages Schedule A1

out-of-state PAC

out-of-state PAC

Patricia "Pat" Carlson

4 Date

5 Full name of contributor

7 Amount of contribution (\$)

4-15-23

Ruben Jimenez, Jr,

100.00

Contributor address City State Zip Code

4636 Bonnell Ave., Fort Worth, TX. 76107

8 Principal occupation / Job title (See Instructions)
red

9 Employer (See Instructions)

POLITICAL EXPENDITURES MADE FROM
PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

1 Total pages Schedule G: 1		2 FILER NAME Patricia "Pat" Carlson		3 Filer ID (Ethics Commission Filers)	
4 Date 4-18-23		5 Payee name Neel and Partners			
6 Payee address; 8801 Ice House Dr. #7108, NRH, TX 76181		City; NRH, TX		State; TX	
7 Payee address; 8801 Ice House Dr. #7108, NRH, TX 76181		City; NRH, TX		State; TX	
8 PURPOSE Advertising		(b) Description Voter turnout for election			
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Neel and Partners		Office sought Office held	

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