

CA D D E / OFF CE OLDER
CA G F A CE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers) 2 Total pages filed: 12

RECEIVED

JUL 15 2019

Board of Education

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

OFFICE USE ONLY

Mr

Quinton

Q

Date Received

NICKNAME

LAST

SUFFIX

Phillips

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 24615

Fort Worth, TX 76124

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

938-5282

Date Hand-delivered or Date Postmarked

7-15-19

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Receipt #

Amount \$

Mr

Dante

J

Date Processed

7-15-19

NICKNAME

LAST

SUFFIX

Date Imaged

Williams

7 CAMPAIGN
TREASURER

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

224 Green Heath Ave

Fort Worth, TX 76120

14 C/OH NAME

Quinton 'Q' Phillips

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO

COMMITTEE TYPE COMMITTEE NAME

☒ GENERAL

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

COMMITTEE(S)

KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

1

Good Government Fund

\$ 2,450

1001 Fannin St, Suite 25, Houston, TX 77002

\$ 229.89

☐ Additional Pages

James Reeder

\$ 6,543.27

1001 Fannin St, Suite 25, Houston, TX 77002

17 CONTRIBUTION
TOTALS

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

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS

(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

EXPENDITURE

Faye Daniels

Eric Lee

CA / OFF CE OL E
CA G F A CE EPO T

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Quinton 'Q' Phillips

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM

COMMITTEE TYPE COMMITTEE NAME

☒ GENERAL

PSEL PAC

☐ SPECIFIC

COMMITTEE ADDRESS

201 Main St, Suite 2500, Fort Worth, TX 76102

COMMITTEE CAMPAIGN TREASURER NAME

19 FILER NAME

Quinton 'Q' Phillips

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1 ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,450
2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6,313.38
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form

1 Total pages Schedule A1: 2

2 FILER NAME

Quinton 'Q' Phillips

3 Filer ID (Ethics Commission Filers)

4 Date

4/29/19

City; State; Zip Code

Fort Worth, TX 76116

Full name of contributor

☐ out-of-state PAC (ID#)

Good Government Fund,

4/26/19

(James Reeder - Treasurer.)

Kathy Spores;

City; State; Zip Code

\$250.00

600 Fanning St, Suite 25, Houston, TX 77002

5038 Lovell Ave

8 Principal occupation / Job title (See Instructions)

Volunteer

9 Employer (See Instructions)

Volunteer

Full name of contributor

☐ out-of-state PAC (ID#)

Date

4/26/19

PSEL PAC

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

\$750.00

201 Main St, Suite 2500, Fort Worth, TX 76102

\$750.00

Principal occupation / Job title (See Instructions)

N/A

Employer (See Instructions)

N/A

☐ out-of-state PAC (ID#)

Jud

\$ 700.00

Principal occupation / Job title (See Instructions)

N/A

Employer (See Instructions)

N/A

Date

Full name of contributor

u Needham

Amount of contribution (\$)

OE RY POL T CAL CO TR BUT O S

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2

2 FILER NAME

Quinton 'Q' Phillips

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

6 Contributor address;

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

Amount of contribution (\$)

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form

3 Filer ID (Ethics Commission Filers)

6 Amount (\$) / Payee address; City; State; Zip Code

470.50

PURPOSE
OF
EXPENDITURE

9 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

State

PURPOSE
OF
EXPENDITURE

Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Endorsing Expense
Transportation/Equipment-Related Expense
Travel In District
Travel Out of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1 2. FILER NAME 3. Filer ID (Ethics Commission Filers)

3 Quinton O Phillips

4. Date 5. Payee name

SPECS

6. Amount (\$) 7. Payee address; City; State; Zip Code

\$189.71

8
PURPOSE OF EXPENDITURE
Accounting/Bookkeeping Fees Office Overhead/Rental Expense

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

Date Payee name

Amount (\$)

Description

PURPOSE OF EXPENDITURE

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

Date Payee name

Description

PURPOSE OF EXPENDITURE

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gifts/Awards/Memorabilia Expense		

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers)

4 Date

5 Amount (\$)

8 (b) Description
PURPOSE OF EXPENDITURE

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

Date Payee name

Amount (\$) Candidate/Officeholder/Political Committee Credit Card Payment Payee address; Legal Services City; State; Zip Code Salaries/Wages/Contract Labor Other (enter a category not listed above)

PURPOSE OF EXPENDITURE

7 Payee address; City; State; Zip Code

1497.92 1130 Ave H East, Arlington, TX 76011 Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

ESG O O F AL E O T

FORM C/O - F

The Instruction Guide explains how to complete this form.

1 C/OH NAME

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designat-