

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: **S**

3 CANDIDATE /
OFFICEHOLDER
NAME

FIRST

MI

OFFICE USE ONLY

SUFFIX

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

STATE; ZIP CODE

☐ Change of Address

6144 Plum ce
Fort Worth, TX 76116

(817) 480-9555

FIRST

Robert

D

NICKNAME

Dan S le, Jr.

STREET ADDRESS (NO PO

201 Main
Fort Worth, Tx 76102

PHONE NUMBER

OFFICEHOLDER
PHONE

(17) 332-2500

6 CAMPAIGN
TREASURER
NAME

MS / MRS /

MI

Receipt #

Amount \$

Date Processed

SUFFIX

Date Imaged

02 / 0 STATE / ZIP CODE

TREASURER
ADDRESS

(Residence or Business)

8 CAMPAIGN

AREA CODE

EXTENSION

PHONE

9 REPORT TYPE

☐ January 15

30th day before election

Runoff

15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded Modified

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

THROUGH

ELECTION DATE

ELECTION TYPE

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

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Michael R. Pollock Jr.

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)

\$

4 TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE

EXPENDITURE

\$ 6,029.98

\$

0

0

0

4. TOTAL POLITICAL EXPENDITURES

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

OUTSTANDING
LOAN TOTALS

6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

18 SIGNATURE

I swear, or affirm, under penalty of perjury, that the
report is true and correct and includes all information

required to be reported by me under Title 15, Election

B. R. Pollock Jr.

by

which,

Se

Please complete either option below:

SUBTOTALS - C/OH

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	☐	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2	☐	SCHEDULE A2: SCHEDULE A1 MINUS POLITICAL CONTRIBUTIONS	\$	
3		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4		SCHEDULE C: SCHEDULE B MINUS PLEDGED CONTRIBUTIONS	\$	
5		SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	6029.98
6		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	0
8		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0
9		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	0
10		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	0
11		SCHEDULE I: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	0
12		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

1 2 FILER NAME

name

Norman R. Robbins, Jr.

9.98

Worth

76164

Contribution

Campaign support

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking

Fees

Office Overhead/Rental Expense

Transportation Equipment & Related Expense

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/O - FR

The Instruction Guide explains how to complete this form.

**** Complete only if "Report Type" on page 1 is marked "Final Report" ****

1 C/O NAME

2 Filer ID (Ethics Commission Filers)

Norman B. Robbins, Jr

3 SIGNATURE

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

campaign contributions or make any campaign expenditures without a campaign

4 FILER WHO IS NOT AN OFFICEHOLDER

**** Complete A & B below only if you are not an officeholder. ****