# PERSONAL FINANCIAL STATEMENT

**FORM PFS**
**COVER SHEET**
**PAGE 1**

Filed in accordance with chapter 572 of the Government Code.
For filings required in 2016, covering calendar year ending December 31, 2015.
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

PAGE # 27

ACCOUNT # 00067748

**OFFICE USE ONLY**

Date Received
ELECTRONICALLY FILED
02/11/2016

Receipt #

HD / PM | Amount

Date Processed

Date Imaged

**1** NAME

TITLE; FIRST; MI
The Honorable James B.

NICKNAME; LAST; SUFFIX
Frank

**2** ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP
1638 Hursh Avenue

Wichita Falls, TX 76302

[X] (CHECK IF FILER'S HOME ADDRESS)

**3** TELEPHONE NUMBER

AREA CODE PHONE NUMBER; EXTENSION
(940) 636-7963

**4** REASON FOR FILING STATEMENT

- [X] CANDIDATE State Representative (INDICATE OFFICE)
- [ ] ELECTED OFFICER _____ (INDICATE OFFICE)
- [ ] APPOINTED OFFICER _____ (INDICATE AGENCY)
- [ ] EXECUTIVE HEAD _____ (INDICATE AGENCY)
- [ ] FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT
- [ ] STATE PARTY CHAIR _____ (INDICATE PARTY)
- [ ] OTHER _____ (INDICATE POSITION)

**5** Family members whose financial activity you are reporting (see instructions).

SPOUSE Mrs. Alisha Frank

DEPENDENT CHILD
1. Jerod Frank
2. Jonathan Frank
3. Hixon Frank

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

# SOURCES OF OCCUPATIONAL INCOME

**PART 1A**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** INFORMATION RELATES TO

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____

**2** EMPLOYMENT

[X] EMPLOYED BY ANOTHER

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

[ ] (Check if Filer's Home Address)

EMPLOYER

Sharp Iron Group

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1206 Hatton Road

Wichita Falls, TX 76302

POSITION HELD

CEO

NATURE OF OCCUPATION

[ ] SELF-EMPLOYED

INFORMATION RELATES TO

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD ____

EMPLOYMENT

[X] EMPLOYED BY ANOTHER

NAME AND ADDRESS OF EMPLOYER / POSITION HELD

[ ] (Check if Filer's Home Address)

EMPLOYER

State of Texas - House of Representatives

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

105 West 15th Street

Austin, TX 78701

POSITION HELD

State Representative

NATURE OF OCCUPATION

[ ] SELF-EMPLOYED

# STOCK

**PART 2**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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| | | |
|---|---|---|
| **1** | BUSINESS ENTITY | NAME<br>Fidelity Bank |
| **2** | STOCK HELD OR ACQUIRED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| **3** | NUMBER OF SHARES | [ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [X] 1,000 TO 4,999<br>[ ] LESS THAN 10K [ ] 10,000 OR MORE |
| **4** | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

# BONDS, NOTES & OTHER COMMERCIAL PAPER

**PART 3**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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| | | |
|---|---|---|
| **1** | DESCRIPTION OF INSTRUMENT | Note of sale of Sharp Iron Group interest - M. Stanford |
| **2** | HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____ |
| **3** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME: Capital Income Builder - 529A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: The Income Fund of America - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: The Investment Company of America - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: New Perspective Fund - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME<br>World Fund - 529A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>SMALLCAP World Fund - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>Capital Income Builder - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>The Income Fund of America - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE.

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME: The investment Company of America - 529A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: New Perspectives Fund - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

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|---|---|
| MUTUAL FUND | NAME: New World Fund - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: SMALLCAP World Fund -529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME: Capital Income Builder - 529A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: The Income Fund of America - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: The Investment Company of America - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME: New Perspective Fund - 529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☐ LESS THAN 100 ☒ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME<br>New World Fund - 529A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>SMALLCAP World Fund -529A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>The Growth Fund of America - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 3 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>The Growth Fund of America - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☐ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE.

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME<br>New World Fund - A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>New World Fund - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>New World Fund - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>SMALLCAP World Fund - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 2 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

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| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME<br>The Growth Fund of America - A |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| **4** | IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>SMALLCAP World Fund - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☒ DEPENDENT CHILD 1 |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>The Growth Fund of America - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

| | |
|---|---|
| MUTUAL FUND | NAME<br>SMALLCAP World Fund - A |
| SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | ☐ FILER ☒ SPOUSE ☐ DEPENDENT CHILD |
| NUMBER OF SHARES OF MUTUAL FUND | ☒ LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999<br>☐ 5,000 to 9,999 ☐ 10,000 OR MORE |
| IF SOLD ☐ NET GAIN ☐ NET LOSS | ☐ LESS THAN $5,000 ☐ $5,000 - $9,999 ☐ $10,000 - $24,999 ☐ $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME: American Growth Fund of America F1 |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE |
| **4** | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | | |
|---|---|---|
| | MUTUAL FUND | NAME: Investco American Franchise CL A |
| | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE |
| | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | | |
|---|---|---|
| | MUTUAL FUND | NAME: Investment Co America Class A |
| | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [ ] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [X] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE |
| | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | | |
|---|---|---|
| | MUTUAL FUND | NAME: Sptn 500 Index ADV |
| | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999 [ ] 5,000 to 9,999 [ ] 10,000 OR MORE |
| | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

# MUTUAL FUNDS

**PART 4**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | |
|---|---|---|
| **1** | MUTUAL FUND | NAME<br>Oppenheimer Global Y |
| **2** | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| **3** | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [ ] 100 TO 499 [X] 500 TO 999 [ ] 1,000 TO 4,999<br>[ ] 5,000 to 9,999 [ ] 10,000 OR MORE |
| **4** | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | | |
|---|---|---|
| | MUTUAL FUND | NAME<br>Vang Target Ret 2035 |
| | SHARES OF MUTUAL FUND HELD OR ACQUIRED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| | NUMBER OF SHARES OF MUTUAL FUND | [ ] LESS THAN 100 [ ] 100 TO 499 [ ] 500 TO 999 [ ] 1,000 TO 4,999<br>[X] 5,000 to 9,999 [ ] 10,000 OR MORE |
| | IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

# INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

**PART 5**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List each source of income you, your spouse, or a dependent child received in excess of $500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| **1** SOURCE OF INCOME | NAME AND ADDRESS<br>Texas Transland, LLC<br>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1206 Hatton Road<br>Suite A<br>Wichita Falls, TX 76302 |
| **2** RECEIVED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| **3** AMOUNT | [X] $500 - $4,999 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | |
|---|---|
| SOURCE OF INCOME | NAME AND ADDRESS<br>House Rental<br>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>2105 Hiawatha<br>Wichita Falls, TX 76309 |
| RECEIVED BY | [X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| AMOUNT | [X] $500 - $4,999 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | |
|---|---|
| SOURCE OF INCOME | NAME AND ADDRESS<br>Falls Media, Inc<br>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>4542 Kemp Blvd<br>Suite 1009<br>Wichita Falls, TX 76308 |
| RECEIVED BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| AMOUNT | [X] $500 - $4,999 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

# PERSONAL NOTES AND LEASE AGREEMENTS

**PART 6**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than $1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| **1** PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | First Bank |
| **2** LIABILITY OF | [X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| **3** GUARANTOR | |
| **4** AMOUNT | [ ] $1,000 - $4,999 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [X] $25,000--OR MORE |

| | |
|---|---|
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Parker, Catherine (Ms.) |
| LIABILITY OF | [X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| GUARANTOR | |
| AMOUNT | [ ] $1,000 - $4,999 [ ] $5,000 - $9,999 [X] $10,000 - $24,999 [ ] $25,000--OR MORE |

# INTERESTS IN REAL PROPERTY

**PART 7A**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| **1** HELD OR ACQUIRED BY | [X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| **2** STREET ADDRESS<br>[ ] NOT AVAILABLE<br>[ ] CHECK IF FILER'S HOME ADDRESS | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE<br>2105 Hiawatha<br>Wichita Falls, TX 76309 |
| **3** DESCRIPTION<br>[ ] LOTS<br>[X] ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED<br>0.70080 acres<br>Wichita |
| **4** NAMES OF PERSONS RETAINING AN INTEREST<br>[X] NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| **5** IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

| | |
|---|---|
| HELD OR ACQUIRED BY | [X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____ |
| STREET ADDRESS<br>[ ] NOT AVAILABLE<br>[ ] CHECK IF FILER'S HOME ADDRESS | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE<br>1638 Hursh Avenue<br>Wichita Falls, TX 76302 |
| DESCRIPTION<br>[ ] LOTS<br>[X] ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED<br>1.07000 acres<br>Wichita |
| NAMES OF PERSONS RETAINING AN INTEREST<br>[X] NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| IF SOLD [ ] NET GAIN [ ] NET LOSS | [ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE |

# INTEREST IN BUSINESS ENTITIES

**PART 7B**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale.
For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** HELD OR ACQUIRED BY

[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____

**2** DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Sharp Iron Group, LLC
1206 Hatton Road

Wichita Falls, TX 76302

**3** IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [X] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Texas Transland. LLC
1206 Hatton Road
Suite A
Wichita Falls, TX 76302

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

MA Acquisitions Co, LLC
501 Galveston Street

Wichita Falls, TX 76301

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Falls Media, LLC
4245 Kemp Blvd

Wichita Falls, TX 76308

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

# INTEREST IN BUSINESS ENTITIES

**PART 7B**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale.
For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

**2** DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Vizion Partners E-System
2650 FM 407 #255

Bartonville, TX 76226

**3** IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

WF Amfuel Partners, LLC
2525 Kell Blvd
Suite 510
Wichita Falls, TX 76308

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Take Flight Wichita Falls, LLC
1206 Hatton Road

Wichita Falls, TX 76302

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

---

HELD OR ACQUIRED BY

[X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____

DESCRIPTION

NAME AND ADDRESS

[ ] (Check if Filer's Home Address)

Fidelity Bank
2525 Kell Blvd
Suite 100
Wichita Falls, TX 76308

IF SOLD [ ] NET GAIN [ ] NET LOSS

[ ] LESS THAN $5,000 [ ] $5,000 - $9,999 [ ] $10,000 - $24,999 [ ] $25,000--OR MORE

# ASSETS OF BUSINESS ASSOCIATIONS

**PART 11A**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** BUSINESS ASSOCIATION

NAME AND ADDRESS

☐ (Check If Filer's Home Address)

Sharp Iron Group, LLC
1206 Hatton Road

Wichita Falls, TX 76302

**2** BUSINESS TYPE

LLC

**3** HELD, ACQUIRED, OR SOLD BY

☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____

**4** ASSETS

| DESCRIPTION | CATEGORY | | |
|---|---|---|---|
| Production Equipment | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Office Equipment | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Vehicles | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Real Estate | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Cash | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Accounts Receivable | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Inventory | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |

# ASSETS OF BUSINESS ASSOCIATIONS

**PART 11A**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** BUSINESS ASSOCIATION

NAME AND ADDRESS

☐ (Check If Filer's Home Address)

Texas Transland, LLC
1206 Hatton Road
Suite A
Wichita Falls, TX 76302

**2** BUSINESS TYPE

LLC

**3** HELD, ACQUIRED, OR SOLD BY

☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____

**4** ASSETS

| DESCRIPTION | CATEGORY | | | |
|---|---|---|---|---|
| Production Equipment | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Office Equipment | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Vehicles | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Real Estate | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Cash | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Accounts Receivable | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |
| Inventory | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000 OR MORE |

# ASSETS OF BUSINESS ASSOCIATIONS

**PART 11A**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | |
|---|---|---|
| **1** | BUSINESS ASSOCIATION | NAME AND ADDRESS<br>☐ (Check If Filer's Home Address)<br>Take Flight Wichita Falls, LLC<br>1206 Hatton Road<br>Wichita Falls, TX 76302 |
| **2** | BUSINESS TYPE | LLC |
| **3** | HELD, ACQUIRED, OR SOLD BY | ☒ FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ |
| **4** | ASSETS | DESCRIPTION: King Air C90 Airplane N150VE<br>CATEGORY:<br>☐ LESS THAN $5,000 ☐ $5,000 - $9,999<br>☐ $10,000 - $24,999 ☒ $25,000 OR MORE |

# LIABILITIES OF BUSINESS ASSOCIATIONS

**PART 11B**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** BUSINESS ASSOCIATION

NAME AND ADDRESS

☐ (Check If Filer's Home Address)

Sharp Iron Group, LLC
1206 Hatton Road

Wichita Falls, TX 76302

**2** BUSINESS TYPE

LLC

**3** HELD, ACQUIRED, OR SOLD BY

☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____

**4** LIABILITIES

| DESCRIPTION | CATEGORY | | | |
|---|---|---|---|---|
| Fidelity Bank - Real Estate | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| First Bank - Real Estate | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| First Bank - Horizontal Boring Mills | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| First Bank - Commerical | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| Subordinated Debt - Member Owned | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| Trade Payables | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |

# LIABILITIES OF BUSINESS ASSOCIATIONS

**PART 11B**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

**1** BUSINESS ASSOCIATION

NAME AND ADDRESS

☐ (Check If Filer's Home Address)

Texas Transland
1206 Hatton Road
Suite A
Wichita Falls, TX 76302

**2** BUSINESS TYPE

LLC

**3** HELD, ACQUIRED, OR SOLD BY

☒ FILER ☒ SPOUSE ☐ DEPENDENT CHILD _____

**4** LIABILITIES

| DESCRIPTION | CATEGORY | |
|---|---|---|
| Fidelity Bank - CP Acquisition | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 |
| | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| Fidelity Bank - Wingman Acquisition | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 |
| | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| Subordinated Debt - Member Owned | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 |
| | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |
| Trade Payables | ☐ LESS THAN $5,000 | ☐ $5,000 - $9,999 |
| | ☐ $10,000 - $24,999 | ☒ $25,000--OR MORE |

# BOARDS AND EXECUTIVE POSITIONS

**PART 12**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| **1** ORGANIZATION | M A Acquisitions Co, LLC |
| **2** POSITION HELD | Board Member |
| **3** POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| ORGANIZATION | Texas Transland, LLC |
| POSITION HELD | CEO |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| ORGANIZATION | Sharp Iron Group, LLC |
| POSITION HELD | CEO |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| ORGANIZATION | Wichita Falls Chamber of Commerce |
| POSITION HELD | Ex-Officio Member |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| ORGANIZATION | The Phased In Project |
| POSITION HELD | Board Member |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |
| ORGANIZATION | Texas Home School Coalition |
| POSITION HELD | Board Member |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |

# BOARDS AND EXECUTIVE POSITIONS

**PART 12**

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and DO NOT include this page in the report.**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| **1** ORGANIZATION | Texas Conservative Coalition |
| **2** POSITION HELD | Board Member and Vice President |
| **3** POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |

| | |
|---|---|
| ORGANIZATION | Nortex Regional Planning Commission |
| POSITION HELD | Ex-Officio Member |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |

| | |
|---|---|
| ORGANIZATION | Sheppard Military Affairs Committee |
| POSITION HELD | Ex-Officio Member |
| POSITION HELD BY | [X] FILER [ ] SPOUSE [ ] DEPENDENT CHILD _____ |

# PERSONAL FINANCIAL STATEMENT

## PARTS MARKED "NOT APPLICABLE" BY FILER

**FORM PFS**
**COVER SHEET**
**PAGE 2**

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. ***If you place a check in a box, do NOT include pages for that Part in the report.***

**6** PARTS NOT APPLICABLE TO FILER

- [ ] N/A Part 1A - Sources of Occupational Income
- [X] N/A Part 1B - Retainers
- [ ] N/A Part 2 - Stock
- [ ] N/A Part 3 - Bonds, Notes & Other Commercial Paper
- [ ] N/A Part 4 - Mutual Funds
- [ ] N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- [ ] N/A Part 6 - Personal Notes and Lease Agreements
- [ ] N/A Part 7A - Interests in Real Property
- [ ] N/A Part 7B - Interests in Business Entities
- [X] N/A Part 8 - Gifts
- [X] N/A Part 9 - Trust Income
- [X] N/A Part 10A - Blind Trusts
- [X] N/A Part 10B - Trustee Statement
- [ ] N/A Part 11A - Assets of Business Associations
- [ ] N/A Part 11B - Liabilities of Business Associations
- [ ] N/A Part 12 - Boards and Executive Positions
- [X] N/A Part 13 - Expenses Accepted Under Honorarium Exception
- [X] N/A Part 14 - Interest in Business in Common with Lobbyist
- [X] N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- [X] N/A Part 16 - Representation by Legislator Before State Agency
- [X] N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- [X] N/A Part 18 - Legislative Continuances

# PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2014, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

The Honorable James B. Frank

Signature of Filer

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