FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 378 For filings required in 2021, covering calendar year ending December 31, 2020. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00030098 1 NAME TITLE; FIRST; MI OFFICE USE ONLY The Honorable Christi L. **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 06/30/2021 Craddick 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # HD / PM Amount Date Processed **TELEPHONE** AREA CODE PHONE NUMBER; EXTENSION Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER RAILROAD COMMISSIONER (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 ____ DEPENDENT CHILD 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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 2 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD _____ 3 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER **EMPLOYER** RAILROAD COMMISSION OF TEXAS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1701 N. CONGRESS AUSTIN, TX 78703 POSITION HELD RAILROAD COMMISSIONER 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. 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 FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 2 BUSINESS ENTITY NAME 8x8 IncCommon StockSymbol: Eght 3 STOCK HELD OR X FILER SPOUSE DEPENDENT CHILD _____ **ACQUIRED BY** 4 NUMBER OF SHARES X LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 10K 10,000 OR MORE 5 IF SOLD NET GAIN NET LOSS **BUSINESS ENTITY** NAME 8x8 IncCommon StockSymbol: Eght STOCK HELD OR X FILER SPOUSE DEPENDENT CHILD **ACQUIRED BY** NUMBER OF SHARES X LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 10K 10,000 OR MORE IF SOLD NET GAIN Less than \$8,930 X NET LOSS **BUSINESS ENTITY** NAME Aac Technologies HoldingsInc Unsponsored AdrSymbol: Aacay STOCK HELD OR X FILER SPOUSE DEPENDENT CHILD **ACQUIRED BY** NUMBER OF SHARES LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 10K 10,000 OR MORE IF SOLD NET GAIN NET LOSS

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NET GAIN

X NET LOSS

Less than \$8,930

IF SOLD

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		Craddick, Christi L. (The Honorable)		00030098	
	SINESS ENTITY	NAME Post Holdings IncSymbol: Post			
3 STOCK HELD OR ACQUIRED BY		X FILER	SPOUSE	DEPENDENT CHILE)
4 NUM	MBER OF SHARES	X LESS THAN 100 LESS THAN 10K	100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
5 IF S	OLD X NET GAIN NET LOSS	Less than \$8,930			
BUS	SINESS ENTITY	NAME Power Integrations IncSymbol: Powi			
	OCK HELD OR OUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE)
NUM	IBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF S	OLD X NET GAIN NET LOSS	Less than \$8,930			
BUSINESS ENTITY		NAME Primerica IncSymbol: Pri			
STOCK HELD OR ACQUIRED BY		X FILER	SPOUSE	DEPENDENT CHILE)
NUM	IBER OF SHARES	X LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
IF S	OLD X NET GAIN NET LOSS	Less than \$8,930			

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PART 3

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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.

1	FILER INFORMATION	FILER NAME		FILER ID
		Craddick, Christi L. (The	e Honorable)	00030098
2	DESCRIPTION OF INSTRUMENT	Arizona St Transn Bro 10/06/2016 Fc	l Hwy RevStreets/Highw	aysRev 2016Cpn 5.000% Due 07/01/2029Dtd
3	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Asset-Backed Securit Obligations	ies (ABS), Mortgage Ba	cked Securities (MBS), Collaerized Mortgage
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Atlanta Ga Arpt Rev 0 01/01/2	Gen RefAirportsRev 201	9 ECpn 5.000% Due 07/01/2029Dtd 10/29/2019 Fc
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Broward Cnty Fla Wtr Fc 10/01/	& SwrWater And Sewe	rRev BCpn 5.000% Due 10/01/2023Dtd 07/21/2015
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Citizens Ppty Ins Corp Amortized:101	FlaSenior Secured Bds	s A-1Wr/NrOriginal Cost:5,101.30Premium
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD X NET GAIN ☐ NET LOSS	Less than \$8,930		

PART 3

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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.

1 FILER INFORMATION	FILER NAME		FILER ID
	Craddick, Christi L. (The	e Honorable)	00030098
2 DESCRIPTION OF INSTRUMENT	Clark Cnty Nev Arpt F 07/01/2	Rev SubAirportsRev 201	19 DCpn 5.000% Due 07/01/2030Dtd 11/27/2019 Fc
3 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4 IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Colorado St Ctfs Part 03/22/	n NatlPublic Higher Edu	ucationRev 2018 ACpn 5.000% Due 09/01/2027Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Colorado St Ctfs Part 06/02/2020	n RuralMass/Rapid Tra	nsitRev 2020 ACpn 5.000% Due 12/15/2029Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Denver Colo City & C 12/03/2020 Fc 0	nty GoGeneral Purpose	eG/O 2020 ACpn 5.000% Due 08/01/2033Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Dodge & Cox Income	FundSymbol: Dodix	
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			

PART 3

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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	FILER INFORMATION	FILER NAME		FILER ID
		Craddick, Christi L. (Th	ne Honorable)	00030098
2	DESCRIPTION OF INSTRUMENT	Dodge & Cox Income	e FundSymbol: Dodix	
3	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4	IF SOLD X NET GAIN NET LOSS	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	Florida St Governme 10/31/2019 Fc 0	ntal UtilWater And Sev	verRev 2019Cpn 5.000% Due 10/01/2028Dtd
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	GINNIE MAE POOL	#414856 GNMA I 30 Y	R SINGLE FAMILY 6.50000% DUE 12/15/2025
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	GINNIE MAE POOL	#414856 GNMA I 30 Y	R SINGLE FAMILY
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD X NET GAIN NET LOSS	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	lowa St Spl Oblig Re 09/24/2020 Fc	f IjobsGeneral Purpose	eRev 2020 ACpn 5.000% Due 06/01/2033Dtd
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			

PART 3

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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.

1 FILER INFORMATION	FILER NAME		FILER ID
	Craddick, Christi L. (The	e Honorable)	00030098
2 DESCRIPTION OF INSTRUMENT	Lake Cnty III Go Ref E 09/05/2019 Fc	3ds 2019General Purpo	oseG/O 2019Cpn 4.000% Due 11/30/2026Dtd
3 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4 IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Louisiana Pub Facs A Fc 06/15	uth RevTulane UnivRe	v 2017aCpn 5.000% Due 12/15/2026Dtd 11/29/2017
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Maricopa Cnty Ariz Ur 01/01/2	ni SchProj 2019G/O 202	20 ACpn 5.000% Due 07/01/2029Dtd 06/09/2020 Fc
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Minnesota St Go Var 08/25/2020 Fc	Purp BdsGeneral Purpo	oseG/O 2020 ACpn 5.000% Due 08/01/2021Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Mississippi St Gaming 04/15/	J Tax RevBridgesRev 2	015 ECpn 5.000% Due 10/15/2025Dtd 10/22/2015 Fc
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			

PART 3

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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.

1	FILER INFORMATION	FILER NAME		FILER ID
		Craddick, Christi L. (Th	ne Honorable)	00030098
2	DESCRIPTION OF INSTRUMENT	Missouri St Pub Utils Amorti	s CommnRe Interim Co	nstr Nts 2019Wr/N/AOriginal Cost:10,011.80Premium
3	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4	IF SOLD	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	Nebraska Pub Pwr D Amortiz	Dist Rev GenElectricity	And Public PowerA1/A+Original Cost:6,029Premium
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD	Less than \$8,930		
	DESCRIPTION OF	Nuveen Invt Eds Inc	Small Cap Value Fd Cl	ISymbol: Escey
	INSTRUMENT	Nuveen iiver us iiie.	oman cap value i u ci	Toythbul. 1 300x
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN X NET LOSS	Less than \$8,930		
	DESCRIPTION OF	Nuveen Invt Tr VNuv	/een Pfd Secs & Incm F	Ed CLISymbol: Ninsry
	INSTRUMENT	THE TOTAL THE TANK TH		a or loyingon riporx
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	Nuveen Invt Tr VNuv	veen Pfd Secs & Incm F	Fd Cl ISymbol: Npsrx
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			

PART 3

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1 FILER INFORMATION	FILER NAME		FILER ID
	Craddick, Christi L. (Th	ne Honorable)	00030098
2 DESCRIPTION OF INSTRUMENT	Ohio St Cap Facs Le 11/05/	easeJuvenile Correction	onal Bldg FdRev 2019aCpn 5.000% Due 04/01/2029Dtd
3 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4 IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Oregon St Dept Trar 01/27/2015 Fc 05	nsn HwyStreets/Highw	aysRev 2015aCpn 5.000% Due 11/15/2030Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Port Seattle Wash P Amortized:199	assengerFa Ref Rev	Bds 2010-AWr/NrOriginal Cost:5,199.95Premium
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD X NET GAIN ☐ NET LOSS	Less than \$8,930		
DESCRIPTION OF INSTRUMENT	Rhode Is Health & E 05/15/2023Dtd 0	dl BldgProvidence Pu	blic Buildings AuRev 2015aCpn 4.000% Due
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Salem Ore Hosp Fac Amortized:130.28	c Auth RevSalem Hea	lthN/A/A+Original Cost:6,377.15Premium
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD X NET GAIN NET LOSS	Less than \$8,930		

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.

1 FILER INFORMATION	FILER NAME		FILER ID
	Craddick, Christi L. (Th	ne Honorable)	00030098
2 DESCRIPTION OF INSTRUMENT	Southcentral Pa Gen 06/01/2026Dtd	Auth RevWellspan He	ealth Obligated GrouRev 2019aCpn 5.000% Due
3 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4 IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Southwestern III Dev 02/04/2	Auth RevSouthwester	n III FloodRev 2020Cpn 5.000% Due 04/15/2029Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF	Tallahassee Fla Con	s Util SysCombined Ut	ilitiesRev 2018Cpn 5.000% Due 10/01/2031Dtd
INSTRUMENT	06/12/2018		
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Texas St Tax & Rev 2 09/02/2020 Fc 0	Antic NtsGeneral Purp	oseRev 2020Cpn 4.000% Due 08/26/2021Dtd
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS			
DESCRIPTION OF INSTRUMENT	Thornburg Strategic	IncomeFd Cl I ShsSyn	nbol: Tsiix
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD X NET GAIN ☐ NET LOSS	Less than \$8,930		

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.

1	FILER INFORMATION	FILER NAME		FILER ID	
		Craddick, Christi L.	(The Honorable)	00030098	
2	DESCRIPTION OF INSTRUMENT	Thornburg Strateg	jic IncomeFd CI I ShsSy	mbol: Tsiix	
3	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
4	IF SOLD NET C				
	DESCRIPTION OF INSTRUMENT	Transamerica Em	erging MarketDebt CI IS	ymbol: Emtix	
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	IF SOLD NET C	I I acc than \$2 030			
	DESCRIPTION OF INSTRUMENT	Transamerica Em	erging MarketDebt CI IS	ymbol: Emtix	
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	IF SOLD NET C				
	DESCRIPTION OF INSTRUMENT	University Ark Uni Am	v Rev RefUniversity Of	Arkansas FayetteAa2/N/AOriginal Cost:6,1	10.10Premium
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	IF SOLD X NET C	I Less than \$8 930			
	DESCRIPTION OF INSTRUMENT	US TREASURY N	IOTES 2.375% 4/15/202	21	
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	IF SOLD X NET C	1 1 acc than %X (3(1)			

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.

1	FILER INFORMATION	FILER NAME		FILER ID
		Craddick, Christi L. (The	e Honorable)	00030098
2	DESCRIPTION OF INSTRUMENT	US TREASURY NOT	ES 2% 11/15/2026	
3	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
4	IF SOLD	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	US TREASURY NOT	ES INFLATION PROTE	ECTED OID 0.125%
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD X NET GAIN NET LOSS	Less than \$8,930		
	DESCRIPTION OF INSTRUMENT	Virginia Beach Va De 06/17/2020 Fc 0	v AuthGeneral Purpose	eRev 2020 BCpn 5.000% Due 08/01/2021Dtd
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Washington D C Met 08/17/2017	Area TranMass/Rapid	TransitRev 2017bCpn 5.000% Due 07/01/2033Dtd
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			
	DESCRIPTION OF INSTRUMENT	Washington D C Met 07/12/2017 Fc	Area TranMass/Rapid	TransitRev A-1Cpn 5.000% Due 07/01/2028Dtd
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
	IF SOLD NET GAIN NET LOSS			

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. 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 FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 2 DESCRIPTION OF Woodbridge Twp N JGoN/A/NrCusip: 978862y87 **INSTRUMENT** HELD OR X FILER SPOUSE DEPENDENT CHILD **ACQUIRED BY** 4 IF SOLD NET GAIN Less than \$8,930 X NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME ALGER SMALL CAP FOCUS FUND CLASS Z N/L (AGOZX) SHARES OF MUTUAL FUND X FILER DEPENDENT CHILD HELD OR ACQUIRED BY SPOUSE NUMBER OF SHARES OF X 1,000 TO 4,999 LESS THAN 100 100 TO 499 500 TO 999 **MUTUAL FUND** 5,000 to 9,999 10,000 OR MORE 5 IF SOLD X NET GAIN Less than \$8,930 NET LOSS MUTUAL FUND NAME ALGER SMALL CAP FOCUS FUND CLASS Z N/L (AGOZX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF 500 TO 999 1,000 TO 4,999 LESS THAN 100 X 100 TO 499 MUTUAL FUND 10,000 OR MORE 5,000 to 9,999 IF SOLD X NET GAIN Less than \$8,930 NET LOSS MUTUAL FUND NAME AMERICAN CENTURY SMALL CAP VALUE FUND CLASS I N/L (ACVIX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ___ NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** 5,000 to 9,999 X 10,000 OR MORE IF SOLD NET GAIN NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME AMERICAN CENTURY SMALL CAP VALUE FUND CLASS I N/L (ACVIX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF 100 TO 499 X 500 TO 999 1,000 TO 4,999 LESS THAN 100 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD X NET GAIN Less than \$8,930 NET LOSS MUTUAL FUND AMERICAN CENTURY SMALL CAP VALUE FUND CLASS I N/L (ACVIX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF X 1,000 TO 4,999 500 TO 999 LESS THAN 100 100 TO 499 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS MUTUAL FUND NAME COHEN & STEERS MLP AND ENERGY OPPORTUNITY FUND CLASS I N/L (MLOIX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ____ NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** X 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN At least \$8,930 but less than \$17,860 X NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME COHEN & STEERS MLP AND ENERGY OPPORTUNITY FUND CLASS I N/L SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF ☐ 500 TO 999 LESS THAN 100 100 TO 499 1,000 TO 4,999 MUTUAL FUND X 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND COHEN & STEERS MLP AND ENERGY OPPORTUNITY FUND CLASS I N/L (MLOIX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF X 1,000 TO 4,999 100 TO 499 500 TO 999 LESS THAN 100 MUTUAL FUND 10,000 OR MORE 5,000 to 9,999 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND NAME GUGGENHEIM MACRO OPPORTUNITIES FUND INSTL CLASS N/L (GIOIX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD _____ NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 MUTUAL FUND X 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN Less than \$8.930 X NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME GUGGENHEIM MACRO OPPORTUNITIES FUND INSTL CLASS N/L (GIOIX) SHARES OF MUTUAL FUND X FILER HELD OR ACQUIRED BY SPOUSE DEPENDENT CHILD NUMBER OF SHARES OF 100 TO 499 X 500 TO 999 1,000 TO 4,999 LESS THAN 100 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND GUGGENHEIM TOTAL RETURN BOND FUND INSTL CLASS N/L (GIBIX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF 500 TO 999 1,000 TO 4,999 LESS THAN 100 100 TO 499 MUTUAL FUND X 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS MUTUAL FUND NAME GUGGENHEIM TOTAL RETURN BOND FUND INSTL CLASS N/L (GIBIX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ___ NUMBER OF SHARES OF LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME GUGGENHEIM TOTAL RETURN BOND FUND INSTL CLASS N/L (GIBIX) SHARES OF MUTUAL FUND DEPENDENT CHILD ___ X FILER HELD OR ACQUIRED BY SPOUSE NUMBER OF SHARES OF ☐ 500 TO 999 X LESS THAN 100 100 TO 499 1,000 TO 4,999 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD X NET GAIN Less than \$8,930 NET LOSS MUTUAL FUND NAME Investment Company of America Class A - American Funds M/F SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD _____ HELD OR ACQUIRED BY NUMBER OF SHARES OF 500 TO 999 1,000 TO 4,999 LESS THAN 100 100 TO 499 MUTUAL FUND X 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS MUTUAL FUND NAME LORD ABBETT SHORT DURATION INCOME FUND CLASS I N/L (LLDYX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ____ NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** 5,000 to 9,999 X 10,000 OR MORE IF SOLD X NET GAIN Less than \$8.930 NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME LORD ABBETT SHORT DURATION INCOME FUND CLASS I N/L (LLDYX) SHARES OF MUTUAL FUND X FILER DEPENDENT CHILD HELD OR ACQUIRED BY SPOUSE NUMBER OF SHARES OF 500 TO 999 X 1,000 TO 4,999 LESS THAN 100 100 TO 499 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND PIMCO SHORT ASSET INVESTMENT FUND CLASS I2 N/L (PAIPX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF 100 TO 499 X 500 TO 999 1,000 TO 4,999 LESS THAN 100 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS MUTUAL FUND NAME PIMCO SHORT ASSET INVESTMENT FUND CLASS I2 N/L (PAIPX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 MUTUAL FUND X 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME PIMCO SHORT ASSET INVESTMENT FUND CLASS I2 N/L (PAIPX) SHARES OF MUTUAL FUND X FILER SPOUSE HELD OR ACQUIRED BY DEPENDENT CHILD NUMBER OF SHARES OF ☐ 500 TO 999 X LESS THAN 100 100 TO 499 1,000 TO 4,999 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND NAME VANGUARD FTSE PACIFIC ETF SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF 500 TO 999 1,000 TO 4,999 LESS THAN 100 X 100 TO 499 MUTUAL FUND 10,000 OR MORE 5,000 to 9,999 IF SOLD NET GAIN Less than \$8,930 X NET LOSS MUTUAL FUND NAME VANGUARD SHORT TERM INVESTMENT GRADE FD ADMIRAL SHARES N/L SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD _____ NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 MUTUAL FUND 5,000 to 9,999 X 10,000 OR MORE IF SOLD NET GAIN NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME VANGUARD SHORT TERM INVESTMENT GRADE FD ADMIRAL SHARES N/L SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF ☐ 500 TO 999 100 TO 499 X 1,000 TO 4,999 LESS THAN 100 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN NET LOSS MUTUAL FUND VANGUARD SHORT TERM INVESTMENT GRADE FD ADMIRAL SHARES N/L SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF ☐ 500 TO 999 ☐ 1,000 TO 4,999 100 TO 499 X LESS THAN 100 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE IF SOLD X NET GAIN Less than \$8,930 NET LOSS MUTUAL FUND NAME WASATCH ULTRA GROWTH FUND INVESTOR CLASS N/L (WAMCX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER 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 X NET GAIN Less than \$8.930 NET LOSS

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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 MUTUAL FUND NAME WASATCH ULTRA GROWTH FUND INVESTOR CLASS N/L (WAMCX) SHARES OF MUTUAL FUND X FILER DEPENDENT CHILD HELD OR ACQUIRED BY SPOUSE NUMBER OF SHARES OF X 100 TO 499 LESS THAN 100 500 TO 999 1,000 TO 4,999 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE 5 IF SOLD NET GAIN NET LOSS MUTUAL FUND WASATCH ULTRA GROWTH FUND INVESTOR CLASS N/L (WAMCX) SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD HELD OR ACQUIRED BY NUMBER OF SHARES OF X 1,000 TO 4,999 500 TO 999 LESS THAN 100 100 TO 499 MUTUAL FUND 5,000 to 9,999 10,000 OR MORE IF SOLD NET GAIN NET LOSS MUTUAL FUND NAME WASATCH ULTRA GROWTH FUND INVESTOR CLASS N/L (WAMCX) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ___ NUMBER OF SHARES OF X LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** 5,000 to 9,999 10,000 OR MORE IF SOLD X NET GAIN Less than \$8.930 NET LOSS

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 \$900 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.

1	FILER INFORMATION	FILER NAME FILER ID
		Craddick, Christi L. (The Honorable) 00030098
2	SOURCE OF INCOME Publicly held corporation	NAME AND ADDRESS RAYMOND JAMES & ASSOCIATES, INC. ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 880 CARILLON PARKWAY SAINT PETERSBURG, FL 33716
3	RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
4	AMOUNT	At least \$44,630 or more
F	SOURCE OF INCOME	NAME AND ADDRESS
	Publicly held corporation	RBC CAPITAL MARKETS LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 1510
		MINNEAPOLIS, MN 55440
	RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
\vdash	AMOUNT	
	7.IWCGIVI	At least \$44,630 or more
	SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS CHESAPEAKE OPERATING, LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	SOURCE OF INCOME	NAME AND ADDRESS CHESAPEAKE OPERATING, LLC
	SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRESS CHESAPEAKE OPERATING, LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of \$900 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.

i	over Sheet.	
1 FILER INFORMATION	FILER NAME	FILER ID
	Craddick, Christi L. (The Honorable)	00030098
2 SOURCE OF INCOME Publicly held corporation	NAME AND ADDRE Colgate Operating, LLC	
3 RECEIVED BY	X FILER SPOUSE DEF	PENDENT CHILD
4 AMOUNT	At least \$44,630 or more	
SOURCE OF INCOME	NAME AND ADDRE	=99
Publicly held corporation	FLAT CREEK RESOURCES LLC ADDRESS / PO BOX; APT / SUITE #; CIT 777 MAIN ST STE 3600 FORT WORTH, TX 76102	
RECEIVED BY	X FILER SPOUSE DEF	PENDENT CHILD
AMOUNT	Less than \$8,930	
SOURCE OF INCOME	NAME AND ADDRE	ESS
SOURCE OF INCOME X Publicly held corporation	NAME AND ADDRE KINDER MORGAN PRODUCTION CO. LLC ADDRESS / PO BOX; APT / SUITE #; CIT	
<u> </u>	KINDER MORGAN PRODUCTION CO. LLC ADDRESS / PO BOX; APT / SUITE #; CIT	
X Publicly held corporation	KINDER MORGAN PRODUCTION CO. LLC ADDRESS / PO BOX; APT / SUITE #; CIT	TY; STATE; ZIP CODE

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

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List each source of income you, your spouse, or a dependent child received in excess of \$900 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.

Which the child is listed on the	Cover office.
1 FILER INFORMATION	FILER NAME FILER ID
	Craddick, Christi L. (The Honorable) 00030098
SOURCE OF INCOME Publicly held corporation	NAME AND ADDRESS QUARRY LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3 RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
4 AMOUNT	At least \$44,630 or more
SOURCE OF INCOME Publicly held corporation	NAME AND ADDRESS CRADDICK PARTNERS LTD ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TWO LAKES DRIVE MIDLAND, TX 79705
RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
AMOUNT	At least \$44,630 or more
SOURCE OF INCOME Publicly held corporation	NAME AND ADDRESS C L CRADDICK LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	X FILER SPOUSE DEPENDENT CHILD
AMOUNT	At least \$44,630 or more

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.

ELD OR ACQUIRED BY	Craddick, Christi I			
ELD OR ACQUIRED BY		(The Honorable)	00030098	
	X FILER	SPOUSE	DEPENDENT CHILD	_
FREET ADDRESS		STREET ADDRESS, INC	CLUDING CITY, COUNTY, AND STATE	
NOT AVAILABLE				
		ı		
SCRIPTION	NU	MBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
LOTS ACRES	Travis			
THORES				
AMES OF PERSONS ETAINING AN INTEREST				
NOT APPLICABLE (SEVERED MINERAL INTEREST)				
SOLD NET GAIN				
☐ NET LOSS				

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.

1 FILER INFORMATION	FILER NAME		FILER ID	
ILLICITY ORIVIATION	Craddick, Christi L	(The Honorable)	00030098	
2 HELD OR ACQUIRED BY				
	X FILER	SPOUSE	DEPENDENT CHILD	
3 STREET ADDRESS		STREET ADDRESS, INC	LUDING CITY, COUNTY, AND STATE	
X NOT AVAILABLE				
4 DESCRIPTION		MBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
X LOTS	1.00000 lots			
ACRES	MIDLAND			
5 NAMES OF PERSONS				
RETAINING AN INTEREST				
X NOT APPLICABLE (SEVERED MINERAL				
INTEREST)				
6 IF SOLD NET GAIN				
☐ NET LOSS				

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.

	which the child is listed on the C	over Sheet.	,,	,	
1	FILER INFORMATION	FILER NAME		FILER ID	
		Craddick, Christi L. (The Honorable)	00030098	
2	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
3	STREET ADDRESS		STREET ADDRESS, INCLU	JDING CITY, COUNTY, AND STATE	
	X NOT AVAILABLE				
	DESCRIPTION	NUM		NID NAME OF COUNTY WILEDE LOCATED	
4	DESCRIPTION	1.00000 lots	BER OF LOTS OR ACRES A	ND NAME OF COUNTY WHERE LOCATED	
	X LOTS ACRES	WEBB COUNTY			
	ACRES	WEBB COONT			
5	NAMES OF PERSONS RETAINING AN INTEREST				
	X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
6	IF SOLD NET GAIN				
	☐ NET LOSS				

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.

X FILER SPOUSE DEPENDENT CHILD	
2 HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD 3 STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE X NOT AVAILABLE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
3 STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE NOT AVAILABLE 4 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
4 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 later	
4 DESCRIPTION NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
4.00000	
4.00000	
_V ₁ 0TC	
L ACRES DIVIVITI	
5 NAMES OF PERSONS RETAINING AN INTEREST	
X NOT APPLICABLE (SEVERED MINERAL INTEREST)	
6 IF SOLD NET GAIN	
NET LOSS NET LOSS	

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.

	which the child is listed on the C	over Sheet.			
1	FILER INFORMATION	FILER NAME		FILER ID	
		Craddick, Christi L	(The Honorable)	00030098	
2	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	-
3	STREET ADDRESS			LUDING CITY, COUNTY, AND STATE	
	NOT AVAILABLE	3904 PACK SAI	DDLE DRIVE		
		HORSESHOE B	3AY , TX 78657		
Ļ	DESCRIPTION	,	MADED OF LOTE OD ACDES	AND NAME OF COUNTY WIFEE LOCATED	
*		1.00000 lots	MBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
	X LOTS ACRES	LLANO			
5	NAMES OF PERSONS RETAINING AN INTEREST				
	X NOT APPLICABLE (SEVERED MINERAL				
	INTEREST)				
6	IF SOLD NET GAIN				
L	☐ NET LOSS				
Г					

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.

FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L.	. (The Honorable)	00030098	
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
STREET ADDRESS		STREET ADDRESS, INC	LUDING CITY, COUNTY, AND STATE	
× NOT AVAILABLE				
DESCRIPTION		MBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
X LOTS	1.00000 lots			
ACRES	SCURRY COUN	ITY		
NAMES OF PERSONS RETAINING AN INTEREST				
× NOT APPLICABLE (SEVERED MINERAL INTEREST)				
IF SOLD NET GAIN NET LOSS				
☐ INET LOSS				_

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 0	Cover Sheet.	,,		
1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L	(The Honorable)	00030098	
2 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	-
3 STREET ADDRESS		STREET ADDRESS, INC	LUDING CITY, COUNTY, AND STATE	
X NOT AVAILABLE				
A DESCRIPTION	Nu.	MARES OF LOTE OF ACRES	AND NAME OF COUNTY AND SPECIAL COATED	
4 DESCRIPTION	1.00000 lots	MBER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
X LOTS	ANDREWS CO	LINITY		
ACRES	ANDREWSCO	ONT		
5 NAMES OF PERSONS RETAINING AN INTEREST				
X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
6 IF SOLD NET GAIN				
☐ NET LOSS				

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.

in congriging information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

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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.

which the child is listed on the	Cover Sheet.			
1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L. (The Honorable)	00030098	
2 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	_
3 STREET ADDRESS		STREET ADDRESS, INC	CLUDING CITY, COUNTY, AND STATE	
NOT AVAILABLE	2805 Scenic Drive			
	Austin, TX 78703			
	,			
4 DESCRIPTION	NUMB	ER OF LOTS OR ACRES	AND NAME OF COUNTY WHERE LOCATED	
X LOTS	lots			
ACRES	Travis			
5 NAMES OF PERSONS RETAINING AN INTEREST				
X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
6 IF SOLD NET GAIN				
☐ NET LOSS				

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.

	which the child is listed on the C	over Sheet.				
1	FILER INFORMATION	FILER NAME			FILER ID	
		Craddick, Christi L. (The	e Honorable)		00030098	
2	HELD OR ACQUIRED BY	X FILER	SPOUSE		DEPENDENT CHILD	
3	DESCRIPTION		!	NAME ANI	D ADDRESS	
		DIRECT CONTACTS				
4	IF SOLD NET GAIN NET LOSS					
	HELD OR ACQUIRED BY	X FILER	SPOUSE		DEPENDENT CHILD	
	DESCRIPTION		I	NAME ANI	D ADDRESS	
		QUARRY LLC				
		Q07.4441. <u>=</u>				
	IF SOLD NET GAIN					
	NET LOSS					
	HELD OR ACQUIRED BY	[V] 511 5D				
		X FILER	SPOUSE		DEPENDENT CHILD	
	DESCRIPTION		I	NAME ANI	D ADDRESS	
		CRADDICK PARTNE	RS LTD			
		2 LAKES DRIVE				
		MIDLAND, TX 79705				
	IF SOLD NET GAIN NET LOSS					

PART 7B

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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.

which the child is listed on the C	over Sneet.			
1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L. (Th	he Honorable)	00030098	
2 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
3 DESCRIPTION		NAM	E AND ADDRESS	
	CL CRADDICK LLC			
4 IF SOLD NET GAIN NET LOSS				
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	_
DESCRIPTION		NAM	E AND ADDRESS	
	CRADDICK LAKE P	ROPERTIES LLC		
	2 LAKES DRIVE			
	MIDLAND, TX 7970	5		
IF SOLD NET GAIN NET LOSS				
HELD OR ACQUIRED BY				
	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION		NAM	E AND ADDRESS	
	THE GROVE PORT	FOLIO LLC		
	500 W. 2ND STREE	T, STE. 1900 #29		
	AUSTIN, TX 78701			
IF SOLD NET GAIN NET LOSS				

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.

1	FILER INFORMATION	FILER NAME		FILER ID	
		Craddick, Christi L. (Th	e Honorable)	00030098	
2	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
3	DESCRIPTION		NAME	AND ADDRESS	
		PSW LAND INVESTI 900 SOUTH 1ST STE			
		AUSTIN, TX 78704			
4	IF SOLD NET GAIN NET LOSS				
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	DESCRIPTION		NAME	AND ADDRESS	
		PSW-COPELAND SO 900 S 1ST STREET, AUSTIN, TX 78704			
	IF SOLD NET GAIN NET LOSS	7,007,11,17,10101			
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
	DESCRIPTION		NAME	AND ADDRESS	
		2107 EM FRANKLIN 900 S 1ST STREET SUITE 110 AUSTIN, TX 78704	LLC		
	IF SOLD NET GAIN NET LOSS				

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.

	Which the child is listed on the Co	JVCI SIICCI.			
1	FILER INFORMATION	FILER NAME		FILER ID	
		Craddick, Christi L. (The	e Honorable)	00030098	
2	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	-
3	DESCRIPTION		NAM	IE AND ADDRESS	
		1600 SOUTH FIRST, 900 S. 1ST ST, SUITE			
		AUSTIN, TX 78704			
4	IF SOLD NET GAIN NET LOSS				
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	-
	DESCRIPTION	NAME AND ADDRESS			
		ENTERPRISE PROD PO BOX 4018	UCTS PARTNERS,	L.P.	
		HOUSTON, TX 77210)		
	IF SOLD X NET GAIN NET LOSS	Less than \$8,930			
	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	_
	DESCRIPTION		NAM	IE AND ADDRESS	
		DCP MIDSTREAM 370 17TH STREET DENVER, CO 80202			
	IF SOLD NET GAIN NET LOSS				

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.

1 FILER INFORMATION		FILER NAME	FILER ID	
		Craddick, Christi L. (The Honorable)	00030098	
2	HELD OR ACQUIRED BY	X FILER SPOUSE	DEPENDENT CHILD	
3	DESCRIPTION	NAME AND ADDRESS		
		ENERGY TRANSFER LP 8111 WESTCHESTER DRIVE, SUITE 6	500	
L		DALLAS, TX 75225		
4	IF SOLD NET GAIN NET LOSS			

TRUST INCOME PART 9 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 source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received more than \$900 in income, if the identity of the asset is known. 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. FILER INFORMATION FILER NAME FILER ID Craddick, Christi L. (The Honorable) 00030098 2 SOURCE NAME OF TRUST CHRISTI LEIGH CRADDICK 2012 GST TRUST 3 BENEFICIARY X FILER SPOUSE DEPENDENT CHILD _____ 4 INCOME Less than \$8,930 ASSETS FROM WHICH None **OVER \$500 WAS RECEIVED** UNKNOWN

SOURCE			ME OF TRUST	
	CATHERINE LEIGH	I CRADDICK 2016 GS	I IRUSI	
BENEFICIARY	FILER	SPOUSE	X DEPENDENT CHILD 1	
INCOME	Less than \$8,930			
ASSETS FROM WHICH OVER \$500 WAS RECEIVED UNKNOWN	None			

OWNERSHIP 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 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 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the cover	Sheet.		
1 FILER INFORMATION	FILER NAME	FILER ID)
	Craddick, Christi L. (The Honorable	0003009	98
2 BUSINESS ASSOCIATION		NAME AND ADDRESS	
	DIRECT CONTACTS		
	DIRECT CONTACTO		
3 BUSINESS TYPE	X Corporation	Limited Partnership	Profesional Association
	Firm	Limited Liability Partnership	Joint Venture
	Partnership	Professional Corporation	Other
4 HELD, ACQUIRED, OR SOLD BY	X FILER SPO	USE DEPENDENT CHILE)
		<u> </u>	
BUSINESS ASSOCIATION		NAME AND ADDRESS	
	CL CRADDICK LLC		
BUSINESS TYPE	Corporation	Limited Partnership	Profesional Association
	Firm	Limited Liability Partnership	Joint Venture
	Partnership	Professional Corporation X	Other
HELD, ACQUIRED, OR SOLD BY	X FILER SPO	USE DEPENDENT CHILD)
OK SOLD B1			
BUSINESS ASSOCIATION		NAME AND ADDRESS	
	CDADDICK LAKE DDODEDTIES LI	0	
	CRADDICK LAKE PROPERTIES LL 2 LAKES DRIVE		
	MIDLAND, TX 79705		
BUSINESS TYPE	Corporation	Limited Partnership	Profesional Association
	Firm	Limited Liability Partnership	Joint Venture
	Partnership	Professional Corporation X	Other
HELD, ACQUIRED,	X FILER SPO	USE DEPENDENT CHILD)
OR SOLD BY	I STOR	OSE DEPENDENT CHIEF	

OWNERSHIP 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 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 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the Covers	Srieet.		
1 FILER INFORMATION	FILER NAME	F	FILER ID
	Craddick, Christi L. (The Honorable)	(00030098
2 BUSINESS ASSOCIATION		NAME AND ADDRESS	
	QUARRY LLC		
	QUARRY LLC		
3 BUSINESS TYPE	Corporation	Limited Partnership	Profesional Association
	Firm	Limited Liability Partnership	Joint Venture
	Partnership	Professional Corporation	X Other
4 HELD, ACQUIRED, OR SOLD BY	X FILER SPOU	JSE DEPENDEN	T CHILD
BUSINESS ASSOCIATION		NAME AND ADDRESS	
	CRADDICK PARTNERS LTD		
	2 LAKES DRIVE		
	MIDLAND, TX 79705		
BUSINESS TYPE	Corporation X	Limited Partnership	Profesional Association
	Firm	Limited Liability Partnership	Joint Venture
	Partnership	Professional Corporation	Other
HELD, ACQUIRED, OR SOLD BY	X FILER SPOU	SE DEPENDEN	T CHILD

ASSETS 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 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.

the child is listed on the cover	Sheet.			
1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L. (Th	ne Honorable)	00030098	
2 BUSINESS ASSOCIATION		NAME /	AND ADDRESS	
	DIRECT CONTACTS			
3 BUSINESS TYPE	Corporation			
4 HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
5 ASSETS	DES	CRIPTION	CATEGORY	
	BANK AND BROKERA	AGE ACCOUNTS	At least \$44,630 or more	
BUSINESS	NAME AND ADDRESS			
ASSOCIATION				
	CL CRADDICK LLC			
BUSINESS TYPE	Other Business Associ	ation		
HELD, ACQUIRED,				
OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ASSETS	DES	CRIPTION	CATEGORY	
	BROKERAGE/INVEST	MENT ACCOUNTS	At least \$44,630 or more	

ASSETS 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 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.

1 FILER INFORMATION	FILER NAME		FILER ID
	Craddick, Christi L. (The Honor	able)	00030098
2 BUSINESS ASSOCIATION		NAME A	AND ADDRESS
	CRADDICK LAKE PROPERTIE	ES LLC	
	2 LAKES DRIVE		
	MIDLAND, TX 79705		
3 BUSINESS TYPE	Other Business Association		
4 HELD, ACQUIRED, OR SOLD BY	X FILER S	SPOUSE	DEPENDENT CHILD
5 ASSETS	DESCRIPTION	J	CATEGORY
	3904 PACK SADDLE DRIVE, H BAY, TX 78657	IORSESHOE	At least \$44,630 or more
	BA1, 1 \ 18031		1
BUSINESS		NAME A	AND ADDRESS
ASSOCIATION			
	QUARRY LLC		
BUSINESS TYPE	Other Business Association		
LIELD ACQUIDED			
HELD, ACQUIRED, OR SOLD BY	X FILER S	SPOUSE	DEPENDENT CHILD
ASSETS	DESCRIPTION	J	CATEGORY
	ROYALTIES		At least \$44,630 or more

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

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.

1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L. (T	he Honorable)	00030098	
2 BUSINESS ASSOCIATION		NAM	E AND ADDRESS	
	DIRECT CONTACTS			
3 BUSINESS TYPE	Corporation			
4 HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	-
5 LIABILITIES	DESC	CRIPTION	CATEGORY	
	None		Less than \$8,930	
BUSINESS		NAM	E AND ADDRESS	
ASSOCIATION				
	CL CRADDICK LLC			
BUSINESS TYPE	Other Business Associa	ation		
	Other Business Association			
HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
LIABILITIES			CATEGORY	
LIABILITIES	NONE	CRIPTION	Less than \$8,930	
	l			

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

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.

1 FILER INFORMATION	FILER NAME		FILER ID	
	Craddick, Christi L. (The Hono	orable)	00030098	
2 BUSINESS ASSOCIATION		NAME A	AND ADDRESS	
	CRADDICK LAKE PROPERTI	ES LLC		
	2 LAKES DRIVE			
	MIDLAND, TX 79705			
3 BUSINESS TYPE	Other Business Association			
4 HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
5 LIABILITIES	DESCRIPTIO	N	CATEGORY	
	NONE		Less than \$8,930	
BUSINESS		NAME £	AND ADDRESS	
ASSOCIATION				
	QUARRY LLC			
BUSINESS TYPE	Other Business Association			
	Other Business / Issociation			
HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
LIABILITIES	DESCRIPTIO	NI .	CATEGORY	
LIADILITIES	None	N	Less than \$8,930	
	I			

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.

1	FILER INFORMATION	FILER NAME		FILER ID
		Craddick, Christi L. (The	e Honorable)	00030098
2	ORGANIZATION	CRADDICK PARTNERS	S, LTD.	
3	POSITION HELD	GENERAL PARTNER		
4	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	QUARRY LLC		
	POSITION HELD	MANAGING MEMBER		
	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	DIRECT CONTACTS		
	POSITION HELD	PRESIDENT		
	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	CL CRADDICK LLC		
	POSITION HELD	MANAGING MEMBER		
	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	CRADDICK LAKE PROF	PERTIES	
	POSITION HELD	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	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	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
	X	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
	Х	N/A Part 8 - Gifts
		N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	Х	N/A Part 10B - Trustee Statement
		N/A Part 11A - Business Associations
		N/A Part 11B - Assets of Business Associations
		N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
	X	N/A Part 13 - Expenses Accepted Under Honorarium Exception
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	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
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	X	N/A Part 19 - Contracts with Governmental Entity
	X	N/A Part 20 - Bond Counsel Services Provided by a Legislator
		· ·

e law requires the personal financial statement to be verified	d. Without proper verification, the statem	ent is not considered fi	led.
e verification page on a personal statement filed electronica lividual required to file the personal financial statement.	ally with the Texas Ethics Commission m	ust have the electronic	signature of the
e verification page on a personal financial statement filed w the individual required to file the personal financial statemer rson authorized by law to administer oaths and affirmations.	nt as wells as the signature and stamp o	ics Commission must h r seal of office of a nota	nave the signatur rry public or othe
	I swear, or affirm, under penalty of covers calendar year ending Decer and includes all information require 572 of the Government Code.	nber 31, 2020 , and is tr	rue and correct
	The Honorable	e Christi L. Craddick	
	Signa	ture of Filer	
FFIX NOTARY STAMP / SEAL ABOVE			
tworn to and subscribed before me, by the said		, this the	day
f, 20, to certify which, witr	ness my hand and seal of office.		