

# PERSONAL FINANCIAL STATEMENT

FORM PFS  
COVER SHEET  
PAGE 1

Filed in accordance with chapter 572 of the Government Code.  
For filings required in 2024, covering calendar year ending December 31, 2023.  
Use FORM PFS--INSTRUCTION GUIDE when completing this form.

PAGE #  
65

ACCOUNT #  
00032395

1 NAME

TITLE; FIRST; MI

The Honorable Walter Wayne

NICKNAME; LAST; SUFFIX

Wayne Christian

## OFFICE USE ONLY

Date Received

ELECTRONICALLY FILED

04/10/2024

2 ADDRESS

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

204 Houston Street

Center, TX 75935

☐

(CHECK IF FILER'S HOME ADDRESS)

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

3 TELEPHONE  
NUMBER

AREA CODE PHONE NUMBER; EXTENSION

REDACTED PER 572.032(a-1), GOVT CODE

4 REASON  
FOR FILING  
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 Lisa Christian

DEPENDENT CHILD

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 EMPLOYMENT <input type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address) EMPLOYER SELF ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>REDACTED PER 572.032(a-1), GOV'T CODE</b> POSITION HELD	
<input checked="" type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION Financial Services	

INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER	NAME AND ADDRESS OF EMPLOYER / POSITION HELD <input type="checkbox"/> (Check if Filer's Home Address) EMPLOYER State of Texas ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 12967 AUSTIN, TX 78711-2967 POSITION HELD Railroad Commissioner	
<input type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION	

# 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 information, see FORM PFS--INSTRUCTION GUIDE.

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> AB SMALL & MID CAP VALUE PORTFOLIO			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> AF U.S. GOVERNMENT MONEY MARKET			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS				

<b>MUTUAL FUND</b>	<b>NAME</b> AMCAP FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

# MUTUAL FUNDS

## PART 4

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> AMERICAN BALANCED FUND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> AMERICAN CENTURY INFLATION PROTECTION			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> AMERICAN FUNDS GLOBAL GROWTH			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

# MUTUAL FUNDS

## PART 4

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<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)		FILER ID 00032395	
<b>2</b> MUTUAL FUND	NAME AMERICAN FUNDS GROWTH			
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 to 9,999	<input type="checkbox"/> 10,000 OR MORE		
<b>5</b> IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110		

MUTUAL FUND	NAME AMERICAN FUNDS GROWTH-INCOME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 to 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110		

MUTUAL FUND	NAME AMERICAN MUTUAL FUND			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input checked="" type="checkbox"/> 100 TO 499	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
	<input type="checkbox"/> 5,000 to 9,999	<input type="checkbox"/> 10,000 OR MORE		
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110		

# MUTUAL FUNDS

## PART 4

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<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME CAPITAL APPRECIATION	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME CAPITAL WORLD GROWTH AND INCOME FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME EMERGING MARKETS	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

# MUTUAL FUNDS

## PART 4

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> EQTYINC			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> EUROPACIFIC GROWTH FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> FEDERATED HERMES CORPORATE BOND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

# MUTUAL FUNDS

## PART 4

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> FIDELITY TREASURY MMKT DAILY MONEY CL			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> FRANKLIN BW U.S. LARGE CAP VALUE			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> FRANKLIN DYNATECH FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS			

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# MUTUAL FUNDS

## PART 4

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> FRANKLIN GROWTH ALLOCATION FUND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> FRANKLIN GROWTH FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> FRANKLIN GROWTH OPPORTUNITIES - CLASS			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110			

# MUTUAL FUNDS

## PART 4

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<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME FRANKLIN MONEY - A	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input checked="" type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

MUTUAL FUND	NAME FRANKLIN SMALL CAP GROWTH FUND - CLASS	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	
	Less than \$10,110	

MUTUAL FUND	NAME FRANKLIN SMALL COMPANY VALUE	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	
	Less than \$10,110	

# MUTUAL FUNDS

## PART 4

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<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> FRANKLIN SYSTEMATIC US LRG CAP VALUE			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> FRNK SYS US LRG VAL			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS				

<b>MUTUAL FUND</b>	<b>NAME</b> FUNDAMENTAL INVESTORS			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

# 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> GLOBAL BOND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> GOLDMAN SACHS GLOBAL BOND PORTFOLIO			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS			
	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> GOVT & QUALITY BOND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> HIGH-YIELD BOND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> INFLATION PROTECTION			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> INTERNATIONAL GROWTH AND INCOME			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

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# 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> INTL DIVSFIED EQUITY			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			

<b>MUTUAL FUND</b>	<b>NAME</b> INVESCO VI COMSTOCK FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			
	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> INVESCO VI GROWTH AND INCOME FUND			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b>	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS			
	Less than \$10,110			

# 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> JANUS FOCUSED GROWTH			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> JPMORGAN EMERGING MARKETS PORTFOLIO			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS				

<b>MUTUAL FUND</b>	<b>NAME</b> JPMORGAN EQUITY-INCOME PORTFOLIO			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

# 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 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME JPMORGAN LARGE CAP CORE PORTFOLIO	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME JPMORGAN MFS CORE BOND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME LORD ABBETT GROWTH AND INCOME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

# 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> MFS GROWTH FUND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> MFS MASS INV TRST			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS				

<b>MUTUAL FUND</b>	<b>NAME</b> MONEY MARKET A			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input checked="" type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input type="checkbox"/> NET GAIN <input type="checkbox"/> 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 information, see FORM PFS--INSTRUCTION GUIDE.

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<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME MORGAN STANLEY INTERNATIONAL EQUITIES	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME NEW PERSPECTIVE FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME NEW WORLD FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

# 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 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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 MUTUAL FUND	NAME PIMCO RAE INTERNATIONAL VALUE	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
5 IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110	

MUTUAL FUND	NAME PINEBRIDGE HIGH-YIELD BOND PORTFOLIO	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110	

MUTUAL FUND	NAME SMALL & MIDCAP VALUE	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# 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 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.

<b>1 FILER INFORMATION</b>	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2 MUTUAL FUND</b>	NAME SMALL COMPANY VALUE	
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5 IF SOLD</b>	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

MUTUAL FUND	NAME SMALLCAP WORLD FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	
	Less than \$10,110	

MUTUAL FUND	NAME TEMPLETON DEV MRKTS TR FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	
	Less than \$10,110	

# 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 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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395	
<b>2 MUTUAL FUND</b>	<b>NAME</b> TEMPLETON WORLD FUND			
<b>3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>4 NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>5 IF SOLD</b> <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> THE GROWTH FUND OF AMERICA			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

<b>MUTUAL FUND</b>	<b>NAME</b> THE INVESTMENT COMPANY OF AMERICA			
<b>SHARES OF MUTUAL FUND HELD OR ACQUIRED BY</b>	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____			
<b>NUMBER OF SHARES OF MUTUAL FUND</b>	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE			
<b>IF SOLD</b> <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110			

# 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 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME THE NEW ECONOMY FUND	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

MUTUAL FUND	NAME WASHINGTON MUTUAL INVESTORS FUND	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input checked="" type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	At least \$10,110 but less than \$20,220

MUTUAL FUND	NAME WELLINGTON CAPITAL APPRECIATION	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	Less than \$10,110

# 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 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> MUTUAL FUND	NAME WELLINGTON GOVT AND QUALITY BOND	
<b>3</b> SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
<b>5</b> IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

MUTUAL FUND	NAME PAS GROWTH DEFENSIVE OPEN_ARCHITECTURE Muni Taxable	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

MUTUAL FUND	NAME PAS GROWTH DEFENSIVE OPEN_ARCHITECTURE	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

# 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 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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 MUTUAL FUND	NAME FIDELITY MMKT PREMIUM CLASS	
3 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 NUMBER OF SHARES OF MUTUAL FUND	<input checked="" type="checkbox"/> LESS THAN 100 <input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 500 TO 999 <input type="checkbox"/> 1,000 TO 4,999 <input type="checkbox"/> 5,000 to 9,999 <input type="checkbox"/> 10,000 OR MORE	
5 IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> 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 \$1,000 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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Stella Carroll ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 220 Center St. Center, TX 75935	
3 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS La Tressa Evans ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 423 Pecan St Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$20,220 but less than \$50,540	

SOURCE OF INCOME <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Rydaco LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 506 Railroad Ave. Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

# 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 \$1,000 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  Tony Mason ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 312 Elliott St.  Center, TX 75935	
<b>3</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  Tina Duvall ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 504 Pecan St.  Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  David/Amanda Barton ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 215 Field St.  Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

# 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 \$1,000 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Mitchell Miller ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 206 Houston Center, TX 75935	
<b>3</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Friends Title ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 229 San Augustine St. Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Tonya Antley ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 102 Greer St. Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

# 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 \$1,0 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  Kerry Barnes ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 511 Pecan St.  Center, TX 75935	
<b>3</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  Mark Jones ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 405 Pecan St  Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	Less than \$10,110	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS  Bulldog Oilfield Services ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 306 San Augustine Street  Center, TX 75935	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$20,220 but less than \$50,540	

# 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 \$1,0 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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 SOURCE OF INCOME	NAME AND ADDRESS Karl Miller ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 105 Center St Center, TX 75935	
3 RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 AMOUNT	At least \$10,110 but less than \$20,220	

SOURCE OF INCOME	NAME AND ADDRESS Christian & Daughters, LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 220 South 4th Waco , TX 76710	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$50540 or more	

SOURCE OF INCOME	NAME AND ADDRESS AF U.S. GOVERNMENT MONEY MARKET-A ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

# 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 \$1,000 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.

<b>1</b> FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
<b>2</b> SOURCE OF INCOME  <input checked="" type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Fidelity Treasury MMKT Daily Money ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
<b>3</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
<b>4</b> AMOUNT	Less than \$10,110	

SOURCE OF INCOME  <input checked="" type="checkbox"/> Publicly held corporation	NAME AND ADDRESS FRANKLIN MONEY - A ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	Less than \$10,110	

SOURCE OF INCOME  <input type="checkbox"/> Publicly held corporation	NAME AND ADDRESS Amajah Hall ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2508 Enfield  Austin , TX 78703	
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
AMOUNT	At least \$10,110 but less than \$20,220	

# 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 \$2,020 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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Prosperity Bank	
3 LIABILITY OF	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
4 GUARANTOR	NONE	
5 AMOUNT	At least \$20,220 but less than \$50,540	

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Freedom Mortgage	
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	At least \$50540 or more	

PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	PHH Mortgage	
LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
GUARANTOR	NONE	
AMOUNT	At least \$50540 or more	

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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.

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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 206 Houston St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> 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.

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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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 425 Pecan St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> 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.

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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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 423 Pecan St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> 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.

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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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 220 Center St. Center, TX 75935	
4 DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> 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.

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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 601 Railroad Ave. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 102 Greer St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 405 Pecan St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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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.

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 504 Pecan St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 2615 Holiday Crystal Beach, TX 77650-0717	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Galveston	
5 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	Prosperity Bank	
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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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.

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 215 Field St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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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.

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 506 Railroad Ave. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 312 Elliott St. Center, TX 75935	
4 DESCRIPTION <input type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 511 Pecan St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 2508 Enfield St Austin, TX 78703-3740	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 0.04400 lots Travis	
5 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	freedom mortgage	
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input checked="" type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE <b>REDACTED PER 572.032(a-1), GOV'T CODE</b>	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 306 San Augustine St. Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 2505 Enfield St Austin, TX 78703-3740	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 0.06000 lots Travis	
5 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)	PHH Mortgage	
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# INTERESTS IN REAL PROPERTY

## PART 7A

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 STREET ADDRESS <input type="checkbox"/> NOT AVAILABLE <input type="checkbox"/> CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 105 Center St Center, TX 75935	
4 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Shelby	
5 NAMES OF PERSONS RETAINING AN INTEREST <input checked="" type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST)		
6 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS		

# 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.

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Wayne Christian Financial Services 204 Houston Street  Center, TX 75935	
4 IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Center Street Properties, LLC 788 Hwy 7 W.  Center, TX 75935	
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Shelby County Properties, LLC  <b>REDACTED PER 572.032(a-1), GOV'T CODE</b>	
IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

# INTEREST IN BUSINESS ENTITIES

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.

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
3 DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Christian Business, LLC <div>REDACTED PER 572.032(a-1), GOV'T CODE</div>	
4 IF SOLD	<input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	

# 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.

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.

<b>1 FILER INFORMATION</b>	<b>FILER NAME</b> Christian, Walter Wayne (The Honorable)		<b>FILER ID</b> 00032395									
<b>2 BUSINESS ASSOCIATION</b>	<b>NAME AND ADDRESS</b> <input type="checkbox"/> (Check If Filer's Home Address) Center Street Properties, LLC 788 Hwy 7 West Center, TX 75935											
<b>3 BUSINESS TYPE</b>	<table border="0"> <tr> <td><input type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Limited Partnership</td> <td><input type="checkbox"/> Profesional Association</td> </tr> <tr> <td><input type="checkbox"/> Firm</td> <td><input type="checkbox"/> Limited Liability Partnership</td> <td><input type="checkbox"/> Joint Venture</td> </tr> <tr> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Professional Corporation</td> <td><input checked="" type="checkbox"/> Other _____</td> </tr> </table>			<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association	<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association										
<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture										
<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____										
<b>4 HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____											
<b>BUSINESS ASSOCIATION</b>	<b>NAME AND ADDRESS</b> <input type="checkbox"/> (Check If Filer's Home Address) Shelby County Properties, LLC <div style="background-color: black; color: white; padding: 2px; text-align: center;"> <b>REDACTED PER 572.032(a-1), GOV'T CODE</b> </div>											
<b>BUSINESS TYPE</b>	<table border="0"> <tr> <td><input type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Limited Partnership</td> <td><input type="checkbox"/> Profesional Association</td> </tr> <tr> <td><input type="checkbox"/> Firm</td> <td><input type="checkbox"/> Limited Liability Partnership</td> <td><input type="checkbox"/> Joint Venture</td> </tr> <tr> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Professional Corporation</td> <td><input checked="" type="checkbox"/> Other _____</td> </tr> </table>			<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association	<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association										
<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture										
<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____										
<b>HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____											
<b>BUSINESS ASSOCIATION</b>	<b>NAME AND ADDRESS</b> <input type="checkbox"/> (Check If Filer's Home Address) Christian Business, LLC <div style="background-color: black; color: white; padding: 2px; text-align: center;"> <b>REDACTED PER 572.032(a-1), GOV'T CODE</b> </div>											
<b>BUSINESS TYPE</b>	<table border="0"> <tr> <td><input type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Limited Partnership</td> <td><input type="checkbox"/> Profesional Association</td> </tr> <tr> <td><input type="checkbox"/> Firm</td> <td><input type="checkbox"/> Limited Liability Partnership</td> <td><input type="checkbox"/> Joint Venture</td> </tr> <tr> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Professional Corporation</td> <td><input checked="" type="checkbox"/> Other _____</td> </tr> </table>			<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association	<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association										
<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture										
<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____										
<b>HELD, ACQUIRED, OR SOLD BY</b>	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____											

# 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.

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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395									
2 BUSINESS ASSOCIATION	NAME AND ADDRESS <input checked="" type="checkbox"/> (Check If Filer's Home Address) Wayne Christian Financial Services <b>REDACTED PER 572.032(a-1), GOV'T CODE</b>										
3 BUSINESS TYPE	<table><tr><td><input type="checkbox"/> Corporation</td><td><input type="checkbox"/> Limited Partnership</td><td><input type="checkbox"/> Profesional Association</td></tr><tr><td><input type="checkbox"/> Firm</td><td><input type="checkbox"/> Limited Liability Partnership</td><td><input type="checkbox"/> Joint Venture</td></tr><tr><td><input type="checkbox"/> Partnership</td><td><input type="checkbox"/> Professional Corporation</td><td><input checked="" type="checkbox"/> Other _____</td></tr></table>		<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association	<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Profesional Association									
<input type="checkbox"/> Firm	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Joint Venture									
<input type="checkbox"/> Partnership	<input type="checkbox"/> Professional Corporation	<input checked="" type="checkbox"/> Other _____									
4 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT 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.

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 Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)  Center Street Properties, LLC 788 Hwy 7 West  Center, TX 75935	
3 BUSINESS TYPE	Other Business Association	
4 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
5 ASSETS	DESCRIPTION Storage units in the total of 41 units and an office building 788 Hwy 7 W.; Center, TX 75935	CATEGORY At least \$50540 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.

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	<div>FILER NAME</div> <div>FILER ID</div> <div>Christian, Walter Wayne (The Honorable)</div> <div>00032395</div>																	
2 BUSINESS ASSOCIATION	<div>NAME AND ADDRESS</div> <div><input type="checkbox"/> (Check If Filer's Home Address)</div> <div>Christian Business, LLC</div> <div>REDACTED PER 572.032(a-1), GOV'T CODE</div>																	
3 BUSINESS TYPE	Other Business Association																	
4 HELD, ACQUIRED, OR SOLD BY	<div><input checked="" type="checkbox"/> FILER</div> <div><input checked="" type="checkbox"/> SPOUSE</div> <div><input type="checkbox"/> DEPENDENT CHILD _____</div>																	
5 ASSETS	<table border="1"> <thead> <tr> <th data-bbox="435 848 980 884">DESCRIPTION</th> <th data-bbox="980 848 1534 884">CATEGORY</th> </tr> </thead> <tbody> <tr> <td data-bbox="435 884 980 1003">Commercial Property office building containing three seperate office suites</td> <td data-bbox="980 884 1534 1003">At least \$50540 or more</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>		DESCRIPTION	CATEGORY	Commercial Property office building containing three seperate office suites	At least \$50540 or more												
DESCRIPTION	CATEGORY																	
Commercial Property office building containing three seperate office suites	At least \$50540 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.

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	<div style="display: flex; justify-content: space-between;"> <div>FILER NAME Christian, Walter Wayne (The Honorable)</div> <div>FILER ID 00032395</div> </div>	
2 BUSINESS ASSOCIATION	<div style="display: flex; justify-content: space-between;"> <div>NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)</div> </div> <p>Center Street Properties, LLC 788 Hwy 7 West  Center, TX 75935</p>	
3 BUSINESS TYPE	Other Business Association	
4 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	
5 LIABILITIES	DESCRIPTION Mortgage loan through Prosperity Bank	CATEGORY At least \$50540 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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 ORGANIZATION	Center Street Properties, LLC	
3 POSITION HELD	Manager	
4 POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	

ORGANIZATION	Center Street Properties, LLC	
POSITION HELD	Manager	
POSITION HELD BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	

ORGANIZATION	Shelby County Properties, LLC	
POSITION HELD	Manager	
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	

ORGANIZATION	Shelby County Properties, LLC	
POSITION HELD	Manager	
POSITION HELD BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	

ORGANIZATION	Christian Business, LLC	
POSITION HELD	Manager	
POSITION HELD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> 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 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 ORGANIZATION	Christian Business, LLC	
3 POSITION HELD	Manager	
4 POSITION HELD BY	<input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____	

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

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 any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PROVIDER	NAME AND ADDRESS Ector County GOP Women 707 Jefferson Ave  Odessa, TX 79761	
3 AMOUNT	\$30.00	

PROVIDER	NAME AND ADDRESS Drillers PAC 3657 BRIARPARK DR. SUITE 200 HOUSTON, TX 77042	
AMOUNT	\$50.00	

PROVIDER	NAME AND ADDRESS Nueces County GOP 5151 Flynn Pkwy #103  Corpus Christi, TX 78411	
AMOUNT	\$50.00	

PROVIDER	NAME AND ADDRESS Natural Gas Society PO BOX 11382  Midland, TX 79702	
AMOUNT	\$40.00	

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PROVIDER	NAME AND ADDRESS Halliburton 3000 N Sam Houston Pkwy E Houston, TX 77032	
3 AMOUNT	\$45.00	

PROVIDER	NAME AND ADDRESS Edwards, Kirk 8161 Dorado Drive Odessa, TX 79765	
AMOUNT	\$35.00	

PROVIDER	NAME AND ADDRESS TXOGA 304 W 13th St Austin, TX 78701	
AMOUNT	\$45.00	

PROVIDER	NAME AND ADDRESS SHALE Magazine 5150 Broadway #493 San Antonio, TX 78209	
AMOUNT	\$35.00	

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PROVIDER	NAME AND ADDRESS One Nexus Corp 1360 Post Oak Blvd Suite 2400 Houston, TX 77056	
3 AMOUNT	\$35.00	

PROVIDER	NAME AND ADDRESS TCCRI PO Box 2659  Austin, TX 78768	
AMOUNT	\$35.00	

PROVIDER	NAME AND ADDRESS Texas Alliance of Energy Producers 1000 West Avenue Suite B  Austin, TX 78701	
AMOUNT	\$50.00	

PROVIDER	NAME AND ADDRESS Texas Alliance of Energy Producers 1000 West Avenue Suite B  Austin, TX 78701	
AMOUNT	\$30.00	

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PROVIDER	NAME AND ADDRESS Texas Federation of Republican Women 13740 N HWY 183 Suite J4 Austin, TX 78750	
3 AMOUNT	\$30.00	

PROVIDER	NAME AND ADDRESS Christians Engaged Conference P.O. Box 472655 Garland, TX 75047	
AMOUNT	\$45.00	

PROVIDER	NAME AND ADDRESS Biar, Andrew P.O. Box 79224 Houston, TX 77279	
AMOUNT	\$35.00	

PROVIDER	NAME AND ADDRESS Hilcorp 1111 Travis St Houston, TX 77002	
AMOUNT	\$35.00	

# EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

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1 FILER INFORMATION	FILER NAME Christian, Walter Wayne (The Honorable)	FILER ID 00032395
2 PROVIDER	NAME AND ADDRESS Ellis County GOP 613 Ferris Ave Suite 107 Waxahachie, TX 75165	
3 AMOUNT	\$40.00	

# 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
- ☒ 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
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ 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
- ☐ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☒ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☒ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances
- ☒ N/A Part 19 - Contracts with Governmental Entity
- ☒ N/A Part 20 - Bond Counsel Services Provided by a Legislator

# PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. Without proper verification, the statement is not considered filed.

The verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the individual required to file the personal financial statement.

The verification page on a personal financial statement filed with an authority other than the Texas Ethics Commission 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.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2023, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

The Honorable Walter Wayne Christian

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