

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

108

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mr

Albert

NICKNAME

LAST

SUFFIX

Black

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1133 S. Madison
Apt/Suite: B

Dallas TX 75208

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

944 1100

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Ms

Nicole

NICKNAME

LAST

SUFFIX

Knox

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3131 McKinney Ave

800

Dallas TX 75204

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

()

9 REPORT TYPE

☐ January 15

☒ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

01

01

2019

THROUGH

Month

Day

Year

03

25

2019

11 ELECTION

ELECTION DATE

Month

Day

Year

05

04

2019

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Mayor

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME
Mr Albert Black

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 109,079.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,939.13
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 203,538.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date

01/01/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christopher Swinson II

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

12207 Woodcliff Dr

Houston, TX 77013

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kimberli Swinson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

12207 Woodcliff Dr

Houston, TX 77013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shauntey Swinson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

12207 Woodcliff Dr

Houston, TX 77013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Taylor

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3400 Carlisle St

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/03/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Joey Floyd

7 Amount of contribution (\$)

20.00

6 Contributor address;

City; State; Zip Code

7441 Marvin D Love Fwy

Dallas, TX 75237

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ted McIntosh

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

10305 Portrush Dr

Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Oliver Black

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

623 Town Creek Drive Dallas

Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Drayton

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

P.O. Box 941851

Plano, TX 75094

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/08/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Clyde And Maize Orr

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

5753 Prestwick Lane

Dallas, TX 75252

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Derick & Claudia Schaefer

Amount of contribution (\$)

1500.00

Contributor address;

City; State; Zip Code

4855 Allencrest Ln

Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Don And Ellen Williams

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5646 Milton St

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Melvin V. Williams

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

942 Pindar Ave

Dallas, TX 75217

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/11/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Jennifer Bilhartz

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

5200 Martel Ave

Dallas, TX 75206

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Odell And Gwyndolyn Sneed

Amount of contribution (\$)

60.00

Contributor address;

City; State; Zip Code

3915 Fountainhead Ln

Dallas, TX 75233

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Fredrick Stern

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

5437 Emerson Ave

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carol M Barger

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6417 Norway Rd

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/15/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

William D Elliott

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

6417 Norway Rd

Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeffrey Curtis

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

4512 Brookridge Dr

Richardson, TX 75082

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Preskitt

Amount of contribution (\$)

5000.00

Contributor address;

City; State; Zip Code

9634 Moss Haven Dr

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Theine

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

601 E Erie St

Milwaukee, WI 53202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/18/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Sherell N. Jefferson

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

705 Bray Central Dr

Allen, TX 75013

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Darthard

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

743 Brick Row Dr

Richardson, TX 75081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ruben E. Esquivel

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

5323 Harry Hines Blvd

Dallas, TX 75390

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Riddle

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

931 Stewart Dr

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date

01/25/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Denward Freeman

6 Contributor address;

City; State; Zip Code

4660 Greenbriar Ct

Rockwall, TX 75032

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Obi Chukwumah

Contributor address;

City; State; Zip Code

1802 Redcliff Ct

Garland, TX 75043

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Allums

Contributor address;

City; State; Zip Code

4125 Buena Vista St

Dallas, TX 75204

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Doug Lawson

Contributor address;

City; State; Zip Code

1 Blalock Pines Ct

Houston, TX 77024

Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/28/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Johnnie Coleman

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

7310 Marvin D Love Fwy

Dallas, TX 75237

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James C Craven

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

3000 Malibu Pl

Plano, TX 75023

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald W. Sr Hicks

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5620 Live Oak St

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeff Theiler

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6178 E Princeton Cir

Englewood, CO 80111

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/28/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Jr., Lymon Washington

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

4359 Highlander Dr

Dallas, TX 75287

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bart Dalton

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5681 Mallard Trce

Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Durant

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3612 Potomac Ave

Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Reginald Gates

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1357 Bar Harbor Dr

Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
01/29/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Tiffaney Dale Hunter

6 Contributor address; City; State; Zip Code
2201 Main Street Dallas, TX 75201

7 Amount of contribution (\$)
100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Alphonso Jackson

Contributor address; City; State; Zip Code
1411 Key Blvd Arlington, VA 22209

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
William Rink

Contributor address; City; State; Zip Code
6101 Melody Ln Dallas, TX 75231

Amount of contribution (\$)
200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/30/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Dorothy Cunningham

Contributor address; City; State; Zip Code
4534 Hedgdon Dr Dallas, TX 75216

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
01/30/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Bethany Martin

6 Contributor address; City; State; Zip Code
1000 E Pleasant Run Rd Cedar Hill, TX 75104

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mary Adams

Contributor address; City; State; Zip Code
7120 Playa Imperial Ln Grand Prairie, TX 75054

Amount of contribution (\$)
40.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Fidel Baca

Contributor address; City; State; Zip Code
2608 Lambda Ln Flower Mound, TX 75028

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Ruby Hall Baker

Contributor address; City; State; Zip Code
426 Southport Dr Dallas, TX 75232

Amount of contribution (\$)
25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
01/31/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lorene Brooks-Smith

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

2130 North Hill Drive Irving, TX 75038

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kevin Brown

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

737 S R L Thornton Fwy Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lynda Carroll

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

121 Meadowbrook Drive Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Beverly Childs

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

1653 Champagne Dr Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/31/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

John M. Collins

6 Contributor address;

City; State; Zip Code

2323 Victory Ave

Dallas, TX 75219

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Margie Davis

Contributor address;

City; State; Zip Code

1331 High Ridge Dr

Duncanville, TX 75137

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Miranda Davis

Contributor address;

City; State; Zip Code

1331 High Ridge Dr

Duncanville, TX 75137

Amount of contribution (\$)

10.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Monica Davis

Contributor address;

City; State; Zip Code

1425 Thistlewood Dr

Desoto, TX 75115

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
01/31/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Tywanna Fields

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code

715 Botany Bay Dr Dallas, TX 75211

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Michelle Grant

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code

2020 W Wheatland Rd Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Anita Hankins

Amount of contribution (\$)
19.00

Contributor address; City; State; Zip Code

7142 Hedge Dr Dallas, TX 75249

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Theresa Jackson

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code

605 Faye St Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
01/31/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Onida Lee

6 Contributor address; City; State; Zip Code

1512 Weatherstone Dr Desoto, TX 75115

7 Amount of contribution (\$)
100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kam Miller Miller

Contributor address; City; State; Zip Code

3606 Thornhill Way Rowlett, TX 75088

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Deborah Morgan

Contributor address; City; State; Zip Code

1193 Tranquilla Dr Dallas, TX 75218

Amount of contribution (\$)
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mary Ransom

Contributor address; City; State; Zip Code

3200 S Center St Arlington, TX 76014

Amount of contribution (\$)
20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

01/31/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Chasity Rattler Greene

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1324 Artemus Dr

Lancaster, TX 75134

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Monica Robinson

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

710 Brook Valley Ln

Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Verna Davis Lynch

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

233 Buffalo Creek

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keith Connolly

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

17228 Townsley Court

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/01/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Grant Frankfurt

7 Amount of contribution (\$)
500.00

6 Contributor address;

City; State; Zip Code

7230 Blairview Dr

Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ted McIntosh

Amount of contribution (\$)
100.00

Contributor address;

City; State; Zip Code

10305 Portrush Dr

Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lori Stacy

Amount of contribution (\$)
20.00

Contributor address;

City; State; Zip Code

3140 Harvard Ave

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lupe Valdez

Amount of contribution (\$)
50.00

Contributor address;

City; State; Zip Code

P.O. Box 227501

Dallas, TX 75222

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

02/02/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Adriane Atkins

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

6754 Eastridge Dr

Dallas, TX 75231

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date

02/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sean Harris

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

7229 Coventry Ct

North Richland Hills, TX 76182

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tim Maiden

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

1519 S Greenstone Ln

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Martin Burrell

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2690 Deep Hill Circle

Dallas, TX 75233

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/06/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Chad Darthard

7 Amount of contribution (\$)

35.00

6 Contributor address; City; State; Zip Code

743 Brick Row Dr

Richardson, TX 75081

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/07/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Thomas M. Dunning

Amount of contribution (\$)

2000.00

Contributor address; City; State; Zip Code

2100 Ross Ave

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/07/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Amber Harper

Amount of contribution (\$)

25.00

Contributor address; City; State; Zip Code

3605 Malcolm X Blvd

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/07/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Scott Turner

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

6863 Gaston Ave

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/08/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Anthony Farmer

7 Amount of contribution (\$)

1500.00

6 Contributor address; City; State; Zip Code

361 Marble Creek Court Sunnyvale, TX 75182

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/08/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Christopher Hamilton

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

5521 Swiss Ave Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/08/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Donald W. Sr Hicks

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

5620 Live Oak St Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/08/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Charles R. McElrath

Amount of contribution (\$)

20.00

Contributor address; City; State; Zip Code

2713 Greenbrook Ct Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/09/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

George A Jr Quesada

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

4523 Bluffview Blvd

Dallas, TX 75209

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William A Jr Blase

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1 Att Plaza 208

Dallas, TX 75202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Julia Hill

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

4745 Salem Dr

Mesquite, TX 75150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Fareed Kaisani

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

4125 Barona Dr

Carrollton, TX 75010

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
22 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date
02/11/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Zachary S. Thompson

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1041 Hampshire Ln

Cedar Hill, TX 75104

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bernice J. Washington

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4359 Highlander Dr

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ivory Barnes

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

511 Pecan Leaf Dr

Lancaster, TX 75146

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Christian

Amount of contribution (\$)

2000.00

Contributor address;

City; State; Zip Code

7515 Currin Dr

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
23 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/13/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barbara J. Cornelius

7 Amount of contribution (\$)

10.00

6 Contributor address;

City; State; Zip Code

2026 Timberview Dr

Mesquite, TX 75149

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dorothy Cunningham

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4534 Hedgdon Dr

Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniele Stroud

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

1438 Cromwell Ct

Lancaster, TX 75134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Isaac Barnes

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

P.O. Box 810121

Dallas, TX 75381

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
24 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/15/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Oswin Chrisman

6 Contributor address;

City; State; Zip Code

5850 E Lovers Ln

Dallas, TX 75206

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Whitney Davis

Contributor address;

City; State; Zip Code

525 Yale St

Houston, TX 77007

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Suzanne Madrid

Contributor address;

City; State; Zip Code

1121 Beachview St

Dallas, TX 75218

Amount of contribution (\$)
20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gianna Martin

Contributor address;

City; State; Zip Code

18208 Preston Rd

Dallas, TX 75252

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
25 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/18/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Mitchell Md

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

1410 Acapulco Dr

Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carlos Navaro

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4211 Shorecrest Dr

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carlos Zaffirini

Amount of contribution (\$)

5000.00

Contributor address;

City; State; Zip Code

401 W 15th St

Austin, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Albert Ruff

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2305 Spring Mills Rd

Mesquite, TX 75181

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
26 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vicki Cardarella

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

117 Angie Ln

Abilene, TX 79602

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Darthard

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

743 Brick Row Dr

Richardson, TX 75081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Whitney Davis

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

525 Yale St

Houston, TX 77007

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James C Craven

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

3000 Malibu Pl

Plano, TX 75023

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
27 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/24/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kent And Janeene Jones

6 Contributor address; City; State; Zip Code

6534 Sunnyland Ln Dallas, TX 75214

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Justin Allen

Contributor address; City; State; Zip Code

1032 Wedgewood Dr Forney, TX 75126

Amount of contribution (\$)
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Chad Darthard

Contributor address; City; State; Zip Code

743 Brick Row Dr Richardson, TX 75081

Amount of contribution (\$)
25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/26/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Fidel Baca

Contributor address; City; State; Zip Code

2608 Lambda Ln Flower Mound, TX 75028

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
28 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

02/26/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Jason Gillman

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

4100 Travis St

Dallas, TX 75204

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lashuandra Hamberlin

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

3635 Royal Ln

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Warren Lee

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4708 Forest Bend Rd

Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bobby B. Lyle

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6688 N Central Expy

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/26/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chasity Rattler Greene

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1324 Artemus Dr

Lancaster, TX 75134

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Russell

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

501 S. Edgefield Avenue

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Virginia Waldrop

Amount of contribution (\$)

15.00

Contributor address;

City; State; Zip Code

1511 Kirkwood Rd

Austin, TX 78722

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim Benge

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4540 Ross Ave

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/27/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Hannah And Stuart Cutshall

6 Contributor address; City; State; Zip Code

4501 Highland Dr Dallas, TX 75205

7 Amount of contribution (\$)
50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/27/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lenora Lindsey

Contributor address; City; State; Zip Code

4904 Morningside Dr Mesquite, TX 75150

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/27/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Anthony D Lyons

Contributor address; City; State; Zip Code

320 S R L Thornton Fwy Dallas, TX 75203

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/27/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kam Miller Miller

Contributor address; City; State; Zip Code

3606 Thornhill Way Rowlett, TX 75088

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
31 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

02/27/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Walton Miller

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

3777 Duchess Trail

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris R. Sr Swinson

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

12207 Woodcliff Dr

Houston, TX 77013

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnnie Coleman

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

7310 Marvin D Love Fwy

Dallas, TX 75237

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Neil Corbin

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

493 Jefferson Ln

Lake Dallas, TX 75065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
32 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/28/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

James C Craven

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code
3000 Malibu Pl
Plano, TX 75023

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Dorothy Cunningham

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
4534 Hedgdon Dr
Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Ignacio Martin

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
18208 Preston Rd Ste
Dallas, TX 75252

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Charles R. McElrath

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
2713 Greenbrook Ct
Grapevine, TX 76051

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/28/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Drayton & Elizabeth McLane

6 Contributor address; City; State; Zip Code

P.O. Box 549 Temple, TX 76503

7 Amount of contribution (\$)
10000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jennifer Owen

Contributor address; City; State; Zip Code

2711 N Haskell Ave Dallas, TX 75204

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Cortez Law Firm PLLC

Contributor address; City; State; Zip Code

12801 N Central Expy Dallas, TX 75243

Amount of contribution (\$)
5000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Chasity Rattler Greene

Contributor address; City; State; Zip Code

1324 Artemus Dr Lancaster, TX 75134

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
02/28/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Dee Rias

7 Amount of contribution (\$)

30.00

6 Contributor address; City; State; Zip Code

2135 US Highway 80 E Mesquite, TX 75150

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Albert Ruff

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

2305 Spring Mills Rd Mesquite, TX 75181

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Nicole Williams

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

7145 Copperleaf Dr Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jay Allison

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

3 Post-N-Paddock Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/01/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Oliver Black

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code

623 Town Creek Drive Dallas Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Michael M Boone

Amount of contribution (\$)

1500.00

Contributor address; City; State; Zip Code

2323 Victory Ave Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Launjane Carriere

Amount of contribution (\$)

10.00

Contributor address; City; State; Zip Code

1723 Red Cloud Dr Dallas, TX 75217

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Allen Cullum

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

4670 N Versailles Ave Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
36 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/01/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Thomas R Harper

7 Amount of contribution (\$)

20.00

6 Contributor address;

City; State; Zip Code

8906 Forest Hills Blvd

Dallas, TX 75218

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ted McIntosh

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

10305 Portrush Dr

Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kirk D Myers

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1604 Carriage Creek Dr

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Janie Pena

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5700 River Highlands Dr

McKinney, TX 75070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/01/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald E Wesson

7 Amount of contribution (\$)

2500.00

6 Contributor address;

City; State; Zip Code

3111 Welborn St

Dallas, TX 75219

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cora Black

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

750 Fort Worth Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kevin Brown

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

737 S R L Thornton Fwy

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Milton Brown

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1401 Wyndmere Dr

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
38 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/02/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Lafonda Cousin

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

205 Benton Dr

Allen, TX 75013

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keysha Godfrey

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

7611 Christie Ln

Dallas, TX 75249

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shikona L Johnson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

8201 Mirror Rock Ln

Denton, TX 76210

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Cynthia Lightfoot

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

18211 Kelly Blvd

Dallas, TX 75287

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
39 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/02/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Stan And Charlotte Parson

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code
3504 Bradford Drive Richardson, TX 75082

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/02/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Etalemahu Taddesse

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code
9535 Forest Ln Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/02/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Crystal Ward

Amount of contribution (\$)

20.00

Contributor address; City; State; Zip Code
5349 Amesbury Dr Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/03/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Gary Brock

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code
3500 Gaston Ave Dallas, TX 75246

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
40 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/03/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Sarah Kovich

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

3323 Dothan Ln

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Royle King

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2926 San Diego Dr

Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Rees II

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

1332 Adair St

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Everett

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

6456 Royalton Dr

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
41 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/05/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Katrina Keyes

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

3839 McKinney Ave

Dallas, TX 75204

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patty And Mark Leyendecker

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4606 Gilbert Ave

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lena Baca

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4 Duncannon Ct

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lauren Black

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2426 W 10th St

Dallas, TX 75211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
42 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/06/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Obi Chukwumah

6 Contributor address;

City; State; Zip Code

1802 Redcliff Ct

Garland, TX 75043

7 Amount of contribution (\$)

200.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sue Carroll Featherston

Contributor address;

City; State; Zip Code

3012 Purdue Ave

Dallas, TX 75225

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kent Kirkwood

Contributor address;

City; State; Zip Code

300 N. Lamar Blvd

Austin, TX 78726

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ro Krishnan

Contributor address;

City; State; Zip Code

2717 Buttermilk Dr

Arlington, TX 76006

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/06/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Monroe Lacerte

6 Contributor address; City; State; Zip Code

3517 Lexington Drive Dallas, TX 75205

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/06/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Stanley Parson

Contributor address; City; State; Zip Code

3504 Bradford Dr Richardson, TX 75082

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/06/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Janie Pena

Contributor address; City; State; Zip Code

5700 River Highlands Dr McKinney, TX 75070

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/06/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Derick Schaefer

Contributor address; City; State; Zip Code

4855 Allencrest Ln Dallas, TX 75244

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
44 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/06/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Charles R. Sessions

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

3501 Colgate Ave

Dallas, TX 75225

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Winter

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1999 McKinney

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sarah Admani

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

6715 Palo Duro Drive

Irving, TX 75063

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gwen Jackson Crawford

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

7916 Ivory Ln

Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
45 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/08/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Tommy G. Thompson

7 Amount of contribution (\$)

500.00

6 Contributor address; City; State; Zip Code

1313 Manassas Trl Madison, WI 53718

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Vanessa Baker

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

4526 Leland Ave Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Kris Butler

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

623 Aspen Valley Ln Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/10/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jennifer Bilhartz

Amount of contribution (\$)

35.00

Contributor address; City; State; Zip Code

5200 Martel Ave Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
46 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carroll T Beckham

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

11027 Eastview Cir

Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa Scott

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

12239 Grayhawk Blvd

Frisco, TX 75033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rodney Acker

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2200 Ross Avenue

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Calvin Bluiett

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6326 Old Ox Rd

Dallas, TX 75241

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
47 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/12/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lorene Brooks-Smith

6 Contributor address; City; State; Zip Code

2130 North Hill Drive Irving, TX 75038

7 Amount of contribution (\$)
500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Aaron And Robyn Davis

Contributor address; City; State; Zip Code

213 Balboa St Irving, TX 75062

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jon Edmonds

Contributor address; City; State; Zip Code

2323 N Houston St Dallas, TX 75219

Amount of contribution (\$)
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Andrew Harris

Contributor address; City; State; Zip Code

300 N Akard St Dallas, TX 75201

Amount of contribution (\$)
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
48 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/12/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Harold Kumpf

7 Amount of contribution (\$)

34.01

6 Contributor address;

City; State; Zip Code

5012 Victor St

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elissa McGarry

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

301 Circle Dr

Dallas, TX 75224

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chasity Rattler Greene

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1324 Artemus Dr

Lancaster, TX 75134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Homer Smith

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2130 N Hill Dr

Irving, TX 75038

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
49 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/12/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

John Sweet

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

2322 W Lagoon Ct

Mequon, WI 53092

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bonner Allen

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

5847 Palo Pinto Ave.

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dave Copps

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

4556 Alta Vista Ln

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Darthard

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

743 Brick Row Dr

Richardson, TX 75081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
50 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/14/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Detrick Debur

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

5608 Westwood Ln

The Colony, TX 75056

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patience Orogun

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7545 E Northwest Hwy

Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Battle

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6623 Yosemite Ln

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donnell Brundage

Amount of contribution (\$)

40.00

Contributor address;

City; State; Zip Code

3200 Western Bluff Ct

Mansfield, TX 76063

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
51 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/15/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Eliberto Cortez

7 Amount of contribution (\$)

20.00

6 Contributor address;

City; State; Zip Code

131 Sierra Grande St

Red Oak, TX 75154

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Hannah And Stuart Cutshall

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

4501 Highland Dr

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Christopher Davis

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

212 Balsam Grove Ln

DeSoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matt Dover

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

8750 N. Central Expwy

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
52 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/15/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Craig A Edwards

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

2107 Dover Dr

Carrollton, TX 75006

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Fleming

Amount of contribution (\$)

125.00

Contributor address;

City; State; Zip Code

1111 S Main St

Carrollton, TX 75006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ross Frankfurt

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5526 W University Blvd

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Riba-Riba Bin Maneno

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

617 Windward Dr

Murphy, TX 75094

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/15/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Charles ONeal

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code

4811 Dove Creek Way Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/15/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Chukwuka J Onyeibe

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code

12516 Audelia Rd Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/15/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Patti Reed

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code

6024 Timber Creek Ln Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/15/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

William Riley

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code

3856 Antigua Dr Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
54 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/15/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sherlyn Samuel

6 Contributor address;

City; State; Zip Code

2225 Swansee Dr

Dallas, TX 75232

7 Amount of contribution (\$)
50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Shavonne Walker

Contributor address;

City; State; Zip Code

807 Bonnie View Rd

Dallas, TX 75203

Amount of contribution (\$)
20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bill Bigler

Contributor address;

City; State; Zip Code

728 Oneonta St

Shreveport, LA 71106

Amount of contribution (\$)
200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ade Okunubi

Contributor address;

City; State; Zip Code

9232 Chimney Corner Ln

Dallas, TX 75243

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
55 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/18/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Ronald Kirk

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code

6342 Mercedes Ave

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/18/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Mark Malveaux

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

6138 Desco Dr

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/18/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Lauren McKinnon

Amount of contribution (\$)

1000.00

Contributor address; City; State; Zip Code

10559 Silverock Dr

Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/18/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

James Mining

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4006 Southwood W

Colleyville, TX 76034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
56 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/18/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Lyndon Olson

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

5400 Bosque Blvd

Waco, TX 76710

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lauren Black

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2426 W 10th St

Dallas, TX 75211

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Ellis

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

8066 Park Ln

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ahmad Goree

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

831 Crooked Creek Ln

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
57 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/19/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Craig J. Lewis

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

7243 Mirada

Grand Prairie, TX 75054

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Clarisa Lindenmeyer

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

10114 Shadyoak Ln

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Arti Sharma

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

5201 Graybell Dr

Arlington, TX 76018

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ernest B III White

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3808 Kimballdale Dr

Dallas, TX 75233

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Corraina Anthony

7 Amount of contribution (\$)

20.00

6 Contributor address;

City; State; Zip Code

610 Brookside Dr

Cedar Hill, TX 75104

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Or Tracy Babbitt

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6517 Mesa Ridge Ct

Ft Worth, TX 76137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dorothy Cunningham

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

4534 Hedgdon Dr

Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Evan Howard

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3355 Blackburn St

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
59 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brandon Mead

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4039 Cole Ave

Dallas, TX 75204

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rikeen Patel

Amount of contribution (\$)

20.00

Contributor address;

City; State; Zip Code

2752 Gaston Ave

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William M Jr Pinson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1714 Creekhaven Dr

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patricia Reed

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6024 Timber Creek Ln

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
60 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date

03/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ross Williams

6 Contributor address;

City; State; Zip Code

6603 Santa Fe Ave

Dallas, TX 75223

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nick Brooks

Contributor address;

City; State; Zip Code

1931 Market Center Blvd

Dallas, TX 75207

Amount of contribution (\$)

16.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Earnest R Goode

Contributor address;

City; State; Zip Code

P.O. Box 872013

Mesquite, TX 75187

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lalonni Dubose Hagerman

Contributor address;

City; State; Zip Code

1430 Warwick Dr

Lancaster, TX 75134

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
61 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date

03/21/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Roderick Lewis

6 Contributor address;

City; State; Zip Code

2185 Elderoaks Pl

Dallas, TX 75232

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald Patterson

Contributor address;

City; State; Zip Code

P.O. Box 832283

Richardson, TX 75083

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alvin Robinson

Contributor address;

City; State; Zip Code

6805 Hickory Creek

Plano, TX 75023

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anthony W Spells

Contributor address;

City; State; Zip Code

515 Woodhill Ct

Grapevine, TX 76051

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
62 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/21/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jason Thomas Thompson

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

5804 Auburn Dr Fitchburg, WI 53711

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Ben Tubbs

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4720 Meadowview Dr Mesquite, TX 75150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Tony L. Walker

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4219 Cedar Ridge Dr Grand Prairie, TX 75052

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Royce Barry II West

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

1812 Montauk Way Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
63 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/21/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Danielle And Drew Wilborn

6 Contributor address; City; State; Zip Code
123 Biscayne Dr Cedar Hill, TX 75104

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/21/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Dorothy & Billy J. Williams

Contributor address; City; State; Zip Code
617 San Carlos Dr Garland, TX 75043

Amount of contribution (\$)
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Stephen Boyd

Contributor address; City; State; Zip Code
5429 Castlewood Rd Dallas, TX 75229

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Jonathan Ford

Contributor address; City; State; Zip Code
2311 Southwood Dr Dallas, TX 75224

Amount of contribution (\$)
25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
64 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/22/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Terrance Harris

7 Amount of contribution (\$)

10.00

6 Contributor address; City; State; Zip Code

100 SW Memorial Place Albany, OR 97331

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Gwen Jackson Crawford

Amount of contribution (\$)

20.00

Contributor address; City; State; Zip Code

7916 Ivory Ln Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

John Lacerte

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

3711 Lexington Ave Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

P.J. Moton-Poole

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

5967 Fox Hill Ln Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
65 of 67

2 FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 Date
03/23/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Jimmy Swift

6 Contributor address; City; State; Zip Code
5104 Horseshoe Trl Dallas, TX 75209

7 Amount of contribution (\$)
25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/24/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Carol Barger

Contributor address; City; State; Zip Code
6417 Norway Rd Dallas, TX 75230

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Cora Black

Contributor address; City; State; Zip Code
750 Fort Worth Ave Dallas, TX 75208

Amount of contribution (\$)
200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Lori Bradley

Contributor address; City; State; Zip Code
7909 Briar Brook Ct Dallas, TX 75218

Amount of contribution (\$)
35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
66 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date
03/25/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Stephen Cato

7 Amount of contribution (\$)

20.00

6 Contributor address;

City; State; Zip Code

2414 Creekwood Drive

Cedar Hill, TX 75104

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date
03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frances Dean

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1801 N Greenville Ave

Richardson, TX 75081

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kevin D. Grace

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3928 Southwestern Blvd

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lori Hockett

Amount of contribution (\$)

350.00

Contributor address;

City; State; Zip Code

3137 Bryn Mawr Dr

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
67 of 67**2** FILER NAME

Mr Albert Black

3 Filer ID (Ethics Commission Filers)**4** Date

03/25/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Tiffany Dale Hunter

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

2201 Main Street

Dallas, TX 75201

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jimmie And Linda Jenkins

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

5838 Boca Raton Dr

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jon Killen

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2050 Chevella Dr

Dallas, TX 75232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Zenovia Nwosu

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

3541 W. Walnut Hill Lane

Irving, TX 75038

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
1 of 3

2 FILER NAME
Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
03/21/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
ZL and Latricia ZL and Latricia Williams

7 Contributor address; City; State; Zip Code
3102 Oak Lawn Ave Dallas, TX 75219

8 Amount of Contribution \$
525.00

9 In-kind contribution description
Catering

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
03/08/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Georgie Cornelius

Contributor address; City; State; Zip Code
504 Josephine Dallas, TX 75246

Amount of Contribution \$
314.13

In-kind contribution description
Catering

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
2 of 3

2 FILER NAME
Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
03/19/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Nicole Knox

7 Contributor address; City; State; Zip Code
1133 S Madison Ave Dallas, TX 75208

8 Amount of Contribution \$
800.00

9 In-kind contribution description
Catering

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
03/19/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Lauren McKinnon

Contributor address; City; State; Zip Code
10559 Silverock Dallas, TX 75218

Amount of Contribution \$
800.00

In-kind contribution description
Valet Parking

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
3 of 3

2 FILER NAME
Mr Albert Black

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
02/28/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Tre Black

7 Contributor address; City; State; Zip Code
1133 S. Madison Dallas, TX 75208

8 Amount of Contribution \$
500.00

9 In-kind contribution description
Comedy Show

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 01/03/2019		5 Payee name ActBlue			
6 Amount (\$) 908.33		7 Payee address; City; State; Zip Code P.O. Box 441146 West Somerville, MA 02144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/03/2019		Payee name Weithers Kenneth			
Amount (\$) 500.00		Payee address; City; State; Zip Code 4529 Old Pone Drive Plano, TX 75024			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consultant		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 01/04/2019		Payee name NGP Van			
Amount (\$) 2250.00		Payee address; City; State; Zip Code 1445 New York Ave NW Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 01/07/2019		5 Payee name Jones Marvin			
6 Amount (\$) 640.00		7 Payee address; City; State; Zip Code 1637 Big Bend Dr Lewisville, TX 75077			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/07/2019		Payee name Goree Ahmad			
Amount (\$) 2200.00		Payee address; City; State; Zip Code 831 Crooked Creek Ln Desoto, TX 75115			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/07/2019		Payee name Ortega Fabian			
Amount (\$) 2590.00		Payee address; City; State; Zip Code 1133 S Madison Ave Blum, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 01/09/2019	5 Payee name OfficeMax	
6 Amount (\$) 206.96	7 Payee address; City; State; Zip Code 2415 N Haskell Ave Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 01/10/2019	Payee name Ferguson Jessica	
Amount (\$) 190.00	Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 01/11/2019	Payee name Stafford Paul K.	
Amount (\$) 2500.00	Payee address; City; State; Zip Code 1722 Routh St Ste 1500 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 01/11/2019	5 Payee name Ferguson Jessica	
6 Amount (\$) 170.00	7 Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/11/2019	Candidate / Officeholder name Office sought Office held	
Payee name Golden Rule Printing		
Amount (\$) 403.44	Payee address; City; State; Zip Code 5401 Davis Blvd Fort Worth, TX 76180	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/11/2019	Candidate / Officeholder name Office sought Office held	
Payee name United States Post Office		
Amount (\$) 40.00	Payee address; City; State; Zip Code 400 N Ervay St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2019	5 Payee name Cornelius Georgie	
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 504 Josephine St Dallas, TX 75246	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2019	Candidate / Officeholder name Southern Maid Donuts	
Amount (\$) 37.20	Payee address; City; State; Zip Code 655 W Illinois Ave Dallas, TX 75224	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2019	Candidate / Officeholder name Tom Thumb	
Amount (\$) 34.53	Payee address; City; State; Zip Code 315 S Hampton Rd Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Food/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 35	2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)
4 Date 01/15/2019	5 Payee name Edwards & Patterson Signs		
6 Amount (\$) 81.19	7 Payee address; City; State; Zip Code 203 S Belt Line Rd Irving, TX 75060		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 01/16/2019	Payee name Eco Latino Radio		
Amount (\$) 500.00	Payee address; City; State; Zip Code 12900 Preston Rd Dallas, TX 75230		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 01/17/2019	Payee name Jones Marvin		
Amount (\$) 750.00	Payee address; City; State; Zip Code 1637 Big Bend Dr Lewisville, TX 75077		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 01/22/2019		5 Payee name Plaza Car Wash & Lube			
6 Amount (\$) 102.99		7 Payee address; City; State; Zip Code 5220 Lemmon Ave Dallas, TX 75209			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel In District	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/22/2019		Payee name Ortega Fabian			
Amount (\$) 2500.00		Payee address; City; State; Zip Code 1133 S Madison Ave Dallas, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/23/2019		Payee name Dallas County Democratic Party			
Amount (\$) 1250.00		Payee address; City; State; Zip Code 4209 Parry Ave Dallas, TX 75223			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2019	5 Payee name Amazon	
6 Amount (\$) 162.17	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/24/2019	Payee name United States Post Office	
Amount (\$) 125.00	Payee address; City; State; Zip Code 400 N Ervay St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 01/28/2019	Payee name Golden Rule Printing	
Amount (\$) 618.24	Payee address; City; State; Zip Code 5401 Davis Blvd Fort Worth, TX 76180	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2019	5 Payee name Ferguson Jessica	
6 Amount (\$) 160.00	7 Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 01/29/2019	Payee name Amazon	
Amount (\$) 462.31	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 01/29/2019	Payee name Amazon	
Amount (\$) 40.04	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 01/30/2019		5 Payee name Maxey Ethan			
6 Amount (\$) 2032.26		7 Payee address; City; State; Zip Code 1850 London Rd Abington, PA 19001			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 01/31/2019		Payee name Williams Jessica			
Amount (\$) 1290.00		Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 01/31/2019		Payee name Ortega Fabian			
Amount (\$) 2500.00		Payee address; City; State; Zip Code 1133 S Madison Ave Blomberg, TX 75208			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/03/2019	5 Payee name Weithers Kenneth	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 4529 Old Pone Drive Plano, TX 75024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2019	Candidate / Officeholder name Tom Thumb	
Amount (\$) 119.04	Payee address; City; State; Zip Code 315 S Hampton Rd Dallas , TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2019	Candidate / Officeholder name Tom Thumb	
Amount (\$) 183.63	Payee address; City; State; Zip Code 315 S Hampton Rd Dallas , TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2019	5 Payee name Wicks Candace	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 5242 Penridge Lane Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/04/2019	Payee name Goree Ahmad	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 831 Crooked Creek Ln Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/04/2019	Payee name Public Opinion LLC	
Amount (\$) 3500.00	Payee address; City; State; Zip Code 214 N Fayette St Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2019		5 Payee name Corner Bakery			
6 Amount (\$) 290.54		7 Payee address; City; State; Zip Code 301 N Market St Ste 100Dallas, TX 75202			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense/Beverage Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense/Beverage Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/04/2019		Payee name ActBlue			
Amount (\$) 1514.98		Payee address; City; State; Zip Code P.O. Box 441146 West Somerville, MA 02144			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/04/2019		Payee name Ferguson Jessica			
Amount (\$) 130.00		Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2019	5 Payee name Ed Gray & Associates	
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code P.O. Box 591726 San Antonio, TX 78259	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/07/2019	Payee name Gusto	
Amount (\$) 0.38	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/07/2019	Payee name Veracity LLC	
Amount (\$) 580.65	Payee address; City; State; Zip Code 1328 Florida Ave NW Washington, DC 20009	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2019	5 Payee name E. Aaron Cartwright III	
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 1309 B W Abram St Ste 200, Arlington, TX 76013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/07/2019	Payee name Content LLC	
Amount (\$) 17878.76	Payee address; City; State; Zip Code 10877 Wilshire Blvd Ste 1404, Los Angeles, CA 90024	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/07/2019	Payee name Gusto	
Amount (\$) 0.48	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2019	5 Payee name Custom Print DFW	
6 Amount (\$) 170.49	7 Payee address; City; State; Zip Code 806 S Saint Paul St Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/12/2019	Payee name Edwards & Patterson Signs	
Amount (\$) 1350.96	Payee address; City; State; Zip Code 203 S Belt Line Rd Irving, TX 75060	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/14/2019	Payee name Cox Communications	
Amount (\$) 150.00	Payee address; City; State; Zip Code P.O. Box 78071 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/14/2019	5 Payee name Gusto	
6 Amount (\$) 15813.26	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/14/2019	Payee name Cox Communications	
Amount (\$) 167.48	Payee address; City; State; Zip Code P.O. Box 78071 Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02/14/2019	Payee name Gusto	
Amount (\$) 5021.89	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2019	5 Payee name Ferguson Jessica	
6 Amount (\$) 145.00	7 Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/19/2019	Payee name Beads By The Dozen	
Amount (\$) 128.67	Payee address; City; State; Zip Code 333 Edwards Ave New Orleans, LA 70123	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/20/2019	Payee name Walmart	
Amount (\$) 141.87	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2019	5 Payee name Martin Grant	
6 Amount (\$) 10000.00	7 Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/20/2019	Payee name Walmart	
Amount (\$) 70.93	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/21/2019	Payee name Best Buy	
Amount (\$) 52.55	Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2019	5 Payee name Best Buy	
6 Amount (\$) 52.55	7 Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Additional Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional Supplies
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/22/2019	Payee name Best Buy	
Amount (\$) 77.55	Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/22/2019	Payee name Amazon	
Amount (\$) 14.06	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Amazon	
6 Amount (\$) 168.75	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/22/2019	Payee name Amazon	
Amount (\$) 40.04	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 02/22/2019	Payee name Best Buy	
Amount (\$) 27.55	Payee address; City; State; Zip Code 1900 Market Place Blvd Irving, TX 75063	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 22 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019	5 Payee name Gusto	
6 Amount (\$) 5280.80	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/14/2019	Payee name Gusto	
Amount (\$) 16493.14	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/27/2019	Payee name United States Post Office	
Amount (\$) 110.00	Payee address; City; State; Zip Code 400 N Ervay St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019	5 Payee name Harland Clarke Check Ordering	
6 Amount (\$) 37.57	7 Payee address; City; State; Zip Code 15955 La Cantera Pkwy San Antonio, TX 78256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/01/2019	Payee name Cornelius Georgie	
Amount (\$) 2000.00	Payee address; City; State; Zip Code 504 Josephine St Dallas, TX 75246	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/01/2019	Payee name Convergence Targeted Communications	
Amount (\$) 6200.00	Payee address; City; State; Zip Code 1221 Connecticut Ave NW Washington, DC 20036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Communications Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 24 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 03/01/2019		5 Payee name Wicks Candace			
6 Amount (\$) 500.00		7 Payee address; City; State; Zip Code 5242 Penridge Lane Dallas, TX 75241			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/04/2019		Payee name Public Opinion LLC			
Amount (\$) 5000.00		Payee address; City; State; Zip Code 214 N Fayette St Alexandria, VA 22314			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/04/2019		Payee name ActBlue			
Amount (\$) 1304.89		Payee address; City; State; Zip Code P.O. Box 441146 West Somerville, MA 02144			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 25 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2019	5 Payee name Best Buy	
6 Amount (\$) 27.55	7 Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/06/2019	Payee name Best Buy	
Amount (\$) 75.05	Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/06/2019	Payee name Weithers Kenneth	
Amount (\$) 500.00	Payee address; City; State; Zip Code 4529 Old Pone Drive Plano, TX 75024	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 26 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2019	5 Payee name Tractor Supply Co.	
6 Amount (\$) 410.28	7 Payee address; City; State; Zip Code 1740 N Belt Line Rd Mesquite, TX 75149	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/07/2019	Payee name Custom Print DFW	
Amount (\$) 119.08	Payee address; City; State; Zip Code 806 S Saint Paul St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/08/2019	Payee name Goree Ahmad	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 831 Crooked Creek Ln Desoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 27 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2019	5 Payee name OfficeMax	
6 Amount (\$) 248.94	7 Payee address; City; State; Zip Code 2415 N Haskell Ave Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/27/2019	Candidate / Officeholder name Gusto	
Amount (\$) 16493.14	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/14/2019	Candidate / Officeholder name Sprint2Print	
Amount (\$) 3474.66	Payee address; City; State; Zip Code 8748 Clay Rd Ste 300 Houston, TX 77080	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 28 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/14/2019	5 Payee name Gusto	
6 Amount (\$) 5213.30	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/15/2019	Payee name Lewis Becky	
Amount (\$) 55.00	Payee address; City; State; Zip Code 1935 Lanark Dallas, TX 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/15/2019	Payee name EMC Research	
Amount (\$) 21675.00	Payee address; City; State; Zip Code 720 3rd Ave # 110 Seattle, WA 98104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Polling Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 29 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2019	5 Payee name Custom Print DFW	
6 Amount (\$) 54.67	7 Payee address; City; State; Zip Code 806 S Saint Paul St Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/18/2019	Candidate / Officeholder name Theta Alpha Foundation	
Amount (\$) 600.00	Payee address; City; State; Zip Code 2413 Martin Luther King Blvd TX 75215	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm...	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contributions/Donations Made By Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/18/2019	Payee name Amazon	
Amount (\$) 78.25	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 30 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/20/2019	5 Payee name Amazon	
6 Amount (\$) 256.03	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/20/2019	Payee name Amazon	
Amount (\$) 40.04	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/20/2019	Payee name Amazon	
Amount (\$) 35.64	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 31 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Amazon	
6 Amount (\$) 14.06	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/18/2019	Candidate / Officeholder name Edwards & Patterson Signs	
Amount (\$) 1695.55	Payee address; City; State; Zip Code 203 S Belt Line Rd Irving, TX 75060	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/20/2019	Candidate / Officeholder name Social Impact Team	
Amount (\$) 975.00	Payee address; City; State; Zip Code 2300 Clarendon Blvd Arlington, VA 22201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 32 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2019	5 Payee name Cricket Wireless	
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code 2138 Fort Worth Ave Dallas, TX 75211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/11/2019	Candidate / Officeholder name Stafford Paul	
Amount (\$) 2500.00	Payee address; City; State; Zip Code 1722 Routh St Ste 1500 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/10/2019	Candidate / Officeholder name Dallas County	
Amount (\$) 1080.00	Payee address; City; State; Zip Code 1500 Marilla St Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 33 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 01/25/2019		5 Payee name Sprint2Print			
6 Amount (\$) 3474.66		7 Payee address; City; State; Zip Code 8748 Clay Rd Ste 300 Houston, TX 77080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/25/2019		Payee name Interdenominational Ministerial Alliance			
Amount (\$) 3500.00		Payee address; City; State; Zip Code 8350 Forest Ln Dallas, TX 75243			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm...		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/01/2019		Payee name Stephens Susan			
Amount (\$) 2750.00		Payee address; City; State; Zip Code 7327 Boisenberry Ln Dallas, TX 75249			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 34 of 35		2 FILER NAME Mr Albert Black		3 Filer ID (Ethics Commission Filers)	
4 Date 02/01/2019		5 Payee name Nguyen Chris			
6 Amount (\$) 2000.00		7 Payee address; City; State; Zip Code 11408 Lippitt Ave Dallas, TX 75218			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/12/2019		Payee name Parson Raevan			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 3504 Bradford Drive Richardson, TX 75082			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 01/31/2019		Payee name Lewis Becky			
Amount (\$) 1250.00		Payee address; City; State; Zip Code 1935 Lanark Dallas, TX 75203			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 35 of 35	2 FILER NAME Mr Albert Black	3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2019	5 Payee name Williams Romello	
6 Amount (\$) 400.00	7 Payee address; City; State; Zip Code 1133 S Madison Ave Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/13/2019	Payee name Convergence Targeted Communications	
Amount (\$) 1219.50	Payee address; City; State; Zip Code 1221 Connecticut Ave NW Washington, DC 20036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/13/2019	Payee name Content LLC	
Amount (\$) 7000.00	Payee address; City; State; Zip Code 10877 Wilshire Blvd Ste 1404 Los Angeles, CA 90024	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		