

# 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

<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	Mr	Albert			
	NICKNAME	LAST	SUFFIX	Date Received	
		Black			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE
	1133 S. Madison Apt/Suite: B		Dallas TX	75208	
<input type="checkbox"/> Change of Address					
<b>5</b> CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( 214 )	944 1100			
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	Ms	Nicole		Amount \$	
	NICKNAME	LAST	SUFFIX	Date Processed	
		Knox		Date Imaged	
<b>7</b> CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE
(Residence or Business)	3131 McKinney Ave		800	Dallas TX	75204
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( )				
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
<b>10</b> PERIOD COVERED	Month      Day      Year		Month      Day      Year		
	01 / 01 / 2019		THROUGH 03 / 25 / 2019		
<b>11</b> ELECTION	ELECTION DATE		ELECTION TYPE		
	Month      Day      Year		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
	05 / 04 / 2019				
<b>12</b> OFFICE	OFFICE HELD (if any)		<b>13</b> 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](http://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#: \_\_\_\_\_)

Shaunty 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 &amp; 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

**7** Amount of contribution (\$)

1000.00

**6** Contributor address;

City; State; Zip Code

4660 Greenbriar Ct

Rockwall, TX 75032

**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

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

1802 Redcliff Ct

Garland, TX 75043

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Larry Allums

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4125 Buena Vista St

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Doug Lawson

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

1 Blalock Pines Ct

Houston, TX 77024

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

**6** Contributor address; City; State; Zip Code  
4359 Highlander Dr Dallas, TX 75287

**7** Amount of contribution (\$)  
50.00

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

**9** Employer (See Instructions)

Date  
01/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bart Dalton

Contributor address; City; State; Zip Code  
5681 Mallard Trce Frisco, TX 75034

Amount of contribution (\$)  
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Diane Durant

Contributor address; City; State; Zip Code  
3612 Potomac Ave Fort Worth, TX 76107

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/29/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Reginald Gates

Contributor address; City; State; Zip Code  
1357 Bar Harbor Dr Dallas, TX 75232

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:  
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

**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  
01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alphonso Jackson

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1411 Key Blvd

Arlington, VA 22209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Rink

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

6101 Melody Ln

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/30/2019

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)

**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

**7** Amount of contribution (\$)

250.00

**6** Contributor address;

City; State; Zip Code

1000 E Pleasant Run Rd

Cedar Hill, TX 75104

**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

Amount of contribution (\$)

40.00

Contributor address;

City; State; Zip Code

7120 Playa Imperial Ln

Grand Prairie, TX 75054

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Fidel Baca

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

2608 Lambda Ln

Flower Mound, TX 75028

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

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

426 Southport 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:  
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

**7** Amount of contribution (\$)

1000.00

**6** Contributor address;

City; State; Zip Code

2323 Victory Ave

Dallas, TX 75219

**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

## Amount of contribution (\$)

20.00

## Contributor address;

City; State; Zip Code

1331 High Ridge Dr

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

01/31/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Miranda Davis

## Amount of contribution (\$)

10.00

## Contributor address;

City; State; Zip Code

1331 High Ridge Dr

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

01/31/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Monica Davis

## Amount of contribution (\$)

20.00

## Contributor address;

City; State; Zip Code

1425 Thistlewood Dr

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:  
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#: \_\_\_\_\_)

Tywana 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)

**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:  
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)

**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:  
21 of 67

**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  
Zachary S. Thompson

☐ out-of-state PAC (ID#: \_\_\_\_\_)

**6** Contributor address; City; State; Zip Code  
1041 Hampshire Ln Cedar Hill, TX 75104

**7** Amount of contribution (\$)  
100.00

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

**9** Employer (See Instructions)

Date  
02/12/2019

Full name of contributor  
Bernice J. Washington

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code  
4359 Highlander Dr Dallas, TX 75287

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/13/2019

Full name of contributor  
Ivory Barnes

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code  
511 Pecan Leaf Dr Lancaster, TX 75146

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/13/2019

Full name of contributor  
Chris Christian

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code  
7515 Currin Dr Dallas, TX 75230

Amount of contribution (\$)  
2000.00

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:  
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)

**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:  
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:  
33 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#: \_\_\_\_\_)

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)

**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:  
34 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#: \_\_\_\_\_)

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)

**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:  
35 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#: \_\_\_\_\_)

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:  
37 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#: \_\_\_\_\_)

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)

**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:  
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)

**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:  
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

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

**7** Amount of contribution (\$)  
100.00

**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

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

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/02/2019

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

Crystal Ward

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

Amount of contribution (\$)  
20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/03/2019

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

Gary Brock

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

Amount of contribution (\$)  
1000.00

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:  
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

**6** Contributor address;

City; State; Zip Code

3839 McKinney Ave

Dallas, TX 75204

**7** Amount of contribution (\$)

500.00

**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

Contributor address;

City; State; Zip Code

4606 Gilbert Ave

Dallas, TX 75219

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lena Baca

Contributor address;

City; State; Zip Code

4 Duncannon Ct

Dallas, TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lauren Black

Contributor address;

City; State; Zip Code

2426 W 10th St

Dallas, TX 75211

Amount of contribution (\$)

1000.00

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:  
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:  
43 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#: \_\_\_\_\_)

Monroe Lacerte

**7** Amount of contribution (\$)

500.00

**6** Contributor address;

City; State; Zip Code

3517 Lexington Drive

Dallas, TX 75205

**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

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

3504 Bradford Dr

Richardson, TX 75082

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

03/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Janie Pena

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

5700 River Highlands Dr

McKinney, TX 75070

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

03/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Derick Schaefer

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

4855 Allencrest Ln

Dallas, TX 75244

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)

**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:  
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

**6** Contributor address; City; State; Zip Code  
1313 Manassas Trl Madison, WI 53718

**7** Amount of contribution (\$)  
500.00

**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

Contributor address; City; State; Zip Code  
4526 Leland Ave Dallas, TX 75215

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/09/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kris Butler

Contributor address; City; State; Zip Code  
623 Aspen Valley Ln Dallas, TX 75208

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/10/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jennifer Bilhartz

Contributor address; City; State; Zip Code  
5200 Martel Ave Dallas, TX 75206

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:  
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

**6** Contributor address;

City; State; Zip Code

11027 Eastview Cir

Dallas, TX 75230

**7** Amount of contribution (\$)

1000.00

**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

Contributor address;

City; State; Zip Code

12239 Grayhawk Blvd

Frisco, TX 75033

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Rodney Acker

Contributor address;

City; State; Zip Code

2200 Ross Avenue

Dallas, TX 75201

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Calvin Bluiett

Contributor address;

City; State; Zip Code

6326 Old Ox Rd

Dallas, TX 75241

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:  
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

**6** Contributor address;

City; State; Zip Code

5608 Westwood Ln

The Colony, TX 75056

**7** Amount of contribution (\$)

50.00

**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

Contributor address;

City; State; Zip Code

7545 E Northwest Hwy

Dallas, TX 75238

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Battle

Contributor address;

City; State; Zip Code

6623 Yosemite Ln

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Donnell Brundage

Contributor address;

City; State; Zip Code

3200 Western Bluff Ct

Mansfield, TX 76063

Amount of contribution (\$)

40.00

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:  
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

**6** Contributor address;

City; State; Zip Code

2107 Dover Dr

Carrollton, TX 75006

**7** Amount of contribution (\$)  
250.00

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

**9** Employer (See Instructions)

Date  
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Richard Fleming

Contributor address;

City; State; Zip Code

1111 S Main St

Carrollton, TX 75006

Amount of contribution (\$)  
125.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ross Frankfurt

Contributor address;

City; State; Zip Code

5526 W University Blvd

Dallas, TX 75209

Amount of contribution (\$)  
1000.00

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

Contributor address;

City; State; Zip Code

617 Windward Dr

Murphy, TX 75094

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:  
53 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#: \_\_\_\_\_)

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)

**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:  
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

**7** Amount of contribution (\$)

50.00

**6** Contributor address;

City; State; Zip Code

2225 Swansee Dr

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#: \_\_\_\_\_)

Shavonne Walker

## Amount of contribution (\$)

20.00

## Contributor address;

City; State; Zip Code

807 Bonnie View Rd

Dallas, TX 75203

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

03/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bill Bigler

## Amount of contribution (\$)

200.00

## Contributor address;

City; State; Zip Code

728 Oneonta St

Shreveport, LA 71106

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

03/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ade Okunubi

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

9232 Chimney Corner Ln

Dallas, TX 75243

## 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:  
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:  
58 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#: \_\_\_\_\_)

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

**7** Amount of contribution (\$)

250.00

**6** Contributor address;

City; State; Zip Code

6603 Santa Fe Ave

Dallas, TX 75223

**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

## Amount of contribution (\$)

16.00

## Contributor address;

City; State; Zip Code

1931 Market Center Blvd

Dallas, TX 75207

## 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

## Amount of contribution (\$)

200.00

## Contributor address;

City; State; Zip Code

P.O. Box 872013

Mesquite, TX 75187

## 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

## Amount of contribution (\$)

50.00

## Contributor address;

City; State; Zip Code

1430 Warwick Dr

Lancaster, TX 75134

## 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

**7** Amount of contribution (\$)

25.00

**6** Contributor address;

City; State; Zip Code

5104 Horseshoe Trl

Dallas, TX 75209

**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

## 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)

## Date

03/25/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cora Black

## Amount of contribution (\$)

200.00

## Contributor address;

City; State; Zip Code

750 Fort Worth Ave

Dallas, TX 75208

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

03/25/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lori Bradley

## Amount of contribution (\$)

35.00

## Contributor address;

City; State; Zip Code

7909 Briar Brook Ct

Dallas, TX 75218

## 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.

<b>1</b> Total pages Schedule F1: 1 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/03/2019	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) 908.33	<b>7</b> Payee address; City; State; Zip Code P.O. Box 441146 West Somerville, MA 02144	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	<b>(b)</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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> 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.

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

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

# 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.

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

# 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.

<b>1</b> Total pages Schedule F1: 5 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/14/2019	<b>5</b> Payee name Cornelius Georgie	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 504 Josephine St Dallas, TX 75246	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</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
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

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

<b>1</b> Total pages Schedule F1: 7 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 01/22/2019		<b>5</b> Payee name Plaza Car Wash & Lube			
<b>6</b> Amount (\$) 102.99		<b>7</b> Payee address; City; State; Zip Code 5220 Lemmon Ave Dallas, TX 75209			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Travel In District		<b>(b)</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	
<b>9</b> 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			
<b>PURPOSE OF EXPENDITURE</b>		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			
<b>PURPOSE OF EXPENDITURE</b>		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	

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.

<b>1</b> Total pages Schedule F1: 8 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 01/24/2019		<b>5</b> Payee name Amazon			
<b>6</b> Amount (\$) 162.17		<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		<b>(b)</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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
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			
<b>PURPOSE OF EXPENDITURE</b>		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	
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			
<b>PURPOSE OF EXPENDITURE</b>		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		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.

<b>1</b> Total pages Schedule F1: 9 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/25/2019	<b>5</b> Payee name Ferguson Jessica	
<b>6</b> Amount (\$) 160.00	<b>7</b> Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</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
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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		

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.

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

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

<b>1</b> Total pages Schedule F1: 12 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/01/2019	<b>5</b> Payee name Wicks Candace	
<b>6</b> Amount (\$) 500.00	<b>7</b> Payee address; City; State; Zip Code 5242 Penridge Lane Dallas, TX 75241	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 02/04/2019	Payee name Goree Ahmad	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 831 Crooked Creek Ln Desoto, TX 75115	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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.

<b>1</b> Total pages Schedule F1: 13 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 03/05/2019		<b>5</b> Payee name Corner Bakery			
<b>6</b> Amount (\$) 290.54		<b>7</b> Payee address; City; State; Zip Code 301 N Market St Ste 100Dallas, TX 75202			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Food/Beverage Expense/Beverage Expense		<b>(b)</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	
<b>9</b> 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			
<b>PURPOSE OF EXPENDITURE</b>		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			
<b>PURPOSE OF EXPENDITURE</b>		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	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# 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  <b>PURPOSE OF EXPENDITURE</b>		(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 02/07/2019		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	
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	

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.

<b>1</b> Total pages Schedule F1: 15 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 02/07/2019		<b>5</b> Payee name E. Aaron Cartwright III			
<b>6</b> Amount (\$) 600.00		<b>7</b> Payee address; City; State; Zip Code 1309 B W Abram St Ste 200, Arlington, TX 76013			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense		<b>(b)</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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
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			
<b>PURPOSE OF EXPENDITURE</b>		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	
Date 02/07/2019		Payee name Gusto			
Amount (\$) 0.48		Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107			
<b>PURPOSE OF EXPENDITURE</b>		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.

<b>1</b> Total pages Schedule F1: 16 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/08/2019	<b>5</b> Payee name Custom Print DFW	
<b>6</b> Amount (\$) 170.49	<b>7</b> Payee address; City; State; Zip Code 806 S Saint Paul St Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Printing Expense	<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
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	
<b>PURPOSE OF EXPENDITURE</b>	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 Cox Communications	
Amount (\$) 150.00	Payee address; City; State; Zip Code P.O. Box 78071 Phoenix, AZ 85062	
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 17 of 35	<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/14/2019	<b>5</b> Payee name Gusto		
<b>6</b> Amount (\$) 15813.26	<b>7</b> Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	<b>(b)</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	
<b>9</b> 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		
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>PURPOSE OF EXPENDITURE</b>	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.

<b>1</b> Total pages Schedule F1: 18 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/19/2019	<b>5</b> Payee name Ferguson Jessica	
<b>6</b> Amount (\$) 145.00	<b>7</b> Payee address; City; State; Zip Code 1709 White Falls Drive Desoto, TX 75115	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 19 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/20/2019	<b>5</b> Payee name Martin Grant	
<b>6</b> Amount (\$) 10000.00	<b>7</b> Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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 02/21/2019	Payee name Best Buy	
Amount (\$) 52.55	Payee address; City; State; Zip Code 1900 Market Place Blvd Irving, TX 75063	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 20 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/21/2019	<b>5</b> Payee name Best Buy	
<b>6</b> Amount (\$) 52.55	<b>7</b> Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Additional Supplies	<b>(b)</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 02/22/2019	Payee name Best Buy	
Amount (\$) 77.55	Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 02/22/2019	Payee name Amazon	
Amount (\$) 14.06	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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.

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

<b>1</b> Total pages Schedule F1: 22 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/27/2019	<b>5</b> Payee name Gusto	
<b>6</b> Amount (\$) 5280.80	<b>7</b> Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	<b>(b)</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
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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.

<b>1</b> Total pages Schedule F1: 23 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 02/27/2019	<b>5</b> Payee name Harland Clarke Check Ordering	
<b>6</b> Amount (\$) 37.57	<b>7</b> Payee address; City; State; Zip Code 15955 La Cantera Pkwy San Antonio, TX 78256	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Printing Expense	<b>(b)</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 03/01/2019	Payee name Cornelius Georgie	
Amount (\$) 2000.00	Payee address; City; State; Zip Code 504 Josephine St Dallas, TX 75246	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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.

<b>1</b> Total pages Schedule F1: 24 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 03/01/2019		<b>5</b> Payee name Wicks Candace			
<b>6</b> Amount (\$) 500.00		<b>7</b> Payee address; City; State; Zip Code 5242 Penridge Lane Dallas, TX 75241			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense		<b>(b)</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	
<b>9</b> 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			
<b>PURPOSE OF EXPENDITURE</b>		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			
<b>PURPOSE OF EXPENDITURE</b>		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	

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.

<b>1</b> Total pages Schedule F1: 25 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/06/2019	<b>5</b> Payee name Best Buy	
<b>6</b> Amount (\$) 27.55	<b>7</b> Payee address; City; State; Zip Code 1900 Market Place BlvdIrving, TX 75063	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	<b>(b)</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
	<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 26 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/07/2019	<b>5</b> Payee name Tractor Supply Co.	
<b>6</b> Amount (\$) 410.28	<b>7</b> Payee address; City; State; Zip Code 1740 N Belt Line Rd Mesquite, TX 75149	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Event Expense	<b>(b)</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </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.

<b>1</b> Total pages Schedule F1: 27 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/12/2019	<b>5</b> Payee name OfficeMax	
<b>6</b> Amount (\$) 248.94	<b>7</b> Payee address; City; State; Zip Code 2415 N Haskell Ave Dallas, TX 75204	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	<b>(b)</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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 02/27/2019	Payee name Gusto	
Amount (\$) 16493.14	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/14/2019	Payee name Sprint2Print	
Amount (\$) 3474.66	Payee address; City; State; Zip Code 8748 Clay Rd Ste 300 Houston, TX 77080	
<b>PURPOSE OF EXPENDITURE</b>	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
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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  <b>PURPOSE OF EXPENDITURE</b>		(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	
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	
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	

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  <b>PURPOSE OF EXPENDITURE</b>		(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	
Date 03/18/2019		Payee 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		Candidate / Officeholder name		Office sought	
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		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.

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

<b>1</b> Total pages Schedule F1: 31 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/22/2019	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) 14.06	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Event Expense	<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 03/18/2019	Payee name Edwards & Patterson Signs	
Amount (\$) 1695.55	Payee address; City; State; Zip Code 203 S Belt Line Rd Irving, TX 75060	
<b>PURPOSE OF EXPENDITURE</b>	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 03/20/2019	Payee name Social Impact Team	
Amount (\$) 975.00	Payee address; City; State; Zip Code 2300 Clarendon Blvd Arlington, VA 22201	
<b>PURPOSE OF EXPENDITURE</b>	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		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		



# 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.

<b>1</b> Total pages Schedule F1: 32 of 35	<b>2</b> FILER NAME Mr Albert Black	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/25/2019	<b>5</b> Payee name Cricket Wireless	
<b>6</b> Amount (\$) 110.00	<b>7</b> Payee address; City; State; Zip Code 2138 Fort Worth Ave Dallas, TX 75211	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense	<b>(b)</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
	<b>9</b> 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	
Amount (\$) 2500.00	Payee address; City; State; Zip Code 1722 Routh St Ste 1500 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	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 Candidate / Officeholder name Office sought Office held	
Date 01/10/2019	Payee name Dallas County	
Amount (\$) 1080.00	Payee address; City; State; Zip Code 1500 Marilla St Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 33 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 01/25/2019		<b>5</b> Payee name Sprint2Print			
<b>6</b> Amount (\$) 3474.66		<b>7</b> Payee address; City; State; Zip Code 8748 Clay Rd Ste 300 Houston, TX 77080			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense		<b>(b)</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	
<b>9</b> 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			
<b>PURPOSE OF EXPENDITURE</b>		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			
<b>PURPOSE OF EXPENDITURE</b>		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.

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

<b>1</b> Total pages Schedule F1: 35 of 35		<b>2</b> FILER NAME Mr Albert Black		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 03/19/2019		<b>5</b> Payee name Williams Romello			
<b>6</b> Amount (\$) 400.00		<b>7</b> Payee address; City; State; Zip Code 1133 S Madison Ave Dallas, TX 75208			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense		<b>(b)</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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
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			
<b>PURPOSE OF EXPENDITURE</b>		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 03/13/2019		Payee name Content LLC			
Amount (\$) 7000.00		Payee address; City; State; Zip Code 10877 Wilshire Blvd Ste 1404 Los Angeles, CA 90024			
<b>PURPOSE OF EXPENDITURE</b>		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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED