

# 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:

19

**3** CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Mr Adam  
NICKNAME LAST SUFFIX  
Bazaldua

**OFFICE USE ONLY**

Date Received

**4** CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
00 Dallas TX 75357  
PO Box: 571823

☐ Change of Address

**5** CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 214 ) 597 4180

Date Hand-delivered or Date Postmarked

**6** CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Mrs Rhonda  
NICKNAME LAST SUFFIX  
Devan

Receipt #

Amount \$

Date Processed

Date Imaged

**7** CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
160 Hillside Swannanoa NC 28778

(Residence or Business)

**8** CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 828 ) 674 0805

**9** REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final Report (Attach C/OH - FR)

**10** PERIOD  
COVERED

Month Day Year Month Day Year  
01 / 10 / 2019 THROUGH 03 / 25 / 2019

**11** ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☐ Other  
05 / 04 / 2019 ☒ General ☐ Special  
Description

**12** OFFICE

OFFICE HELD (if any)

**13** OFFICE SOUGHT (if known)  
Council District 7

**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

<b>19</b> FILER NAME Mr Adam Bazaldua		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,873.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 4,725.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,130.05
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 4,725.00
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 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
02/22/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alisa Tiona

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

100.00

**6** Contributor address;

City; State; Zip Code

11404 bertram

Jonestown, TX 78645

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

**9** Employer (See Instructions)

Date

01/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alison Watts

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1137 Castlewood

DeSoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Barry Jacobs

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

6725 Bob O Link

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brooke Mayer

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

6036 Belmont

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:  
2 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
02/12/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cannon Flowers

**6** Contributor address;

City; State; Zip Code

3809 PARRY

Dallas, TX 75226

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

Charles Bassett

Contributor address;

City; State; Zip Code

2854 VACHERIE

Dallas, TX 75227

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Billings

Contributor address;

City; State; Zip Code

14841 Dallas Parkway

Dallas, TX 75254

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

Daniela Billings

Contributor address;

City; State; Zip Code

8421 BIRCH

Dallas, TX 75217

Amount of contribution (\$)

75.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
3 of 11**2** FILER NAME

Mr Adam Bazaldua

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

02/15/2019

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

Eileen Moore

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

100.00

**6** Contributor address;

City; State; Zip Code

8816 SWEETWATER

Dallas, TX 75227

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

## Date

03/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Eric Johnson

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

3525 Turtle Creek

Dallas, TX 75219

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

01/10/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Faisal Lalani

## Amount of contribution (\$)

101.00

## Contributor address;

City; State; Zip Code

5527 Matalee

Dallas, TX 75206

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

03/18/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Falvio Pina

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

1777 N Record

Dallas, TX 75203

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
4 of 11**2** FILER NAME

Mr Adam Bazaldua

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

02/06/2019

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

Grace Dennis

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

100.00

**6** Contributor address;

City; State; Zip Code

P.O. Box 870057

Dallas, TX 75187

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

## Date

01/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Greta Stogner

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

P.O. Box 870057

Dallas, TX 75187

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

01/31/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Janice Emery

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

160 Hillside

Swannanoa, NC 28778

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

03/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jessee Moreno

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

132 N Peak

Dallas, TX 75226

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 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

01/21/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Feisthamel

**6** Contributor address;

City; State; Zip Code

621 Straus

Cedar Hill, TX 75104

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

500.00

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

**9** Employer (See Instructions)

Date

03/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joseph Groves

Contributor address;

City; State; Zip Code

1777 N Record

Dallas, TX 75203

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Karen Bazaldua

Contributor address;

City; State; Zip Code

1649 Plum Suite #205

Midlothian, TX 76065

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kelly Graham

Contributor address;

City; State; Zip Code

1200 Main

Dallas, TX 75202

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
6 of 11**2** FILER NAME

Mr Adam Bazaldua

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

02/22/2019

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

Kelly Harrell

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

175.00

**6** Contributor address;

City; State; Zip Code

5807 Westmont

Austin, TX 78731

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

## Date

02/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kim Boyce

## Amount of contribution (\$)

82.00

## Contributor address;

City; State; Zip Code

6016 Oram

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

01/25/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lisa Saucedo

## Amount of contribution (\$)

50.00

## Contributor address;

City; State; Zip Code

3427 Maybeth

Dallas, TX 75212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

02/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lorie Yeoham

## Amount of contribution (\$)

300.00

## Contributor address;

City; State; Zip Code

6333 Forest Highlands

Ft Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
7 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

02/18/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lynn Davenport

**6** Contributor address;

City; State; Zip Code

9627 Windy Hill

Dallas, TX 75238

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

50.00

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

**9** Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Melton

Contributor address;

City; State; Zip Code

5519 Reiger

Dallas, TX 75214

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marla Watson

Contributor address;

City; State; Zip Code

2600 Cinnamon

Euless, TX 75039

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Matthew Headley

Contributor address;

City; State; Zip Code

9214 SWEETWATER

Dallas, TX 75227

Amount of contribution (\$)

65.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
8 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

01/22/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Melissa Reynolds

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

50.00

**6** Contributor address;

City; State; Zip Code

713 Driftwood

Denton, TX 76209

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

**9** Employer (See Instructions)

Date

03/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mike McCoy

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

901 griffitt

Leonard, TX 75452

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Miriam Rodriguez

Amount of contribution (\$)

65.00

Contributor address;

City; State; Zip Code

3009 DORRINGTON

Dallas, TX 75227

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

New American PAC

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

400 S Zang

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:  
9 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
01/31/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Pam Bradford

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

210.00

**6** Contributor address;

City; State; Zip Code

1333 Windingbrook

DeSoto, TX 75115

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

**9** Employer (See Instructions)

Date  
01/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ravi Sinha

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1811 Euclid

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Watts

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

1137 Castlewood

DeSoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sandra Lozano

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1452 Windingbrook

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:  
10 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
03/08/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sara Martinez

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

100.00

**6** Contributor address;

City; State; Zip Code

4227 Blackheath

Dallas, TX 75227

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

**9** Employer (See Instructions)

Date  
03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Steve Atkinson

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2925 Country Place

Carrollton, TX 75006

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Teresa Gubbins

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3347 San Marcus

Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Whitney Charles

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

P.O. Box 342469

Austin, TX 78734

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
11 of 11

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
02/25/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Stienmann

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

100.00

**6** Contributor address;

City; State; Zip Code

2835 Coteau Way

Dallas, TX 75227

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

**9** Employer (See Instructions)

Date  
03/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jose Rivas

Amount of contribution (\$)

125.00

Contributor address;

City; State; Zip Code

6145 PARKDALE

Dallas, TX 75227

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
03/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wilson Chu

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2501 Harwood

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

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.**

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 4725.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: \_\_\_\_\_ )

9 Loan Amount (\$)

6 Is lender  
a financial  
Institution?

Y N

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ none

15 Check if personal funds were deposited into political  
account (See Instructions)

☐

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#: \_\_\_\_\_ )

Loan Amount (\$)

Is lender  
a financial  
Institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political  
account (See Instructions)

☐

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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 3	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/28/2019	<b>5</b> Payee name Ed Gray Ass	
<b>6</b> Amount (\$) 150.00	<b>7</b> Payee address; City; State; Zip Code 2225 E Randol Mill Rd Suite 427, TX 76011	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Comm...	<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  Donation
	<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 02/06/2019	Payee name Go Daddy	
Amount (\$) 127.79	Payee address; City; State; Zip Code 14455 N Hayden Rd Suite 200, AZ 85260	
<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
	<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 02/07/2019	Payee name Office Depot	
Amount (\$) 138.22	Payee address; City; State; Zip Code 6600 N Military Trl Boca Raton, FL 33496	
<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 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>	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2 of 3		<b>2</b> FILER NAME Mr Adam Bazaldua		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 03/18/2019		<b>5</b> Payee name Craft & Growler			
<b>6</b> Amount (\$) 113.00		<b>7</b> Payee address; City; State; Zip Code 3601 Parry Ave Dallas, TX 75226			
<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  Food	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/19/2019		Payee name Michelle Embler			
Amount (\$) 1300.00		Payee address; City; State; Zip Code 1200 Main Street Suite 200 Dallas, TX 75201			
<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  Staff Wages	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/20/2019		Payee name Fundly			
Amount (\$) 182.39		Payee address; City; State; Zip Code 2390 El Camino Real Palo Alto, CA 94306			
<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  Service Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3 of 3	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/20/2019	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) 118.65	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees	<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  Service Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: 1 of 1	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 03/07/2019	<b>5</b> Payee name Adam Bazaldua N/A	
<b>6</b> Amount (\$) 4725.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 6926 Belteau Dallas, TX 75227	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<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 Expenses
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	<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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	<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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
<input type="checkbox"/> Reimbursement from political contributions intended	Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	<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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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