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 file	d:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	MI	OFFICE U	USE ONLY
NAME	Ms Regina	Т	Date Received	
	NICKNAME LAST	SUFFIX		
	Montoya			
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 8499 Greenville Ave Apt/Suite: 205	CITY; STATE; ZIP CODE Dallas TX 75231		
Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt #	Amount \$
TREASURER NAME	Mr Jonathan		Date Processed	
- · · · · · · · · · · · · · · · · · · ·	NICKNAME LAST	SUFFIX		
	Thalheimer		Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT	/ SUITE #; CITY; STATE;	ZIP CODE	
TREASURER ADDRESS	2501 N Harwood St 1800	Dallas TX 75201		
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15 X 30th day befor	re election Runoff	15th day after treasurer app (Officeholder	pointment
	July 15 8th day before	election Exceeded \$500 limit		(Attach C/OH - FR)
10 PERIOD	Month Day Year	Month	Day Year	
COVERED	01 / 01 / 2019	THROUGH 03 /	25 / 2019)
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Prima			
	05 / 04 / 2019 X Gener	Description ral Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Mayor		
	GO TO	O PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME				15 Filer ID (Ethic	s Commission Filers)	
Ms Regina T Montoy	a					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TRE	EASURER NAME			
Additional Pages						
		COMMITTEE CAMPAIGN TR	REASURER ADDRESS			
17 CONTRIBUTION TOTALS			NS OF \$50 OR LESS (OTHER TH EES OF LOANS), UNLESS ITEMI		42.00	
	_	POLITICAL CONTRIBUT	TIONS , OR GUARANTEES OF LOANS)	\$ 33	2382.63	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 15	80.00		
	4. TOTAL POLITICAL EXPENDITURES \$ 342753.62				2753.62	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 151427.00				1427.00	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF AL AY OF THE REPORTING P	LL OUTSTANDING LOANS AS OF ERIOD	THE \$ 15	1000.00	
18 AFFIDAVIT		t	I swear, or affirm, under penalty of true and correct and includes all inf under Title 15, Election Code.			
			ELECTRONICALLY	CERTIFIED	*	
		-	Signature of Car	didate or Office	nolder	
AFFIX NOTARY STAM	P/SEALABOVE					
Sworn to and subsc	ribed before me. I	by the said Ms Regina	T Montoya	, this th	e 4th	
			s my hand and seal of office			
Signature of officer a	dministering oath	Printed name of o	officer administering oath	Title of offic	er administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	19 FILER NAME Ms Regina T Montoya 20 Filer ID (Ethics Com			
21		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 327,624.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 3,316.63
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			
4.		\$ 50,000.00		
5.		\$ 341,173.60		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7.		\$ 0.00		
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 0.00
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00

SCHEDULE A1

PAC (ID#:)	Total pages Schedule A1: 1 of 126 Filer ID (Ethics Commission Filers) Amount of contribution (\$)
PAC (ID#:)	
PAC (ID#:)	7 Amount of contribution (\$)
PAC (ID#:)	7 Amount of contribution (\$)
	2500.00
ate; Zip Code	
as, TX 75204	
9 Employer (See Instruc	ztions)
Self Employed	
PAC (ID#:)	Amount of contribution (\$)
	1000.00
ate; Zip Code	
on, MA 02108	
Employer (See Instruc Not Employed	tions)
PAC (ID#:)	Amount of contribution (\$)
	1000.00
ate; Zip Code t Louis, MO 63124	
Principal occupation / Job title (See Instructions) CEO Employer (See Instructions) Aboussie and Asso	
PAC (ID#:)	Amount of contribution (\$)
	250.00
ate; Zip Code as, TX 75208	
Employer (See Instruc	l ctions)
	Self Employed PAC (ID#:) ate; Zip Code on, MA 02108 Employer (See Instruct Not Employed PAC (ID#:) ate; Zip Code t Louis, MO 63124 Employer (See Instruct Aboussie and Associate) PAC (ID#:) ate; Zip Code as, TX 75208

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 2 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor ut-of-state PAC (I	D#:)	7 Amount of contribution (\$)	
03/07/2019	Amador Dean Aguillen		1000.00	
03/07/2017	6 Contributor address; City; State;	Zip Code	1000.00	
	P.O. Box 15506 Washing	ton, DC 20003		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Senior Vice Pr	esident	Ogilvy Government	Relations	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
02/26/2019	Sara Albert		500.00	
	Contributor address; City; State;	Zip Code		
	6510 Lyndon B Johnson Fwy Dallas, T	TX 75240		
Principal occup Consultant	ation / Job title (See Instructions)	Employer (See Instructi Self Employed	ons)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
01/11/2019	Aldous Walker LLP		2500.00	
Contributor address; City; State; Zip Code 2311 Cedar Springs Rd Suite 200 Dallas, TX 75201				
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date 03/10/2019	Full name of contributor		Amount of contribution (\$) 1000.00	
	8210 Crestwood Heights Dr Suite 73 McLean,			
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instructi Freddie Mac	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 3 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/24/2019	Roselind E Aranza		2000.00
	6 Contributor address; City; State;	Zip Code	
	3445 University Blvd Dallas, 7	TX 75205	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Not Employed		Not Employed	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Roselind E Aranza		3000.00
03/23/2019	Contributor address; City; State;		3000.00
	3445 University Blvd Dallas,	TX 75205	
Principal occup Not Employed	ation / Job title (See Instructions)	Employer (See Instructi Not Employed	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/13/2019 VIVIENNE ARMSTRONG 50.00			
	Contributor address; City; State; 6156 BERWYN LN DALLA	Zip Code AS, TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/22/2019	VIVIENNE ARMSTRONG		100.00
	Contributor address; City; State; 6156 BERWYN LN DALLA		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 4 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/23/2019	Cecilia A Arredondo		75.00
	6 Contributor address; City; State;	Zip Code	
	5849 Sandhurst Ln Suite C Dallas, 7	TX 75206	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/23/2019	Rebecca L Arredondo		75.00
	Contributor address; City; State;	Zip Code	
	1907 Heather Way Richarson	on, TX 75081	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/22/2019	Kim J Askew		500.00
	Contributor address; City; State; 3710 Holland Ave Suite 6 Dallas, 7	Zip Code TX 75219	
Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) K&L Gates, LLP		Employer (See Instruct K&L Gates, LLP	ions)
Date	Full name of contributor	ID#·)	Amount of contribution (\$)
02/27/2019	Steve Atkinson	, ,	1000.00
	-	Zip Code	
Principal occup Realtor	pation / Job title (See Instructions)	Employer (See Instruct Ebby Halliday Corp	ions)

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SCHEDULE A1

			1 Total names Cabadula A1.
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/24/2019	Atousa Bahadori		1000.00
	6 Contributor address; City; State;	Zip Code	
	905 Custer Rd Richardson Richarso	on, TX 75080	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Physician		Injury Clinic of Dal	llas
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/25/2019	Shannon Bailey		100.00
	Contributor address; City; State;		
	1350 E Arapaho Rd Suite 126 Richarso	on, TX 75081	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/05/2019	Angeline Bain		100.00
00, 00, 2015	Contributor address; City; State;	Zip Code	100.00
	4242 Lomo Alto Dr Suite E24 Dallas, 7	TX 75219	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/22/2019	Celina Barajas	,	250.00
	Contributor address; City; State; 3111 Bill Harrod St Dallas,		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to	o complete this	form.	1 Total pages Schedule A1: 6 of 126
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
02/07/2019	Diane Barlow			1000.00
	6 Contributor address;	City; State	; Zip Code	
	8931 Devonshire Dr	Dallas,	TX 75209	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			tions)	
Retired			Retired	
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
01/30/2019	Peter M Barrett			1000.00
01/30/2019	Contributor address;		; Zip Code	1000.00
	3206 Cornell Ave	Dallas,	TX 75205	
Principal occup Attorney	pation / Job title (See Instructions)		Employer (See Instruction Self-employed	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Susie Bauer			100.00
	Contributor address; 4421 Wildwood Rd	City; State Dallas,	; Zip Code TX 75209	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/08/2019	Michael Becker	_	,	100.00
	Contributor address; 23 Ryddington Pl		e; Zip Code TX 75230	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

e Benners butor address; City; Waneta Dr title (See Instructions) ame of contributor ut-of-	state PAC (ID#:) State; Zip Code Dallas, TX 75209 9 Employer (See Instruction FedEx Office	
e Benners Dutor address; City; Waneta Dr Dititle (See Instructions) Diame of contributor	State; Zip Code Dallas, TX 75209 9 Employer (See Instruction FedEx Office	7 Amount of contribution (\$) 500.00
e Benners Dutor address; City; Waneta Dr Dititle (See Instructions) Diame of contributor	State; Zip Code Dallas, TX 75209 9 Employer (See Instruction FedEx Office	500.00 ctions)
e Benners Dutor address; City; Waneta Dr Dititle (See Instructions) Diame of contributor	State; Zip Code Dallas, TX 75209 9 Employer (See Instruction FedEx Office	500.00 ctions)
outor address; City; Waneta Dr o title (See Instructions) ume of contributor ut-of-	Dallas, TX 75209 9 Employer (See Instruction FedEx Office	ctions)
Waneta Dr o title (See Instructions) ame of contributor ut-of- nel Berrelez	Dallas, TX 75209 9 Employer (See Instruction FedEx Office	ctions)
o title (See Instructions) ume of contributor ut-of- nel Berrelez	9 Employer (See Instruction FedEx Office	
ame of contributor out-of-	FedEx Office	
iel Berrelez		
iel Berrelez	state PAC (ID#:)	
		Amount of contribution (\$)
		150.00
outor address; City;	State; Zip Code	
Blackwood Dr	Dallas, TX 75231	
title (See Instructions)	Employer (See Instruc	 ctions)
me of contributor	state PAC (ID#:)	Amount of contribution (\$)
		500.00
	State: Zin Code	300.00
•	San Antonio, TX 78201	
title (See Instructions)	Employer (See Instruc Retired	ctions)
me of contributor out-of-	state PAC (ID#:)	Amount of contribution (\$)
-		50.00
outor address; City;	State; Zip Code	
title (See Instructions)	Employer (See Instruc	ctions)
1	a A Berriozabal butor address; City; W Russell Pl title (See Instructions) ame of contributor t Berryman butor address; City;	anne of contributor

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SCHEDULE A1

The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1: 8 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PA	C (ID#:)	7 Amount of contribution (\$)
03/25/2019 Brent Berryman			25.00
	6 Contributor address; City; State	e; Zip Code	
	3324 Spruce Ln Grape	evine, TX 76051	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	.C (ID#:)	Amount of contribution (\$)
02/27/2019	Kenneth Betts		250.00
	Contributor address; City; State	e; Zip Code	
	3413 Cornell Ave Dallas	s, TX 75205	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			tions)
Date	Full name of contributor	.C (ID#:)	Amount of contribution (\$)
03/19/2019	Kenneth Betts		100.00
Contributor address; City; State; Zip Code 3413 Cornell Ave Dallas, TX 75205			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PA	.C (ID#:)	Amount of contribution (\$)
03/15/2019	Shanali N Bhagat		1000.00
	Contributor address; City; State	and Village, TX 75077	
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instruct Capital Alliance Co	tions) orporation

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 9 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
02/16/2019	Shaunna Black 6 Contributor address; City; State;		1000.00
	, , , , ,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Consultant		ShaunnaBlack Inc	<i>,</i>
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/24/2019	Rolando Blackman		1000.00
	Contributor address; City; State;	Zip Code	
	2649 Peavy Rd Dallas, T	TX 75228	
	yer Development	Employer (See Instructi Dallas Mavericks	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/22/2019	Charles W Blau		250.00
	Contributor address; City; State; 4636 Edmondson Ave Dallas, T	Zip Code "X 75209	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/22/2019	Patricia A Blau		250.00
	Contributor address; City; State; 4636 Edmondson Ave Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 10 of 126				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PA	7 Amount of contribution (\$)		
01/14/2019 Steven R Block			2000.00	
	6 Contributor address; City; State	e; Zip Code		
	7270 Turtle Creek Blvd Dallas	s, TX 75225		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
Attorney		Block Garden & M	cNeill, LLP	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)	
03/19/2019	Steven R Block		1000.00	
03/17/2017	Contributor address; City; Stat	e; Zip Code	1000.00	
		s, TX 75225		
Principal occupation / Job title (See Instructions) Employer (See Instruc		tions)		
Attorney		Block Garden & M	cNeill, LLP	
Date	Full name of contributor out-of-state_PA	C (ID#:)	Amount of contribution (\$)	
03/05/2019	Michele Bobadilla		250.00	
	Contributor address; City; State	e; Zip Code		
	2835 Tranquilo Grand	Prairie, TX 75054		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)	
03/15/2019	Molly Bogen	,	75.00	
		e; Zip Code s, TX 75230		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntova		The 1D (Luics Commission Fliers)
4 Date		D#:)	7 Amount of contribution (\$)
03/07/2019	Charles Boortz		300.00
03/07/2017	6 Contributor address; City; State;	Zip Code	300.00
	6417 Vickery Blvd Dallas, T	X 75214	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/28/2019	Samuel Boyd		300.00
	Contributor address; City; State;		
	3728 Binkley Ave Dallas, T	X 75205	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/14/2019	Jeffrey Bragalone		500.00
	Contributor address; City; State; 6712 Avalon Ave Dallas, T		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instruction Bragalone Conroy Po	nns)
Date 01/29/2019	Full name of contributor	D#:)	Amount of contribution (\$) 500.00
	Contributor address; City; State; 8 Hallshire Ct Dallas, T	I	
Principal occur Retired	pation / Job title (See Instructions)	Employer (See Instruction Retired	ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 12 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of contribution (\$)
03/07/2019	Debbie Branson	1000.00	
	6 Contributor address; City; State;	Zip Code	
	6920 Turtle Creek Blvd Dallas, T	X 75205	
8 Principal occu	pation / Job title (See Instructions)	1 , (
Attorney		Law Offices of Fran	nk L. Branson
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/31/2019	Alberto Bravo		250.00
	Contributor address; City; State;		
	1155 Timplemore Dr Dallas, T	X 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/19/2019	Monica Bravo		500.00
	Contributor address; City; State; 1155 Timplemore Dr Dallas, T		
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instructi Lira Bravo Law	ions)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
03/25/2019	Eileen Brennan		100.00
	Contributor address; City; State; 6120 GEORGIAN Ct Dallas, T	I	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 13 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/31/2019	Bill Brister		100.00
	6 Contributor address; City; State;	Zip Code	
	3111 Bryan St Dallas, T	ΓX 75204	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	Lottye Brodsky-Lyle		100.00
03/23/2019	Contributor address; City; State;	Zip Code	100.00
	34 Masland Cir Dallas, T	ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/17/2019	Gloria Brown		250.00
	Contributor address; City; State; 289 Elk Run Cv Blanco,	Zip Code TX 78606	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/20/2019	Gloria Brown	, "	100.00
	Contributor address; City; State;	Zip Code ΓX 75252	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 14 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
03/25/2019	Jennifer Brown		1000.00
	6 Contributor address; City; State	; Zip Code	
	2016 Buchanan St San Fra	ancisco, CA 94115	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Hall Wines		tions)	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
03/22/2019	Sara Brown		100.00
	Contributor address; City; State		
	11002 Creekmere Dr Dallas,	TX 75218	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		tions)	
Date	Full name of contributor	G (ID#:)	Amount of contribution (\$)
01/16/2019	Johnathan Brownlee		100.00
Contributor address; City; State; Zip Code 16826 Thomas Chapel Dr Omaha, NE 75248			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 03/07/2019	Full name of contributor	C (ID#:)	Amount of contribution (\$) 1000,00
03/01/2019	Contributor address; City; State 808 Conagra Dr Dallas,		1000.00
Principal occupation / Job title (See Instructions) Philanthropy Employer (See Instructions) The Sherwood Fou		tions) ndation	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 15 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/17/2019	Stuart M Bumpas		500.00
	6 Contributor address; City; State;	; Zip Code	
	5306 Surrey Cir Dallas,	TX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Attorney		Locke Lord	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/23/2019	Ken Burdin		500.00
01/23/2019	Contributor address; City; State;	; Zip Code	300.00
		TX 75219	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instructi Burdin Mediations	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/18/2019	Janie R Bush		100.00
	Contributor address; City; State; 10442 Brockbank Dr Dallas,	Zip Code TX 75229	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC Janie R Bush	(ID#:)	Amount of contribution (\$)
02/14/2019	· · · · · · · · · · · · · · · · · · ·		100.00
		; Zip Code TX 75229	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 16 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/22/2019	Janie R Bush		100.00
	6 Contributor address; City; State;	Zip Code	
	10442 Brockbank Dr Dallas, 7	ΓX 75229	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	Janie R Bush		50.00
	Contributor address; City; State;	Zip Code	
	10442 Brockbank Dr Dallas, T	ΓX 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	David Cain		1000.00
	Contributor address; City; State; 2525 Turtle Creek Blvd Suite 203 Dallas, T		
Principal occup Banker	pation / Job title (See Instructions)	Employer (See Instruct Hall Group	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/08/2019	Rebel Calhoun		250.00
		Zip Code ΓX 75219	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 17 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
03/03/2019 Cheryl Camin Murray		100.00		
	6 Contributor address; City; State;	Zip Code		
	6717 Lakefair Cir Dallas, T	ΓX 75214		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/05/2019	Ophelia Camina		1000.00	
02, 00, 2019	Contributor address; City; State;	Zip Code	1000.00	
	4521 Bordeaux Ave Dallas, 7	ΓX 75205		
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instructi Susman Godfrey, L		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/08/2019	Steve Camp		200.00	
	Contributor address; City; State; 611 Kessler Springs Ave Dallas, 7	Zip Code ΓX 75208		
Principal occupation / Job title (See Instructions) Employer (See Instruc		Employer (See Instruct	ions)	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)	
03/25/2019	Gregory Campbell		250.00	
Contributor address; City; State; Zip Code 2323 N Houston St Suite 411 Dallas, TX 75219				
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 18 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/25/2019	Kathleen Campbell		100.00
	6 Contributor address; City; State;	Zip Code	
	2177 Kessler Ct Dallas, 7	TX 75208	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc		9 Employer (See Instructi	ions)
Date		(ID#:)	Amount of contribution (\$)
03/25/2019	Yvonne Campos		250.00
	Contributor address; City; State;	Zip Code	
	P.O. Box 80363 San Dieg	go, CA 92138	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/15/2019	W. Ralph Canada		500.00
	Contributor address; City; State; 12377 Merit Dr Austin,	Zip Code TX 75251	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instructi Loewinsohn Flegle	ions) Deary Simon, LLP
Date 02/27/2019	Full name of contributor out-of-state PAC (Gilbert Cardenas	,	Amount of contribution (\$) 100.00
	Contributor address; City; State;	Zip Code TX 78702	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 19 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya	
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
01/01/2019	David Carlock	250.00
	6 Contributor address; City; State; Zip Code	
	8235 Douglas Ave Suite 250 Dallas, TX 75225	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See In	istructions)
Date	Full name of contributor	Amount of contribution (\$)
02/13/2019	David Carlson	500.00
02/13/2017	Contributor address; City; State; Zip Code	300.00
	3401 Lee Pkwy Suite 2002 Dallas, TX 75219	
Duin sin al a saum	Freeling / Leb title (Con Instructions)	
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	structions)
Date	Full name of contributor	Amount of contribution (th)
	Priscilla K Carroll	
01/12/2019		
	Contributor address; City; State; Zip Code 3704 N Charles St Suite 506 Baltimore, MD 21218	
	Building, HB 21210	
Principal occup	Dation / Job title (See Instructions) Employer (See In	structions)
Date	Full name of contributor) Amount of contribution (\$)
01/08/2019	Chrysta Castaneda	250.00
01/00/2019	Contributor address; City; State; Zip Code	
	1317 W Canterbury Ct Dallas, TX 75208	
Principal occup	pation / Job title (See Instructions) Employer (See In	structions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 20 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya		
4 Date	Filan Castro		7 Amount of contribution (\$)
01/31/2019			100.00
	6 Contributor address; City; State;	Zip Code	
	P.O. Box 12188 Dallas, T	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/29/2019	Elliot R Cattarulla		1000.00
	Contributor address; City; State;	Zip Code	
	3601 Turtle Creek Blvd Suite 701 Dallas, T	CX 75219	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instructi Retired	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/14/2019	Ricardo Cedillo		5000.00
	Contributor address; City; State;	Zip Code	
	755 E Mulberry Ave San Anto	onio, TX 78212	
Principal occup Attorney	nation / Job title (See Instructions)	Employer (See Instructi Davis Cedillo & Me	
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/22/2019	Clare Chaney		200.00
	Contributor address; City; State; 5907 Swiss Ave Dallas, T		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 21 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
03/18/2019	Scott Chase	100.00	
	6 Contributor address; City; State;	Zip Code	
	1700 Pacific Ave Suite 3700 Dallas, T	X 75201	
0 0 0 0 0			•
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/07/2019	Enrique Chavez		100.00
03/07/2019	Contributor address; City; State;	Zip Code	100.00
	2101 N Stanton St El Paso,	TX 79902	
	,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/07/2010	Martin J Chavez	,	
03/07/2019 1000.00			1000.00
	Contributor address; City; State;		
	4620 Allegheny Ct NW Albuquer	rque, NM 87114	
Principal occup Consultant	vation / Job title (See Instructions)	Employer (See Instruct Ibarra Strategy Gro	
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
02/07/2019	William Clarke		100.00
02/07/2019	Contributor address.		100.00
	Contributor address; City; State; 8524 San Fernando Way Dallas, T	Zip Code	
	Sear Families Way	11,0210	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	,	. , ,	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 22 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/21/2019 Sam Coats			1000.00
01, 21, 2019	6 Contributor address; City; State;	; Zip Code	
	26 Ryddington Pl Dallas,	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Engineer		DFW Airport Author	ority
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/29/2019	Jessica Montoya Coggins		5000.00
01/29/2019	Contributor address; City; State	; Zip Code	3000.00
	5230 Lobello Dr Dallas,	TX 75229	
Consultant	ation / Job title (See Instructions)	Employer (See Instructions) JMC Communications	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/06/2019	Mark Coggins		100.00
	Contributor address; City; State;	; Zip Code	
	3249 Walnut Hill Dr San An	gelo, TX 76904	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/24/2019	Paul Coggins	(10#)	5000.00
01/24/2017	Contributor address; City; State	· · · · · · · · · · · · · · · · · · ·	3000.00
		TX 75201	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruct Locke Lord	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A1: 23 of 126
2 FILER NAME		:	3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_		7 Amount of contribution (\$)
01/31/2019	Wendy Coggins		100.00
	6 Contributor address; City; State; Z	ip Code	
	3249 Walnut Hill Dr San Angelo	, TX 76904	
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instruction	ns)
Date	Full name of contributor		Amount of contribution (\$)
02/13/2019	Cj Comu		100.00
	Contributor address; City; State; Z		
	14873 Oaks North Pl Dallas, TX	75254	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)
02/09/2019	Serena Simmons Connelly		2500.00
	-	ip Code	
	3156 Brookhollow Dr Dallas, TX	75234	
Principal occup Social Worker	pation / Job title (See Instructions)	Employer (See Instruction Contran Corp.	ns)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/11/2019	Bonnie Cook		100.00
	Contributor address; City; State; Z 9431 Hunters Creek Dr Dallas, TX	p Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ins)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 24 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	7 Amount of contribution (\$)	
02/05/2019 Betty Taylor Cox			250.00
	6 Contributor address; City; State;	Zip Code	
	3724 Amherst Ave Dallas, T	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Retired		Retired	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/13/2019	Betty Taylor Cox		250.00
	Contributor address; City; State;	Zip Code	
	3724 Amherst Ave Dallas, T	TX 75225	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/21/2019	Betty Taylor Cox		250.00
	Contributor address; City; State; 3724 Amherst Ave Dallas, T	Zip Code ΓX 75225	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/23/2019	Rita Cox		100.00
	Contributor address; City; State; 7129 Tabor Dr Dallas, T		
Principal occupation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 25 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/25/2019	Giles Davidson		250.00
	6 Contributor address; City; State;	Zip Code	
	1111 N Montclair Ave Dallas, '	TX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/02/2019	Nancy Davidson		1000.00
	Contributor address; City; State;		
	1622 th Ave N Seattle,	WA 98109	
Principal occup Physician	pation / Job title (See Instructions)	Employer (See Instruct Fred Hutchinson Ca	ions) ancer Research Center
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/28/2019	Amy Davis		750.00
	Contributor address; City; State;	Zip Code	
	_	TX 75208	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Christiansen Davis,	tions) LLC
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/24/2019	Janice Davis		100.00
	Contributor address; City; State; 10238 Woodford Dr Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 26 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (II	D#:)	7 Amount of contribution (\$)
03/22/2019 Debora De Hoyos			1000.00
	6 Contributor address; City; State;	Zip Code	
	1041 Judson Ave Evanston	ı, IL 60202	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Attorney		Mayer Brown LLP	
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/23/2019	Alain Dermarkar		250.00
	Contributor address; City; State;	Zip Code	
	8351 Santa Clara Dr Dallas, T	X 75218	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Maurine Dickey	,	
03/15/2019			250.00
	Contributor address; City; State; 3401 Lee Pkwy Suite 1401 Dallas, T	·	
Principal occupation / Job title (See Instructions) Employer (See Instru		Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/14/2019	Sharon Dillon		100.00
	Contributor address; City; State; 4533 Glenville Dr Plano, TX	Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 27 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Me			- ,
4 Date 02/15/2019	5 Full name of contributor out-of-state PAC (ID#:) Dean Dimmitt 6 Contributor address; City; State; Zip Code 4649 N Versailles Ave Dallas, TX 75209		7 Amount of contribution (\$) 250.00
8 Principal occi	upation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date 02/06/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/25/2019	Full name of contributor		Amount of contribution (\$) 500.00
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructi Thompson & Knigh	
Date 03/21/2019	Dorene C Dominguez Contributor address; City; State;		Amount of contribution (\$) 250.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 28 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	7 Amount of contribution (\$)	
02/22/2019 Dan Donovan			1000.00
	6 Contributor address; City; State;	Zip Code	
	6509 Malcolm Dr Dallas,	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Attorney		Geary Porter and D	onovan
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/24/2019	Dan Donovan		1000.00
03/24/2019	Contributor address; City; State;	1	1000.00
	6509 Malcolm Dr Dallas,	TX 75214	
		Employer (See Instruct Geary Porter and D	
7 kttorney		Geary Forter and D	onovan
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/17/2019	Bob Dransfield		500.00
	Contributor address; City; State; Zip Code		
	4433 Druid Ln Dallas, d	TX 75205	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Norton Rose Fulbri	ght US LLP
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/08/2019	David R Dunnigan	,	100.00
	Contributor address; City; State; 2157 Kessler Ct Dallas,	Zip Code TX 75208	
Principal occupation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 29 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/30/2019 Thomas M Dunning			2000.00
	6 Contributor address; City; State;	; Zip Code	
	2100 Ross Ave Suite 1200 Dallas,	TX 75201	
·	,	9 Employer (See Instruct	
Chairman Eme	ritus	Lockton Dunning B	Senefits Associates
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/18/2019	Christina Durovich		249.00
03/10/2019	Contributor address; City; State	; Zip Code	213.00
	3920 Marquette St Dallas,	TX 75225	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/22/2019	Renee Dutia		300.00
	Contributor address; City; State; 7111 Leameadow Dr Dallas,	Zip Code TX 75248	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/04/2019	Diana Dutton		200.00
	Contributor address; City; State 4915 Radbrook Pl Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 30 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	7 Amount of contribution (\$)	
02/20/2019	Dustin Eash	250.00	
	6 Contributor address; City; State;		
	3511 Northwest Pkwy Dallas,	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
6 Filicipal occu	Jation / Job title (See Instructions)	9 Employer (See instruct	lions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/15/2010	Debbie Eichner		500.00
01/15/2019	Contributor address; City; State;		300.00
	3883 Turtle Creek Blvd Suite 2218 Dallas,		
	Joos Turtie Creek Biva Saite 2210 Banas,	17. 73217	
	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Retired		Retired	
Data	Full name of contributor	415.4	
Date		(ID#:)	Amount of contribution (\$)
02/07/2019	Al Ellis		250.00
Contributor address; City; State; Zip Code			
	3811 Turtle Creek Blvd Suite 1400 Dallas,	TX 75219	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Fillicipal occup	ation / Job title (See instructions)	Employer (See instruct	lions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/31/2019	Joy R Ellis		4000.00
	Contributor address; City; State;	; Zip Code	
		TX 75201	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Norton Rose Fulbri	ions)
Attorney		Notion Rose I didi	.gm

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 31 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ☐ out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/22/2019	Chris Escobedo		2000.00
03/22/2019	6 Contributor address; City; State;	; Zip Code	2000.00
	1222 N Winnetka Ave Dallas,	TX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Construction N		Phillips/May Corpo	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/19/2019	Ruben Esquivel		500.00
	Contributor address; City; State		
	1217 Hanna Cir Desoto,	, TX 75115	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct UT Southwestern	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/11/2019	Sander Esserman	,	1000.00
03/11/2019	Contributor address; City; State;		1000.00
	,	TX 75205	
Delevised			<u>.</u>
Attorney	pation / Job title (See Instructions)	Employer (See Instruction Stutzman, Bromber	rg, Esserman & Plifka, a p.c.
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/19/2019	Warren R Fagadau	, ,	1000.00
	Contributor address; City; State	· Zin Code	
		TX 75205	
Principal occupation / Job title (See Instructions) M.D. Employer Self-er		Employer (See Instruct Self-employed	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 32 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/27/2019	Cynthia Ferrer		5000.00
02/21/2019	6 Contributor address; City; State;	Zip Code	3000.00
		TX 75219	
9 Principal con	nation / Joh title (See Instructions)	• Employer (See Instruct	tions)
8 Principal occu Accountant	pation / Job title (See Instructions)	9 Employer (See Instruct Ferrer Poirot Wans	
Accountant		Terrer Forror Waris	blough
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/11/2019	David Finn		500.00
	Contributor address; City; State;		
	2828 N Harwood St Suite 1950 Dallas, 7	TX 75201	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Self-employed	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/09/2019	Gail C Fischer		1000.00
03/07/2017	Contributor address; City; State;		1000.00
		TX 75220	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/06/2019	Theresa Flores	(15)1	150.00
03/00/2017			130.00
	Contributor address; City; State; 1515 Mccoy St Dallas, 7	TX 75204	
Principal occupation / Job title (See Instructions) Employer (See Instruc			tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 33 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/07/2019	Kathleen A Foley		200.00
03/07/2019	6 Contributor address; City; State;	Zip Code	200.00
	2507 Auburn Ave Dallas, 7	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
• Timolpai coca	auton / cos uno (cos monustrono)	g Employer (Goo morrado	iono,
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/15/2019	Ann J Folz		500.00
	Contributor address; City; State; Zip Code		
	3535 N Hall St Suite 607 Dallas, 7	TX 75219	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/01/2019	Veletta Forsythe Lill		250.00
	Contributor address; City; State; 622 Blair Blvd Dallas, 7	Zip Code ΓΧ 75223	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/01/2019	Veletta Forsythe Lill		250.00
	Contributor address; City; State;	Zip Code TX 75223	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 34 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/14/2019 Sharon M Fountain			250.00
	6 Contributor address; City; State;		
	5307 Preston Haven Dr Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Sharon M Fountain		100.00
03/23/2019	Contributor address; City; State;		100.00
	5307 Preston Haven Dr Dallas,	TX 75229	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/18/2019	Pearl Garza Fracchia		100.00
	Contributor address; City; State; 1224 Middle Cove Dr Plano, T	Zip Code ΓX 75023	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/25/2019	Pearl Garza Fracchia		50.00
	Contributor address; City; State; 1224 Middle Cove Dr Plano, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 35 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/24/2019	Helen Snetman Frank		250.00
	6 Contributor address; City; State;	Zip Code	
	5514 Montrose Dr Dallas,	TX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/08/2019	Richard Frank		100.00
	Contributor address; City; State;	Zip Code	
	10041 Ferndale Rd Dallas,	TX 75238	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/21/2019	Valerie Freeman		500.00
	Contributor address; City; State; 3311 Chaparral Dr Dallas,	Zip Code TX 75234	
Principal occup Business Own	ation / Job title (See Instructions)	Employer (See Instructi Imprimis Group, Ind	ions) C.
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/15/2019	Brendan Gaffney		250.00
		Zip Code ΓX 75093	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 36 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of contribution (\$)
01/25/2019 Toby Galloway			250.00
	6 Contributor address; City; State;	Zip Code	
	2825 Manorwood Trl Fort Wo	orth, TX 76109	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/24/2019	Mike Galvan		1000.00
02/2 1/2015	Contributor address; City; State;	Zip Code	1000.00
	3304 Villanova St Dallas,	TX 75225	
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired		cions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Full name of contributor	(ID#:)	Amount of contribution (\$) 500.00
	Susan Gandy Contributor address; City; State;		Amount of contribution (\$) 500.00
02/22/2019	Susan Gandy Contributor address; City; State;	Zip Code	500.00
Principal occup Not employed	Susan Gandy Contributor address; City; State; 202 E Wheatland Rd Suite 100 Duncan Dun	Zip Code ville, TX 75116 Employer (See Instruc Not employed	500.00 tions) Amount of contribution (\$)
02/22/2019 Principal occup Not employed	Susan Gandy Contributor address; City; State; 202 E Wheatland Rd Suite 100 Duncan pation / Job title (See Instructions) Full name of contributor	Zip Code aville, TX 75116 Employer (See Instruc Not employed	500.00 tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 37 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/24/2019	Elba Garcia		4000.00
	6 Contributor address; City; State;	Zip Code	
	411 Elm St Dallas,	TX 75202	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Dentist		Self-employed	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/23/2019	Norma Garcia		100.00
0 - 7 - 2 - 7	Contributor address; City; State;	; Zip Code	
	909 Wentwood Dr Allen, T	TX 75002	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/24/2019	Asusena Garcia-Rios		150.00
	Contributor address; City; State; 8823 Merritt Rd Rowlett	Zip Code t, TX 75089	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/01/2019	Trinidad Garza		200.00
	Contributor address; City; State; 2235 W Colorado Blvd Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 38 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of contribution (\$)
01/22/2019 Tom Gaubert			1000.00
	6 Contributor address; City; State; Zip Code		
	1130 N Westmoreland Rd Desoto,	TX 75115	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)
Self Employed		Self Employed	
D	Full name of contributor	ID#:)	
Date)	Amount of contribution (\$)
01/30/2019	Basheer Ghorayeb		100.00
	•	Zip Code	
	8626 Chadbourne Rd Dallas, 7	ΓX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Dete	Full name of contributor		
Date	Wendy Goldman	ID#:)	Amount of contribution (\$)
02/06/2019	· · · · · · · · · · · · · · · · · · ·		200.00
	Contributor address; City; State; 3606 Fairmount St Dallas, 7	· ·	
	5000 Fairmount St Danas, 1	ΓX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#·	Amount of contribution (\$)
02/27/2019	Wendy Goldman)	70.00
02/27/2019	Contributor address; City; State;	Zip Code	70.00
		ΓX 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 39 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
03/25/2019	Wendy Goldman		50.00
	6 Contributor address; City; State	; Zip Code	
	3606 Fairmount St Dallas,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/25/2019	Abraham R Gonzalez		100.00
03/23/2017	Contributor address; City; State	; Zip Code	100.00
	5018 Abrams Rd Dallas,	TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/03/2019	Kimberly Gonzalez		100.00
	Contributor address; City; State; 3851 N Versailles Ave Dallas,	; Zip Code TX 75209	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	Amount of contribution (\$)
02/12/2019	Tom Goranson		100.00
	Contributor address; City; State 3707 Gilbert Ave Suite 3 Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 40 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/11/2019	Marsha Gordon		1000.00
	6 Contributor address; City; State;	Zip Code	
	6139 Waggoner Dr Dallas, 7	ΓX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Retired Social	Worker	Retired Social World	ker
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/21/2019	Storrow Gordon		1500.00
	Contributor address; City; State;	Zip Code	
	3401 Lee Pkwy Suite 704 Dallas, 7	ΓX 75219	
Principal occup Retired	eation / Job title (See Instructions)	Employer (See Instructi Retired	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/25/2019	Christopher Gores		250.00
	Contributor address; City; State;	Zip Code	
	2 Glenshire Ct Dallas, 7	ΓX 75225	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/19/2019	Pagett Gosslee	, ,	100.00
00,19,2019	Contributor address; City; State;		100.00
		ГX 75230	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 41 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/25/2019	Pagett Gosslee		50.00
03/20/2019	6 Contributor address; City; State;	Zip Code	50.00
	5723 Trail Meadow Dr Dallas,	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/15/2019	Beverly Goulet		100.00
02/13/2019	Contributor address; City; State;	Zip Code	100.00
	3831 Turtle Creek Blvd Suite 18F Dallas,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	cions)
_			
Date	Full name of contributor uut-of-state PAC Pauline Graivier	(ID#:)	Amount of contribution (\$)
02/15/2019			100.00
	Contributor address; City; State; 5509 Lindenshire Ln Dallas,	•	
	3309 Emdensime En Danas,	TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
		I	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/05/2019	Pauline Graivier		100.00
	-	; Zip Code	
	5509 Lindenshire Ln Dallas,	TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 42 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/20/2019	Wanda Granier 6 Contributor address; City; State; Zip Code		250.00
03/20/2019			250.00
	P.O. Box 703853 Dallas, '	TX 75370	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/28/2019	Thomas Graves		1000.00
02/20/2019	Contributor address; City; State;	Zip Code	1000.00
	2001 Westmoreland Rd Red Oal	k, TX 75154	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instructi Retired	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/07/2019	Holly Greef		500.00
	Contributor address; City; State; 6665 Lakewood Blvd Dallas,	Zip Code TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#·)	Amount of contribution (\$)
01/21/2019	Rebecca Greenan	(.2	250.00
		Zip Code TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: 43 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC (ID#:)	7 Amount of contribution (\$)
02/22/2019	Rebecca Greenan	100.00	
02/22/2017	6 Contributor address; City; State;	Zip Code	100.00
	511 N Akard St Suite 1501 Dallas, 7	ΓX 75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
• Timeipai occa	sation / oos tille (eee matractions)	, Employer (See instructi	ions
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/11/2019	Rebecca Greenan		100.00
	Contributor address; City; State;	Zip Code	
	511 N Akard St Suite 1501 Dallas, 7	ΓX 75201	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ione\
i illicipal occup	allotty dob tille (dde instructions)	Employer (Gee instructi	(Chia)
Date		ID#:)	Amount of contribution (\$)
03/19/2019	Fish Greenfield		200.00
Contributor address; City; State; Zip Code			
	2728 Cedar Springs Rd Suite 1509 Dallas, T	TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor		
	Suzanne Greenman	ID#:)	Amount of contribution (\$)
01/31/2019			100.00
	Contributor address; City; State; 3601 Turtle Creek Blvd Suite 604 Dallas, 7	Zip Code	
	Joor Tuttle Creek Bivd Julie 004 Dallas, 1	(A 7521)	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 44 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ontoya	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/13/2019	Suzanne Greenman	100.00
02/10/2015	6 Contributor address; City; State; Zip Code	
	3601 Turtle Creek Blvd Suite 604 Dallas, TX 75219	
8 Principal occu	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)
	panon, 355 and (555 and 157 an	
Date	Full name of contributor	Amount of contribution (\$)
02/04/2019	Wilbur Marvin Gregory	500.00
02 , 0 ., <u>_</u> <u>_</u> <u>_</u> <u>_</u> .	Contributor address; City; State; Zip Code	
	124 Red Oak Ln Flower Mound, TX	X 75028
Principal occup	pation / Job title (See Instructions) Retin	yer (See Instructions) red
Date	Full name of contributor	Amount of contribution (\$)
02/15/2019	Gail Griswold	250.00
02/13/2017	Contributor address; City; State; Zip Code 6305 Northwood Rd Dallas, TX 75225	e
Principal occu	pation / Job title (See Instructions) Employ	yer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/11/2019	Joseph F Guida	1500.00
	Contributor address; City; State; Zip Code	e
	6210 Prestondell Dr Dallas, TX 75254	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 45 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/25/2019 Joseph F Guida			1000.00
03/23/2019	6 Contributor address; City; State;	Zip Code	1000.00
	6210 Prestondell Dr Dallas,	TX 75254	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Attorney		Guida, Slavich & F	flores
Date		(ID#:)	Amount of contribution (\$)
03/22/2019	Dolph Haas		500.00
	Contributor address; City; State:	; Zip Code	
	6415 Bandera Ave Dallas,	TX 75225	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/20/2019	Paula Hagan	, , ,	75.00
01/20/2019	Contributor address; City; State;		73.00
		TX 75205	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	-	(ID#:)	Amount of contribution (\$)
02/20/2019	Daniel Hagood		1000.00
	Contributor address; City; State:	; Zip Code TX 75201	
Principal occur	pation / Joh title (See Instructions)	Employer (See Instruc	tions)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruc Sorrels Hagood	iiona)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 46 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/03/2019	Paul Hain		250.00
	6 Contributor address; City; State;	Zip Code	
	4455 Laren Ln Dallas, T	ΓX 75244	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/01/2019	Peter Hajek		250.00
00,01,2019	Contributor address; City; State;	Zip Code	
	8303 San Fernando Way Dallas, T	TX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	Independence Hall		1000.00
	Contributor address; City; State;	Zip Code	
	3126 Greenfield Ave Los Ang	geles, CA 90034	
	ation / Job title (See Instructions) nt to the Chairman	Employer (See Instructi Hall Group	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/22/2019	Joanna Hampton	,	100.00
	Contributor address; City; State;	Zip Code ΓX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 47 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
03/25/2019	Joanna Hampton		50.00
	6 Contributor address; City; State;	Zip Code	
	5408 Swiss Ave Dallas, T	ΓX 75214	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/16/2019	Cathy Hancock		200.00
	Contributor address; City; State;	Zip Code	
	4444 Quail Hollow Dr Paducah,	, KY 42001	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/21/2019	Byron Harris		250.00
	Contributor address; City; State; 1459 Waterside Dr Dallas, T	Zip Code FX 75218	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/18/2019	GEORGE HARRIS		100.00
	Contributor address; City; State; P.O. Box 191343 DALLAS		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 48 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/18/2019	Linda Hart		5000.00
	6 Contributor address; City; State	; Zip Code	
	3811 Turtle Creek Blvd Suite 900 Dallas,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Vice-Chairman	n, President & Ceo	Hart Group, Inc.	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/18/2019	Milledge A Hart III		5000.00
	Contributor address; City; State	; Zip Code	
	3811 Turtle Creek Blvd Suite 900 Dallas,	TX 75219	
Principal occup Executive	pation / Job title (See Instructions)	Employer (See Instruct Hart Group, Inc.	tions)
Date	Full name of contributor	(ID#:)	A
	Terry Hart	(10#)	Amount of contribution (\$)
01/11/2019			500.00
Contributor address; City; State; Zip Code 2508 Sir Alexander Ln Lewisville, TX 75056			
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruc Retired	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/13/2019	Holly Hassmann	,	200.00
Contributor address; City; State; Zip Code 7700 Greenway Blvd Suite B4 Dallas, TX 75209			
Principal occupation / Job title (See Instructions) Employer (See Instru		tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 49 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
02/06/2019	Thomas Hatton		1000.00
02 , 00, 201	6 Contributor address; City; State	; Zip Code	1000.00
	5807 Watson Ave Dallas,	TX 75225	
	pation / Job title (See Instructions)	9 Employer (See Instruct	
Commercial C	oncrete	Subfloor Systems I	nc.
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
03/09/2019	Health Care Service Corporation Employees	PAC	5000.00
	Contributor address; City; State	; Zip Code	
	300 E Randolph Chicag	o, IL 60601	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		iions)	
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
01/23/2019	Clay Heighten		2500.00
01,25,2015	Contributor address; City; State	: Zip Code	2300.00
		TX 75205	
Principal occup Investor	pation / Job title (See Instructions)	Employer (See Instruct Green Park and Go	tions) If Ventures
Date		; (ID#:)	Amount of contribution (\$)
03/04/2019	Clay Heighten		2500.00
	Contributor address; City; State	; Zip Code TX 75205	
Principal occup Investor	pation / Job title (See Instructions)	Employer (See Instruct Green Park and Go	tions) If Ventures

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 50 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/12/2019	Marcy Helfand		200.00
03, 12, 2019	6 Contributor address; City; State;	Zip Code	200.00
	7191 Kendallwood Dr Dallas, 7	TX 75240	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/20/2019	Paul Heller		250.00
03/20/2019	Contributor address; City; State;	Zip Code	230.00
		s Branch, TX 75244	
Principal occupation / Job title (See Instructions) Employer (See Instruc		Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/04/2019	Rosario Heppe		250.00
	Contributor address; City; State;	Zip Code	
	1116 Bally Mote Dr Dallas,	TX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/04/2019	Carlos M Hernandez	(15#)	1000.00
02/04/2017	Contributor address; City; State;	Zin Codo	1000.00
		TX 75225	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Fluor Corporation	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 51 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ☐ out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
01/17/2019	Frank Herrera		5000.00
01,17,2019	6 Contributor address; City; State	; Zip Code	
	105 Blackhawk Trl San An	ntonio, TX 78232	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Attorney		The Herrera Law F	'irm
Date	Full name of contributor out-of-state_PAC	G (ID#:)	Amount of contribution (\$)
01/21/2019	Marion Hicks		500.00
01/21/2017	Contributor address; City; State	; Zip Code	300.00
	4310 Throckmorton St Dallas,	TX 75219	
Principal occupation / Job title (See Instructions) Retired Employer (See Instruct Retired		iions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/23/2019	Marion Hicks		500.00
02/23/2019	Contributor address; City; State:	; Zip Code	300.00
		TX 75219	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Retired	ation / Job title (Gee instituctions)	Retired	lions)
Date	Full name of contributor out-of-state PAC	; (ID#:)	Amount of contribution (\$)
03/25/2019	Sydney Hicks	,	200.00
	Contributor address; City; State	; Zip Code	
	-	TX 75230	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
spa. strapation / see the (see mendenens)		,	
		<u> </u>	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 52 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/20/2019	Hattie Hill		2500.00
	6 Contributor address; City; State;	Zip Code	
	6730 Lbj Fwy Suite B Dallas, 7	TX 74240	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
President & C	EO	WFF	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/23/2019	Kelly Hine		250.00
	Contributor address; City; State;		
	11224 Candlelight Ln Dallas, 7	TX 75229	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/22/2019	Gustavo N Hinojosa		100.00
	Contributor address; City; State;	•	
	2220 Canton St Suite 402 Dallas, 7	TX 75201	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/22/2019	Maridel Hoagland		250.00
	Contributor address; City; State;	Zip Code	
	7184 Kendallwood Dr Dallas, 7	TX 75240	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 53 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state_PAC ((ID#:)	7 Amount of contribution (\$)
02/25/2019	Jean Hobby		1000.00
02/23/2019	6 Contributor address; City; State;	Zip Code	1000.00
	6704 Mimosa Ln Dallas, 7	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Retired	, and the coordinate of the co	Retired	(S.I.S.)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/22/2019	Terri Hodge		100.00
	Contributor address; City; State;	Zip Code	
	7106 Abrams Rd Dallas, 7	TX 75231	
5			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/06/2019	Cynthia Hollingsworth		100.00
	Contributor address; City; State;	Zip Code	
	8150 N Central Expy Suite 100 Dallas, 7	ГХ 75206	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/15/2019	Brooke Hopkins	, , ,	500.00
	Contributor address; City; State;		
		TX 75201	
Principal occup Director, Dalla	ation / Job title (See Instructions)	Employer (See Instruct AlixPartners	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 54 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
03/20/2019	Hotel PAC of THLA		1000.00
03/20/2019	6 Contributor address; City; State;	Zip Code	1000.00
	1701 West Ave Austin, 7	ΓX 78701	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/22/2010	Trish Houck		,
03/22/2019	Contributor address; City; State;	Zin Code	2000.00
		TX 75208	
	2017 Count 2333 11,0		
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/01/2019	Angela Howell		100.00
	Contributor address; City; State; 6123 Desco Dr Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/08/2019	Full name of contributor		Amount of contribution (\$) 100.00
	Contributor address; City; State;	Zip Code ΓX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 55 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Ms Regina T M	ontoya	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
03/09/2019	Karen Hoyt-Potasznik	100.00
	6 Contributor address; City; State; Zip Cod	
	7152 Dalewood Ln Dallas, TX 75214	
8 Principal occ	upation / Job title (See Instructions) 9 Employ	ver (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/25/2019	Karen Hoyt-Potasznik	100.00
	Contributor address; City; State; Zip Cod	
	7152 Dalewood Ln Dallas, TX 75214	
Principal occu	pation / Job title (See Instructions) Employ	ver (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/16/2019	Denise Huginnie	100.00
	Contributor address; City; State; Zip Code 4226 Squaw Creek Dr Frisco, TX 75035	e
Principal occu	pation / Job title (See Instructions) Employ	/er (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
03/25/2019	Myra B Hull	250.00
	Contributor address; City; State; Zip Code 3510 Turtle Creek Blvd Suite 4A Dallas, TX 75219	
Principal occu	pation / Job title (See Instructions) Employ	ver (See Instructions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 56 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
02/11/2019	Michael Hurst		200.00
02/11/2019	6 Contributor address; City; State;	Zip Code	200.00
	2100 Ross Ave Suite 2700 Dallas, T	CX 75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ione\
• Timolpai occu	sation, and the (acc instructions)	, Employer (dee instruct	
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/27/2019	Joanne Hurtekant		100.00
02/27/2019	Contributor address; City; State;	Zip Code	100.00
	350 N Ervay St Dallas, T	TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/31/2019	Carole Ishii		250.00
	Contributor address; City; State; 820 Mount Gilead Rd Keller, T		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/05/2019	Carol Jablonski		500.00
		Zip Code TX 75248	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 57 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
03/13/2019	Karen Owens Jacobs	250.00
	6 Contributor address; City; State; Zip Code	
	3210 Carlisle St Suite 35E Dallas, TX 75204	
8 Principal occu	pation / Job title (See Instructions) 9 Employe	er (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/22/2019	Jana Lynne Sanchez for US Congress	250.00
02, 22, 2019	Contributor address; City; State; Zip Code	
	112 W Randol Mill Rd Suite 100 Arlington, TX 760	11
Principal occup	ation / Job title (See Instructions) Employe	er (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/18/2019	Mark Johansen	500.00
	Contributor address; City; State; Zip Code 3538 Purdue Ave Dallas, TX 75225	
Principal occup Attorney	pation / Job title (See Instructions) Employe Perkin	er (See Instructions) ns Coie LLP
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/24/2019	John R Salazar	500.00
	Contributor address; City; State; Zip Code 2201 Main St Suite 900 Dallas, TX 75201	
Principal occup Attorney	pation / Job title (See Instructions) Employee Self-6	er (See Instructions) employed

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 58 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/15/2019	Brett Johnson		500.00
	6 Contributor address; City; State;		
	3521 Wentwood Dr Dallas, T	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Attorney		Winston & Strawn	LLP
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/11/2019	Eric D Johnson		2500.00
	Contributor address; City; State;		
	3525 Turtle Creek Blvd Suite 11A Dallas, 7	TX 75219	
Dringing Loop in	ation / Job title (See Instructions)	Employer (Coo Instruct	iona)
Educator	ation / Job title (See Instructions)	Employer (See Instruct Dallas ISD	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/22/2010	Madeleine Johnson	,	
02/22/2019			500.00
	Contributor address; City; State; 3111 Welborn Suite 1501 Dallas, 7	Zip Code TX 75219	
Principal occup Retired	eation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/13/2019	Judith Jonwa	, (, - » ,	1000.00
01/13/2019	Contributor address; City; State;		1000.00
		es, CA 90272	
		,	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 59 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
02/15/2019	Margaret Jordan		250.00	
02/13/2019	6 Contributor address; City; State;	Zip Code	230.00	
	3500 Fairmount St Suite 208 Dallas,	TX 75219		
• • • •				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	lions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/05/2019	Robert W Jordan		1000.00	
	Contributor address; City; State;			
	6515 Northaven Rd Dallas,	TX 75230		
Duin sin al a saum	-ti / Inh title (Con Innthuntiana)		#\	
Author, lecture	ation / Job title (See Instructions)	Employer (See Instruct Self-employed	lions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/23/2019	Krisi N Kastl		500.00	
	Contributor address; City; State;	Zip Code		
	3355 Blackburn St Suite 8402 Dallas,	TX 75204		
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Self-employed	tions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/22/2019	Michael Kaufman		1000.00	
	Contributor address; City; State;	; Zip Code		
	3731 Gilbert Ave Suite C Dallas,	TX 75219		
Principal occup Attorney	nation / Job title (See Instructions)	Employer (See Instruct Jackson Walker	tions)	
Autonicy Sackson Walker				

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 60 of 126		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)		
01/18/2019	Katherine Kaufmann	100.00		
	6 Contributor address; City; State; Zip Code			
	8 Commonwealth Park Wellesley Hills, MA 0248	1		
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See	Instructions)		
Date	Full name of contributor	Amount of contribution (\$)		
02/15/2019	Katherine Kaufmann	50.00		
	Contributor address; City; State; Zip Code			
	8 Commonwealth Park Wellesley Hills, MA 0248	1		
Principal occup	pation / Job title (See Instructions) Employer (See I	Instructions)		
Date	Full name of contributor	Amount of contribution (\$)		
03/22/2019	Katherine Kaufmann	100.00		
	Contributor address; City; State; Zip Code			
	8 Commonwealth Park Wellesley Hills, MA 0248	1		
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	Instructions)		
Date	Full name of contributor) Amount of contribution (\$)		
03/06/2019	Katherine Kelsey	500.00		
Contributor address; City; State; Zip Code 3232 Mckinney Ave Suite 890 Dallas, TX 75204				
Principal occup Retired	pation / Job title (See Instructions) Employer (See Retired	Instructions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 61 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of contribution (\$)
03/19/2019	E J Kendall		1000.00
6 Contributor address; City; State; Zip Code			
	5603 La Foy Blvd Dallas,	TX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Lawyer		Kendall Law Group	PLLC
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/12/2019	David Kent		50.00
	Contributor address; City; State;		
	1717 Main St Suite 5400 Dallas,	TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/20/2019	David Kent		50.00
	Contributor address; City; State; 1717 Main St Suite 5400 Dallas,	Zip Code TX 75201	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/15/2019	Full name of contributor	(ID#:)	Amount of contribution (\$) 100.00
		; Zip Code TX 78704	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 62 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (D#:)	7 Amount of contribution (\$)
03/11/2019	Jennifer King		250.00
03/11/2019	6 Contributor address; City; State;	Zip Code	230.00
	9206 Canter Dr Dallas, T	CX 75231	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
• Timelpar occu	pation / Job title (Jee manucitons)	Cimployer (See instituct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/11/2019	Sharon S King		250.00
	Contributor address; City; State;	Zip Code	
	116 W Shore Dr Richards	son, TX 75080	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/18/2019	Ronald Kirk		1000.00
00,10,2019	Contributor address; City; State; 6342 Mercedes Ave Dallas, T	Zip Code TX 75214	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Gibson Dunn & Cru	ions) utcher
Date	Full name of contributor	ID#·)	Amount of contribution (\$)
03/05/2019	Betsy Kleinman	,	500.00
	Contributor address; City; State; 6926 Midbury Dr Dallas, 7		
Principal occupation / Job title (See Instructions) Not employed Employer (See Instructions) Not employed			ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 63 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
01/28/2019	Paul Koning		1000.00	
	6 Contributor address; City; State; Zip Code			
	6246 Desco Dr Dallas,	TX 75225		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Attorney		Koning Rubarts LL	P	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/05/2019	Paula Lambert		100.00	
	Contributor address; City; State;	Zip Code		
	2841 Park Bridge Ct Dallas,	TX 75219		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
	,		,	
Date	Full name of contributor	(ID#:)	A (A)	
	Barbara Landes	, , , , , , , , , , , , , , , , , , , ,	Amount of contribution (\$)	
03/20/2019			100.00	
	Contributor address; City; State; 703 Arch Hall Ln Alexand	Zip Code Iria, VA 22314		
	703 Filen Han En	iiia, VII 22311		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	//D#-	Amount of contribution (\$)	
01/24/2019	Yolanda Lara	(10#)	100.00	
01/21/2019	Contributor address; City; State;	Zip Code	100.00	
		te, TX 75150		
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)	
	<u> </u>			

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 64 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/09/2019	Nancy Latner		100.00
03/03/2019	6 Contributor address; City; State;	; Zip Code	100.00
	6223 Meadow Rd Dallas,	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/17/2019	Tom S Leatherbury		5000.00
	Contributor address; City; State;	; Zip Code	
	2001 Ross Ave Suite 3900 Dallas,	TX 75201	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Vinson & Elkins LI	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/24/2019	Carl Lee		150.00
	Contributor address; City; State; 12045 Edgestone Rd Dallas,	Zip Code TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/22/2019	Stephen Lerer	, , ,	300.00
Contributor address; City; State; Zip Code 3831 Turtle Creek Blvd Suite 23C Dallas, TX 75219			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 65 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of contribution (\$)
03/13/2019	03/13/2019 Brian Lidji		2000.00
	6 Contributor address; City; State;	; Zip Code	
	500 N Akard St Suite 3500 Dallas,	TX 75201	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Attorney		Lidji Dorey & Hoo	per
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/18/2019	Larry Linden		500.00
03/16/2019	Contributor address; City; State:	; Zip Code	300.00
		ork, NY 10019	
		, , , , , , , , , , , , , , , , , , , ,	
Principal occupation / Job title (See Instructions) Retired Employer (See Instruct Retired		tions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/28/2019	Linebarger Goggan Blair & Sampson, LLP		2500.00
02/20/2017	Contributor address; City; State;	· Zin Code	2500.00
		TX 78760	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
		Т	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/25/2019	Weston Loegering	,	1000.00
02 , _2, _ :	Contributor address; City; State:	; Zip Code	1
		TX 75218	
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Jones Day law firm		tions)	

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SCHEDULE A1

The	1 Total pages Schedule A1: 66 of 126		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAG	C (ID#:)	7 Amount of contribution (\$)
01/22/2019 Roy Lopez			1000.00
6 Contributor address; City; State; Zip Code			
	6258 Velasco Ave Dallas	, TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	
Banker		Federal Reserve Ba	ank of Dallas
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
03/11/2019	William Love		250.00
00,11,2019	Contributor address; City; State	e; Zip Code	25 0100
	6604 Escondido St Irving.	TX 75039	
Principal occur	ation / Job title (See Instructions)	Employer (See Instruct	tions)
	,	, , , , , , , , , , , , , , , , , , , ,	· ·,
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
02/13/2019	Julie Goldberg Lowenberg		50.00
	Contributor address; City; State	; Zip Code	
		, TX 75209	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)
03/21/2019	Julie Goldberg Lowenberg		50.00
	Contributor address; City; State	e; Zip Code	
	5321 Drane Dr Dallas	, TX 75209	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	1 Total pages Schedule A1: 67 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/16/2019	Martin Lowy		100.00
03/10/2019	6 Contributor address; City; State;	Zip Code	100.00
	7803 Royal Ln Dallas, T	ΓX 75230	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)
• Timolpai occa	salan / ees the (ees metachens)	y Employer (ede mende	
Date		ID#:)	Amount of contribution (\$)
02/08/2019	Amanda Luther		250.00
	Contributor address; City; State;		
	2737 Purdue Ave Dallas, 7	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of courtibution (f)
	Bobby Lyle	,	Amount of contribution (\$)
02/26/2019			1000.00
	Contributor address; City; State; 6688 N Central Expy Suite 1600 Dallas, 7	•	
	2000 1. Comun 2py 2010 1000 2 111111, 1		
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	tions)
Retifed		Retifed	
Date	Full name of contributor	ID#·)	Amount of contribution (\$)
01/12/2019	Michael P Lynn	,	5000.00
	Contributor address; City; State;	Zip Code	
	-	ΓX 75201	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Lynn Pinker Cox &	tions) 2 Hurst, LLP

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 68 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
02/28/2019 Elizabeth Mack			100.00	
02/28/2019	6 Contributor address; City; State;	Zip Code	100.00	
		TX 75209		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	lions)	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/21/2019	Tom Madine		1000.00	
02,21,2019	Contributor address; City; State;	; Zip Code	1000100	
	3609 University Blvd Dallas,	TX 75205		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct Worldwide Express		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)	
01/23/2019	William Mahomes		500.00	
	Contributor address; City; State; 2914 Woodside St Dallas,	; Zip Code TX 75204		
	,			
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Mahomes Bolden P		
Date	Full name of contributor	415.0	Λ	
03/22/2019	Edward Malinoski	(ID#:)	Amount of contribution (\$) 100.00	
03/22/2019	Contributor addrose: City: States		100.00	
Contributor address; City; State; Zip Code 4414 Cedar Springs Rd Suite 107 Dallas, TX 75219				
Principal occupation / Job title (See Instructions) Employer (See Instruc			tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 69 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/07/2019	Ed Malouf		200.00
00,07,2015	6 Contributor address; City; State;	Zip Code	
	6631 Norway Rd Dallas, T	ΓX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ione)
• Timelpar occu	pation / Job title (Jee manuchons)	g Employer (See mstruct	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
01/14/2019	Marcellene Malouf		250.00
01/11/2019	Contributor address; City; State;	Zip Code	250.00
	3441 Westminster Ave Dallas, 7	ΓX 75205	
Executive Dire	ector Job title (See Instructions)	Employer (See Instruct DII Asbestos Trust	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/28/2019	Marcellene Malouf		1000.00
	Contributor address; City; State;	Zip Code	
	3441 Westminster Ave Dallas, T	ΓX 75205	
Principal occup Executive Dire	pation / Job title (See Instructions)	Employer (See Instruct DII Asbestos Trust	ions)
Executive Diff	ector	DII Asbestos Trust	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/14/2019	Stephen F Malouf)	5000.00
01/14/2019	Contributor address:		3000.00
	Contributor address; City; State; 6688 N Central Expy Suite 1050 Dallas, 7	ΓX 75206	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruct Malouf & Nockels	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 70 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/01/2019	Mark Malveaux		2000.00
	6 Contributor address; City; State;	Zip Code	
	6138 Desco Dr Dallas, 7	ΓX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Attorney		McCall Parkhurst &	z Horton L.L.P.
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/25/2019	Madeline Mandell		70.00
02/23/2019	Contributor address; City; State;	Zip Code	70.00
	5930 Royal Ln Suite E Dallas, 7	ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	A
	Madeline Mandell)	Amount of contribution (\$)
03/19/2019		7: 0.1	25.00
	Contributor address; City; State; 5930 Royal Ln Suite E Dallas, 7	Zip Code FX 75230	
		,6266	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/22/2019	Madeline Mandell		10.00
	Contributor address; City; State;	Zip Code	
	5930 Royal Ln Suite E Dallas, 7	ΓX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 71 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/25/2019	Ronald M Mankoff		500.00
03/20/2019	6 Contributor address; City; State;	Zip Code	500.00
	22 Lakeside Park Suite 810 Dallas, 7	TX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Retired		Retired	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Stephen Mansfield	, "	···
03/13/2019			300.00
	• • • • • • • • • • • • • • • • • • • •	TX 75230	
	JATA MICAUCIS EII Dallas,	1X 13230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/29/2019	Elsa Manzanares		1000.00
	Contributor address; City; State;	Zip Code	
	6936 Clayton Ave Dallas, 7	TX 75214	
Principal occup Attorney	vation / Job title (See Instructions)	Employer (See Instruct Akerman LLP	ions)
Date	Full name of contributor	(10#-	Amount of contribution (\$)
02/08/2019	Diana Marquis)	250.00
02, 00, 2019	Contributor address; City; State;	Zip Code	
	-	TX 75233	
Principal occup	action / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	m.	1 Total pages Schedule A1: 72 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/25/2019	Susie Marshall		50.00
01/25/2019	6 Contributor address; City; State; Z	Zip Code	50.00
	17616 Woods Edge Dr Dallas, TX	75287	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
• Timolpai occa	gallon, cos uno (coo mondono)	Employer (Goo metadate	5.10,
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of contribution (\$)
02/22/2019	Susie Marshall		100.00
	Contributor address; City; State; Z	Zip Code	
	17616 Woods Edge Dr Dallas, TX	75287	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor		Amount of contribution (A)
	John Martin		Amount of contribution (\$)
03/07/2019 200.00			
Contributor address; City; State; Zip Code 10654 Sandpiper Ln Dallas, TX 75230			
	10654 Sandpiper Ln Dallas, TX	73230	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state_PAC (ID#:)	Amount of contribution (\$)
03/12/2019	Jill Martinez		100.00
	Contributor address; City; State; Z	 	
	447 Northwest Hwy Suite 1405 Irving, TX	•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 73 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
01/23/2019	Barbara Materka		100.00
	6 Contributor address; City; State;		
	3621 Turtle Creek Blvd Suite 8K Dallas, T	X 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/13/2019	J. Bill W Matthews		50.00
	Contributor address; City; State;	Zip Code	
	1230 Abrams Rd Suite 172 Dallas, T	X 75214	
Principal occupation / Job title (See Instructions) Employer (See Instruct		ions)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/19/2019	J. Bill W Matthews		50.00
	Contributor address; City; State; 1230 Abrams Rd Suite 172 Dallas, T.	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	J. Bill W Matthews		100.00
	Contributor address; City; State; 1230 Abrams Rd Suite 172 Dallas, T	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
	·		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 74 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
01/23/2019	James Mattingly		500.00	
01/23/2019	6 Contributor address; City; State;	Zip Code	300.00	
	5151 Belt Line Rd Dallas, 7	TX 75254		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Executive		Lumacorp, Inc		
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
03/18/2019	James Mattingly		2000.00	
	Contributor address; City; State;			
	5151 Belt Line Rd Dallas, 7	TX 75254		
Principal occup Executive	ation / Job title (See Instructions)	Employer (See Instructi Lumacorp, Inc	ions)	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
02/23/2019	James McCarthy		100.00	
Contributor address; City; State; Zip Code 2711 N Haskell Ave Suite 3100 Dallas, TX 75204				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date 03/16/2019	James McCarthy		Amount of contribution (\$) 100.00	
Contributor address; City; State; Zip Code 2711 N Haskell Ave Suite 3100 Dallas, TX 75204				
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 75 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/18/2019	James McCarthy		250.00
03/10/2019	6 Contributor address; City; State;	, Zip Code	230.00
	2711 N Haskell Ave Suite 3100 Dallas,	TX 75204	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
• Timolpai occu	sation / oos tille (eee instructions)	3 Employer (eee mandet	ivio)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/22/2019	K. Craig McCartney		250.00
	Contributor address; City; State;	; Zip Code	
	6735 Gaston Ave Dallas,	TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/10/2019	John McDowell		1000.00
	Contributor address; City; State;	Zip Code	
	5 Nonesuch Rd Dallas,	TX 75214	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Self-employed	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/11/2019	Janie McGarr		250.00
		; Zip Code	
	4423 Lively Ln Dallas,	TX 75220	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 76 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ☐ out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
01/24/2019	Brian McGovern		500.00
	6 Contributor address; City; State	; Zip Code	
	4364 Royal Ridge Dr Dallas,	TX 75229	
·	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Retired		Retired	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
02/07/2019	Virginia McGregor		500.00
		; Zip Code	
	1708 N Washington Ave Scranto	on, PA 18509	
Principal occupation / Job title (See Instructions) Homemaker Employer (See Instructions) Self-employed		tions)	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
02/11/2019	Cecilia McKay		500.00
	Contributor address; City; State	; Zip Code	
	14916 Havenshire Pl Dallas,	TX 75254	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	tions)
Date	Full name of contributor ☐ out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/09/2019	Mary Alice McLarty	,	100.00
	Contributor address; City; State	; Zip Code	
		TX 75204	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 77 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
02/20/2019	C. Thomas McMillen		2000.00
02/20/2019	6 Contributor address; City; State	; Zip Code	2000,00
	1103 S Carolina Ave SE Washin	ngton, DC 20003	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
President & Cl	BO	LEAD1 Associatio	n
Date	Full name of contributor ut-of-state PAC	: (ID#:)	Amount of contribution (\$)
01/01/2019	Tim McMullen-Sullivan		250.00
	Contributor address; City; State		
	8405 Rio San Diego Dr Suite 5419 San Di	ego, CA 92108	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		tions)	
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
01/24/2019	Patricia B Meadows		100.00
Contributor address; City; State; Zip Code 3131 Maple Ave Suite 10D Dallas, TX 75201			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/20/2019	Edward Meier		500.00
	Contributor address; City; State 5550 Ridgedale Ave Dallas,		
Principal occupation / Job title (See Instructions) Self-employed Employer (See Instructions) Ed Meier LLC		tions)	
l			

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 78 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/18/2019	Kenneth Menges		1000.00
01/10/2019	6 Contributor address; City; State;	Zip Code	1000.00
	11234 Shelterwood Cir Dallas, '	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Attorney		Akin Gump	
Date	Full name of contributor	(ID#:)	
Date	Gus Mercado	, (15 ":,	Amount of contribution (\$)
03/06/2019			500.00
	Contributor address; City; State;	•	
	8315 Navisota Dr Lantana	a, TX 76226	
Principal occupation / Job title (See Instructions) Owner/CEO Employer (See Instructions) Datalogix Texas In			
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/19/2019	Moses C Mercaod		1000.00
00,19,2019	Contributor address; City; State;	Zip Code	2000100
	1333 A Constitution Ave NE Washing	gton, DC 20002	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Ogilvy	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/25/2019	Lynne Messina	,	100.00
	Contributor address; City; State;	Zip Code	
		I, TX 75019	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 79 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/17/2019	Dan Micciche		500.00
	6 Contributor address; City; State;	; Zip Code	
	1140 Bally Mote Dr Dallas,	TX 75218	
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Attorney		Akin Gump	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/25/2019	Harriet Miers		1000.00
03,23,2019	Contributor address; City; State	; Zip Code	1000.00
	12020 Tavel Cir Dallas,	TX 75230	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions\
Attorney	ation / Job title (See instructions)	Locke Lord	uons)
Date		(ID#:)	Amount of contribution (\$)
02/14/2019	Kenneth Mighell		1000.00
	Contributor address; City; State;	•	
	11081 Lawnhaven Rd Dallas,	TX 75230	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct Cowles & Thompso	tions) on
Date	<u> </u>	(ID#:)	Amount of contribution (\$)
02/12/2019	Frank Mihalopoulos		1000.00
	Contributor address; City; State	; Zip Code	
	4645 N Central Expy Suite 200 Dallas,	TX 75205	
Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See Instruct ATR Corinth Partn	tions) iers

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 80 of 126				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
03/25/2019	Robert Milbank		500.00	
	6 Contributor address; City; State;	Zip Code		
	6933 Lakeshore Dr Dallas, T	ΓX 75214		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)	
Attorney		Milbank Law		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/20/2019	Jan Miller		2000.00	
	Contributor address; City; State;	Zip Code		
	3827 Beverly Dr Dallas, 7	ΓX 75205		
Principal occup Founder & CE	ation / Job title (See Instructions)	Employer (See Instruct Dupree Miller & As		
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)	
03/23/2019	Shirley Briggle Miller		100.00	
	Contributor address; City; State; 5701 Trail Meadow Dr Dallas, 7	Zip Code ΓΧ 75230		
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/06/2019			100.00	
	Contributor address; City; State; 6809 Bert Ln Dallas, 7	Zip Code ΓX 75240		
Principal occup	vation / Job title (See Instructions)	Employer (See Instruct	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 81 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/18/2019	Liz Minyard-Lokey		1000.00
01/10/2019	6 Contributor address; City; State;	Zip Code	1000.00
	2837 Hood St Dallas, 7	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Retired		Retired	
Date		(ID#:)	Amount of contribution (\$)
03/25/2019	Elizabeth Montfort		2000.00
	Contributor address; City; State;	-	
	1610 Hyland Greens Dr Grand P	Prairie, TX 75051	
	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Teacher		Arlington ISD	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Jane A Montfort	, (, - , ,)	
03/25/2019			2000.00
	Contributor address; City; State; 1610 Hyland Greens Dr Grapevi	Zip Code ine, TX 76051	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	tions)
Retired			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/13/2019	Susan Byrne Montgomery	, , ,	250.00
	Contributor address; City; State;	Zip Code	
		TX 75201	
Principal occupation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 82 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of contribution (\$)
02/27/2019	Susan Byrne Montgomery		100.00
02/27/2019	6 Contributor address; City; State;	Zip Code	100.00
	200 Crescent Ct Suite 1200 Dallas, TX	ζ 75201	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
• · · · · · · · · · · · · · · · · · · ·	3		0.10)
D	Full name of contributor ut-of-state PAC (ID#	.	
Date		¥:)	Amount of contribution (\$)
03/19/2019	Susan Byrne Montgomery		100.00
	Contributor address; City; State;		
	200 Crescent Ct Suite 1200 Dallas, TX	ζ 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor ut-of-state PAC (ID#	#:)	Amount of contribution (\$)
02/13/2010	Andrew Montoya		
02/13/2019 100.00			
	Contributor address; City; State; 4050 Frankford Rd Suite 406 Dallas, TX	Zip Code X 75287	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of contribution (\$)
01/11/2019	Gina Montoya		250.00
	Contributor address; City; State;	Zip Code	
		d, CA 91601	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: 83 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/04/2019	Robert Montoya		1000.00
	6 Contributor address; City; State;	Zip Code	
	809 Pearl Dr Southlak	ke, TX 76092	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Orthodontist		Montoya Orthodont	tics
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/14/2019	Rose Montoya		200.00
	Contributor address; City; State;	Zip Code	
	7835 El Pensador Dr Dallas, T	ΓX 75248	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/25/2019	Rose Montoya		100.00
	Contributor address; City; State; 7835 El Pensador Dr Dallas, T	Zip Code ΓX 75248	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/26/2019	Linda G Moore		250.00
		Zip Code ΓX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 84 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/22/2019 Sue G Glover Mottinger			500.00
	6 Contributor address; City; State	; Zip Code	
	3308 Gatwick Pl Dallas,	TX 75234	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Retired		Retired	
Date	Full name of contributor out-of-state_PAC	(ID#:)	Amount of contribution (\$)
01/22/2019	Nancy Mulder		100.00
01/22/2019	Contributor address; City; State		100.00
	,	TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/07/2019	David Munson Jr	, "	1000.00
03/07/2019	Contributor address; City; State;		1000.00
		TX 75220	
Principal occup Founder	pation / Job title (See Instructions)	Employer (See Instruct FOI Group LLC	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/07/2019	Melanie Myers	(ιοπ)	250.00
	Contributor address; City; State	; Zip Code	
		TX 75214	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruc	tions)
FIIIСІРАІ ОССИ _Г	ration / Job title (See Instructions)	Employer (See instruc	uons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 85 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/05/2019 Sharla Myers			250.00
	6 Contributor address; City; State;	Zip Code	
	4366 Shady Bend Dr Dallas, T	ГХ 75244	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/27/2019	Alma Nachawati		5000.00
	Contributor address; City; State;	Zip Code	
	6714 Glendora Ave Dallas, 7	TX 75230	
Principal occup Self-employed	pation / Job title (See Instructions)	Employer (See Instructi Self-employed	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/27/2019	Majed Nachawati		5000.00
	Contributor address; City; State; 6714 Glendora Ave Dallas, 7	Zip Code TX 75230	
	0714 Giendora Ave Danas, 1	TX 73230	
Principal occup Partner	pation / Job title (See Instructions)	Employer (See Instruct Fears Nachawati Pl	ions) lc
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/06/2019	Juanita Nanez		100.00
	Contributor address; City; State; 3842 Medallion Ln Dallas, 7		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 86 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of contribution (\$)
01/14/2019	Irene Natividad		500.00
	6 Contributor address; City; State	; Zip Code	
	1100 G St NW Suite 700 Washir	ngton, DC 20005	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
President		GlobeWomen Rese	earcy & Education Institute
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Erika Nazem		
03/21/2019			5000.00
	Contributor address; City; State 6125 Luther Ln Dallas,		
	0123 Luttier Lit Dallas,	TX 75225	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/06/2019	Clifton Nixon		1000.00
	Contributor address; City; State; 4442 Hockaday Dr Dallas,	; Zip Code TX 75229	
Principal occup Contract Admi	pation / Job title (See Instructions)	Employer (See Instruction Subfloor Systems,	tions) Inc.
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/18/2019	Dr Michael	,	250.00
		; Zip Code TX 75231	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 87 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/11/2019	Joe Norton		250.00
	6 Contributor address; City; State;	Zip Code	
	8452 Garland Rd Dallas, 7	TX 75218	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
	,	3	,
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/31/2019	Joe Norton		250.00
01/31/2019	Contributor address; City; State;	; Zip Code	230.00
		TX 75218	
	<u> </u>		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/25/2019	Joe Norton		100.00
	Contributor address; City; State;	Zip Code	
		TX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(10#-	Amount of contribution (\$)
03/25/2019	Joe Norton	(ID#:)	250.00
03/23/2019			230.00
		Zip Code TX 75218	
	5152 Gariane Re Banas,	171 /3210	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 88 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/24/2019	Deborah Nugent		100.00
	6 Contributor address; City; State;	; Zip Code	
	4717 Mill Run Rd Dallas,	TX 75244	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/06/2019	Erle Nye		500.00
	Contributor address; City; State;		
	8523 Thackery St Suite 9114 Dallas,	TX 75225	
Principal occup Consultant	pation / Job title (See Instructions)	Employer (See Instruct EN Consulting	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/09/2019	Brian OShea		100.00
	Contributor address; City; State; 6330 Sudbury Dr Dallas,	; Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/08/2019	Kelly Oberheiden		5000.00
	Contributor address; City; State;	; Zip Code TX 75205	
Principal occupation / Job title (See Instructions) Homemaker Employer (See Instruct Not employed			tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 89 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
01/18/2019	Nick Oberheiden		5000.00
01/16/2019	6 Contributor address; City; State	e: Zip Code	3000.00
	_	, TX 75240	
9 Principal conv	nation / Joh title (Cae Instructions)	C. Employer (Co. Instruct	*iono)
8 Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instruct Oberheiden PC	lions)
Attorney		Oberneiden i C	
Date	Full name of contributor ut-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/01/2019	Larry Offutt		250.00
02/01/2019	Contributor address; City; State	e; Zip Code	250.00
		AS, TX 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
01/1/2010	Kristin Olsson		
01/16/2019 200.00			
	Contributor address; City; State 11127 Midway Rd Dallas,	; Zip Code , TX 75229	
	11127 Midway Ku Danas,	1 X 1322)	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	E. II. a see of a satisfactory		
	Full name of contributor out-of-state PAC Kristin Olsson	C (ID#:)	Amount of contribution (\$)
03/22/2019			200.00
	Contributor address; City; State 11127 Midway Rd Dallas,	e; Zip Code , TX 75229	
	11127 Wildway Ku Dallas,	1 X 13229	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
	,		,
		<u></u>	

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 90 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
03/07/2019	Nina M Orendain		100.00
	6 Contributor address; City; State;	Zip Code	
	6126 Symphony Ln Dallas, T	TX 75227	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
02/05/2019	Yvette Ostolaza		250.00
	Contributor address; City; State;	Zip Code	
	2021 Mckinney Ave Dallas, T	TX 75201	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
01/20/2019	Jennifer Owen		250.00
	Contributor address; City; State;	Zip Code	
	6541 Arborist Ln Dallas, T	·	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/16/2019	Joan Oxford		1000.00
	Contributor address; City; State;		
	5415 Palomar Ln Dallas, T		
Principal occur	nation / Job title (See Instructions)	Employer (See Instructi	ons)
Retired	autority cost time (cost mondonerie)	Retired	one,
	1		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 91 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/16/2019	Terry Oxford		1000.00
	6 Contributor address; City; State	; Zip Code	
	5415 Palomar Ln Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Attorney		Susman Godfrey	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/07/2019	Ann Marie Painter		1000.00
03/07/2019	Contributor address; City; State	; Zip Code	1000.00
	•	TX 75201	
	500 I (Thara St Saite 5500 Bailes,	111 / 3201	
	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Attorney		Perkins Coie	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/22/2019	Kyle Park		250.00
	Contributor address; City; State;	Zip Code	
	6304 Dysart Cir Dallas,	TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/14/2019	Emily Parker		500.00
	Contributor address; City; State	; Zip Code	
		TX 75231	
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruc Thompson & Knig	tions) ht LLP

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 92 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/11/2019	Mark Parker		2500.00
	6 Contributor address; City; State;	Zip Code	
	3525 Turtle Creek Blvd Suite 11A Dallas,	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Physician		Self-employed	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/27/2019	Russ Pate		50.00
	Contributor address; City; State;	Zip Code	
	1737 Mapleton Dr Dallas, 7	TX 75228	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
i inicipal occup		Employer (Goo mondon	(Che)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Russ Pate	(.2.,	
03/22/2019			25.00
	Contributor address; City; State; 1737 Mapleton Dr Dallas, 7	Zip Code TX 75228	
	Tro, maproon 21	111 70220	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/25/2019	Carrin Patman	,	500.00
	Contributor address; City; State;	Zip Code	
	· · · · · · · · · · · · · · · · · · ·	n, TX 77098	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructi Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 93 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/04/2019	Dan Patterson		500.00
03/01/2019	6 Contributor address; City; State;	Zip Code	200.00
	1909 Woodall Rodgers Fwy Suite 57% allas,	TX 75201	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Self-employed		Patterson Thoma F	
			•
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/13/2019	Lynette Payne		250.00
	Contributor address; City; State;		
	6106 Mimosa Ln Dallas,	TX 75230	
Principal accur	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Fillicipal occup	ation / Job title (See instructions)	Employer (See instruct	ions)
Date		(ID#:)	Amount of contribution (\$)
02/11/2019	Rena Pederson		100.00
	Contributor address; City; State;	·	
	5806 Over Downs Dr Dallas,	TX 75230	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full reason of contributors		
	Full name of contributor ☐ out-of-state PAC Lucilo Peña	(ID#:)	Amount of contribution (\$)
01/28/2019			500.00
	Contributor address; City; State; 1717 Arts Plz Suite 2311 Dallas,	Zip Code TX 75201	
	2,11,12,012,000,000,000,000,000,000,000,	111 / 0 2 0 1	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct Billingsley Co.	tions)
Architect Billingsley Co.			

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 94 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
03/06/2019	Joe Perales		100.00
03/00/2017	6 Contributor address; City; State;	Zip Code	100.00
	P.O. Box 571641 Dallas,	TX 75357	
O Deire in all account			:N
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/15/2019	Vincent W Perini		500.00
	Contributor address; City; State;		
	3526 Wycliff Ave Dallas, 7	TX 75219	
Attorney	ation / Job title (See Instructions)	Employer (See Instruct Self-employed	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/19/2019	Mark Perkins		500.00
01, 13, 2013	Contributor address; City; State;	Zip Code	
		TX 75220	
Principal occuր Writer	pation / Job title (See Instructions)	Employer (See Instruct SullivanPerkins	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/28/2019	Margot Perot		5000.00
	Contributor address; City; State;		
		TX 75229	
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 95 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/22/2019	Beth K Pfeiffer		2000.00
02, 22, 2019	6 Contributor address; City; State;	Zip Code	2000,000
	12 Cazenove St Boston,	, MA 02116	
·	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Retired		Retired	
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Karen Potasznik		100.00
	Contributor address; City; State;		
	7152 Dalewood Ln Dallas, '	TX 75214	
Principal occupation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/25/2019	Karen Potasznik		100.00
	Contributor address; City; State;	Zip Code	
	7152 Dalewood Ln Dallas, '	TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/08/2019	Will Pryor		500.00
	Contributor address; City; State;	; Zip Code TX 75229	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruct Self-employed	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 96 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/11/2019	Tegwin Pulley		250.00
02,11,2019	6 Contributor address; City; State;	; Zip Code	230.00
	11435 Hillcrest Rd Dallas,	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/18/2019	Janis J Quesada		500.00
	Contributor address; City; State;	; Zip Code	
	4523 Bluffview Blvd Dallas,	TX 75209	
Principal occup Professor	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/13/2019	Tarek L Radjef		100.00
03/13/2019	Contributor address; City; State;	Zip Code	100.00
		TX 75287	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/05/2019	Florentino Ramirez	, (,	500.00
30,30,2013	Contributor address; City; State; 9222 Canter Dr Dallas,	; Zip Code TX 75231	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruct Ramirez & Associa	ions) ites, P.C.

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 97 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
03/12/2019	Jaime Ramon	100.00	
	6 Contributor address; City; State;	Zip Code	
	4 Cape Ct Dallas, T	TX 75230	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/20/2019	Curtis Ransom		1250.00
	Contributor address; City; State;	Zip Code	
	2848 Woodside St Suite 301 Dallas, T	TX 75204	
Principal occup Owner	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/05/2019	Karl Rathjen		2000.00
	Contributor address; City; State; Zip Code 3924 Shenandoah St Dallas, TX 75205		
Principal occur Physician	pation / Job title (See Instructions)	Employer (See Instruct Tx Scottish Rite Ho	ions) ospital
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/11/2019	Gunnar S Rawlings		200.00
	Contributor address; City; State; 4807 Swiss Ave Dallas, T		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 98 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/08/2019	Robert S Raymar		250.00
02/00/2019	6 Contributor address; City; State;	Zip Code	230.00
	1007 Ridge Dr Union, I	NJ 07083	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/14/2019	Dorothy Reeder		100.00
	Contributor address; City; State; Zip Code		
	3140 Stanford Ave Dallas, 7	TX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor uut-of-state PAC ((ID#:)	Amount of contribution (\$)
02/27/2019	Angel L Reyes		500.00
	Contributor address; City; State; 8222 Douglas Ave Dallas,	Zip Code	
Principal occup Owner	ation / Job title (See Instructions)	Employer (See Instruct Angel L. Reyes & A	ions) Associates, P.C.
Date	Full name of contributor		A
	Full name of contributor □ out-of-state PAC (Jeffrey A Rich	(ID#:)	Amount of contribution (\$)
03/20/2019			2500.00
	· · · · · · · · · · · · · · · · · · ·	Zip Code TX 75205	
Principal occup CEO	ation / Job title (See Instructions)	Employer (See Instruct PlumTree Partners	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 99 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/07/2019	Anthony D Rios		100.00
	6 Contributor address; City; State;	l l	
	1814 Stevens Bluff Ln Dallas, T	ΓX 75208	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
6 Filicipal occu	Sation / Job title (See Instructions)	g Employer (See instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
01/31/2019	Robert Hinton and Associates PC		500.00
01/31/2019	Contributor address; City; State;	Zip Code	300.00
		ГX 75219	
	3300 Maple 11ve Buile 100 Builds, 1		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	(ID#.)	
Date	Patricia Rochelle	(ID#:)	Amount of contribution (\$)
01/11/2019	raticia Rochene		1000.00
Contributor address; City; State; Zip Code			
	4502 Abbott Ave Suite 216 Dallas, T	ΓX 75205	
Principal occur	nation / Job title (See Instructions)	Employer (See Instruct	ions)
Attorney		Self-employed	(3.15)
Date		(ID#:)	Amount of contribution (\$)
03/15/2019	Alice Rodriguez		200.00
	Contributor address; City; State;		
		ΓX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 100 of 126
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/22/2019	Rudy Rodriguez		100.00
	6 Contributor address; City; State;	Zip Code	
	4647 Hallmark Dr Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/30/2019	William L Rogers		1000.00
	Contributor address; City; State;	Zip Code	
	100 Crescent Ct Suite 450 Dallas,	TX 75201	
Principal occup Investor	ation / Job title (See Instructions)	Employer (See Instruct TexWest LLC	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/07/2019	Greg Rohan		250.00
	Contributor address; City; State; 3715 Cragmont Ave Dallas,	Zip Code TX 75205	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/21/2019	Maria Romero		100.00
		Zip Code I, TX 75043	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 101 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
02/07/2019 Richard Roper			500.00
	6 Contributor address; City; State;	Zip Code	
	9013 Ranch Bluff Ct Benbroo	k, TX 76126	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Attorney		Thompson & Knigh	nt, LLP
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/22/2019	Barbara E Rosenberg		250.00
	Contributor address; City; State;	Zip Code	
	6946 Casa Loma Ave Dallas, T	TX 75214	
Principal occupation / Job title (See Instructions) Employer (See Instru			ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/18/2019	Brent Rosenthal		500.00
02/18/2019	Contributor address; City; State; Zip Code		300.00
		ΓX 75214	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instructi Rosenthal Weiner L	ions) LLP
-			
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
03/11/2019	Shirley Rowe		100.00
	Contributor address; City; State;		
	9910 Royal Ln Suite 707 Dallas, T	TX 75231	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 102 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor ☐ out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
02/11/2019	Bobby Rubarts		1000.00
02,11,2019	6 Contributor address; City; State;	; Zip Code	1000.00
	5110 Tanbark Rd Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Attorney		Koning Rubarts LL	
Date	Full name of contributor ut-of-state PAC	; (ID#:)	Amount of contribution (\$)
01/23/2019	Andres Ruzo		250.00
	Contributor address; City; State;	; Zip Code	
	7139 Hillgreen Dr Dallas,	TX 75214	
Principal occupation / Job title (See Instructions) Employer (See Instru		Employer (See Instruct	ions)
Date	Full name of contributor	(ID#.	
	Melissa Saldana	; (ID#:)	Amount of contribution (\$)
03/19/2019			100.00
	Contributor address; City; State; 5050 Capitol Ave Suite 116 Dallas,	; Zip Code TX 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
		<u> </u>	
Date	Full name of contributor	; (ID#:)	Amount of contribution (\$)
03/25/2019	Roger Sanders	,	1000.00
		z; Zip Code an, TX 75090	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instruct Sanders, Motley, Y	tions) oung, and Gallardon PPLC

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 103 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
02/19/2019	Patrick Sargent		500.00
02/19/2019	6 Contributor address; City; State;	Zip Code	300.00
	3510 Turtle Creek Blvd Suite 2A Dallas, 7	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Attorney	salen / ees mendenens)	Alston & Bird	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
03/09/2019	Michael Saslaw		250.00
	Contributor address; City; State;		
	6615 Lakehurst Ave Dallas, 7	TX 75230	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)
i ilicipai occup	audit / 300 title (See instructions)	Employer (Gee mande)	ions
	_		
Date		(ID#:)	Amount of contribution (\$)
02/26/2019	Catherine Saxon		100.00
	Contributor address; City; State;	•	
	3609 Cragmont Ave Dallas, 7	TX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/06/2019	Pete Schenkel	(10#)	500.00
02/00/2017	Contributor address:		300.00
	Contributor address; City; State; 614 N Bishop Ave Suite 3 Dallas, 7	TX 75208	
	•		
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Retired		Retired	

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SCHEDULE A1

The	Instruction Guide explains how	to complete this	s form.	1 Total pages Schedule A1: 104 of 126
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor	out-of-state PAG	C (ID#:)	7 Amount of contribution (\$)
03/21/2019 Angela Scheuerle				100.00
	6 Contributor address;	City; State	e; Zip Code	
	9702 Vinewood Dr	Dallas	, TX 75228	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/25/2019	Angela Scheuerle			50.00
	Contributor address;		e; Zip Code	
	9702 Vinewood Dr	Dallas	, TX 75228	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/21/2019	Rodney B Schpok			100.00
	Contributor address;	City; State	e; Zip Code	
	5622 E Mockingbird Ln	Dallas	, TX 75206	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
02/27/2019	Sally Schreiber	_		500.00
	Contributor address; 2737 Purdue Ave	City; State	e; Zip Code , TX 75225	
Principal occup Retired	pation / Job title (See Instructions)		Employer (See Instruc Retired	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 105 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
03/23/2019	Michael R Schulman		250.00
	6 Contributor address; City; State;	Zip Code	
	5004 Dublin Creek Ln Parker,	TX 75002	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/23/2019	Debbie Scripps		500.00
	Contributor address; City; State;	Zip Code	
	5433 Wateka Dr Dallas,	TX 75209	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/23/2019	Debbie Scripps		100.00
	Contributor address; City; State; 5433 Wateka Dr Dallas,	Zip Code TX 75209	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#·	Amount of contribution (\$)
02/25/2019	Antoinette Sedillo Lopez	, (,	250.00
		Zip Code erque, NM 87108	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)
	·		

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 106 of 126				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)	
03/15/2019	Fred Shapiro		200.00	
	6 Contributor address; City; State;	; Zip Code		
	5724 Glen Falls Ln Dallas,	TX 75209		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			tions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
01/23/2019	Janice Sharry		1000.00	
01/23/2019	Contributor address; City; State:	; Zip Code	1000.00	
	6422 Orchid Ln Dallas,	TX 75230		
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Haynes and Boone	ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/10/2019	Allyson Sheckler		1000.00	
	Contributor address; City; State;	; Zip Code		
	500 Atlantic Ave Suite 16P Boston,	, MA 02210		
Principal occup Professor	ation / Job title (See Instructions)	Employer (See Instruct Stonehill College	tions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
03/07/2019	Debbie Shon		5000.00	
	Contributor address; City; State:			
	1300 I St NW Suite 900 Washin	ngton, DC 20005		
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Instruct Quinn Emanuel	tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 107 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
01/18/2019	Judith Shure		500.00
	6 Contributor address; City; State;	Zip Code	
	4501 Pomona Rd Dallas, 7	ΓX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Retired		Retired	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
	Judith Shure		.,,
02/27/2019	Contributor address; City; State;	Zin Code	500.00
	• • • • • • • • • • • • • • • • • • • •	ГX 75209	
	1301 Tomona Ra	111 /320)	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct Retired	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
01/23/2019	Roberto Siewczynki		250.00
	Contributor address; City; State;	Zip Code	
	9322 Alta Mira Dr Dallas, 7	ΓX 75218	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
Date	Full name of contributor	(ID#·)	Amount of contribution (\$)
03/16/2019	Jodi Williamson Simons	,	250.00
00,10,201,		Zip Code son, TX 75081	20000
Principal occup	vation / Job title (See Instructions)	Employer (See Instruct	ions)
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this form	1.	1 Total pages Schedule A1: 108 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ontoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
01/26/2019	Vanna Slaughter		250.00
01/20/2019	6 Contributor address; City; State; Z	ip Code	250.00
	5912 Reiger Ave Dallas, TX	75214	
8 Principal occu	pation / Job title (See Instructions)	 Employer (See Instructio	ns)
	,		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/09/2019	Gail B Smith		100.00
		ip Code	
	6326 Meadow Rd Dallas, TX	75230	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)
	, ,		<i>.</i>
Date	Full name of contributor out-of-state_PAC (ID#:)	Amount of contribution (\$)
02/19/2019	Keller Smith		100.00
02, 19, 2019	Contributor address; City; State; Z	p Code	100.00
	1403 Slocum St Suite 207 Dallas, TX	•	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)
D			
Date	Full name of contributor out-of-state_PAC (ID#:_ Michael Snipes)	Amount of contribution (\$)
01/31/2019			500.00
	Contributor address; City; State; Z 101 S Brookside Dr Suite 2107 Dallas, TX	·	
	Tor 5 Brookside Br Saite 2107 Banas, 171	73211	
Principal occu Visiting Judge	pation / Job title (See Instructions)	Employer (See Instruction State of Texas	ns)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 109 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC (I	(ID#:)	7 Amount of contribution (\$)	
02/06/2019	Michael Snipes		250.00	
	6 Contributor address; City; State;	Zip Code		
	101 S Brookside Dr Suite 2107 Dallas, TX 75214			
8 Principal occupation / Job title (See Instructions) 9 Employer (S			ions)	
Visiting Judge		State of Texas		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/20/2019	Michael Snipes		250.00	
02/20/2019	Contributor address; City; State;		250.00	
101 S Brookside Dr Suite 2107 Dallas, TX 75214				
	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Visiting Judge		State of Texas		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/22/2019	Michael Snipes		250.00	
	Contributor address; City; State;	Zip Code		
	101 S Brookside Dr Suite 2107 Dallas, T	ΓX 75214		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/25/2019	Michael Snipes		25.00	
	Contributor address; City; State;	Zip Code		
	101 S Brookside Dr Suite 2107 Dallas, T	ГХ 75214		
Principal occup Visiting Judge	pation / Job title (See Instructions)	Employer (See Instruct State of Texas	ions)	

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 110 of 126					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Ms Regina T Mo	ntoya					
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)			
02/27/2019 Carl Soderstrom 100.00						
	6 Contributor address; City; State;	Zip Code				
	6 Green Park Dr Dallas, 7	TX 75248				
8 Principal occu	nation / lob title (See Instructions)	9 Employer (See Instructi	tions)			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)			ions)			
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)			
03/19/2019	Carl Soderstrom		100.00			
03/19/2019	Contributor address; City; State;	Zip Code	100.00			
		TX 75248				
	o officer fark by	174 / 5240				
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)			
Date	Full name of contributor	(ID#-				
	Eliza Solender	(ID#:)	Amount of contribution (\$)			
02/17/2019	Eliza Solelider		250.00			
	Contributor address; City; State;	·				
	5440 Del Roy Dr Dallas, 7	TX 75229				
Principal coour	pation / Joh title (See Instructions)	Employer (See Instruct	tions)			
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
Date	Full name of contributor out-of-state_PAC ((ID#:)	Amount of contribution (\$)			
01/14/2019	Suzanne Sprague-Trammell		250.00			
	Contributor address; City; State;	Zip Code				
		TX 75230				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)			
	-					

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 111 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mor	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/20/2019	Molly Steele		100.00
03/20/2019	6 Contributor address; City; State;	Zip Code	100.00
	7606 Meadow Rd Dallas, T	ΓX 75230	
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Sandy Steinbach		.,,
03/11/2019		Zin Codo	250.00
		Zip Code ΓX 75214	
	7050 TORAIOII DI Danas, 1	1A /3214	
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/21/2019	Ronald Steinhart		500.00
	Contributor address; City; State; 25 Robledo Dr Dallas, T	Zip Code ΓX 75230	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instructi Retired	ions)
Date		(ID#:)	Amount of contribution (\$)
01/24/2019	Carri Coggins Stoltz		500.00
	Contributor address; City; State; 44 Shellwind Dr Savanna		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructi Retired	ions)
	ation / Job title (See Instructions)	Employer (See Instructi Retired	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 112 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/15/2019	Judy Stubbs		100.00
	6 Contributor address; City; State;	Zip Code	
	4633 Cherokee Trl Dallas, T	ГХ 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/21/2019	John Sughrue		500.00
	Contributor address; City; State;		
	1807 Ross Ave Suite 250 Dallas, T	ΓX 75201	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct Brook Partners, Inc	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/11/2019	Rebecca R Sykes		250.00
	Contributor address; City; State; 3617 Cragmont Ave Dallas, 7	Zip Code ΓX 75205	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/22/2019	Lee Taft		100.00
	Contributor address; City; State; P.O. Box 192479 Dallas, 7		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 113 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/03/2019	Henry Talavera		250.00
	6 Contributor address; City; State;	Zip Code	
	18019 Windtop Ln Dallas, 7	TX 75287	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/11/2019	Vicky Teherani		500.00
03/11/2019	Contributor address; City; State;	Zip Code	300.00
	6419 Wickerwood Dr Dallas, 7	TX 75248	
Principal occup Financial Advi	pation / Job title (See Instructions)	Employer (See Instructi More2 Wealth Man	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/25/2019	Jonathan Thalheimer		500.00
	Contributor address; City; State; 4531 Cathedral Dr Dallas, 7	Zip Code TX 75214	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instructi McGuire Craddock	ions) & Strother PC
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
03/16/2019	Janet Tharp		100.00
	Contributor address; City; State; 7933 Goodshire Ave Dallas, 7	Zip Code TX 75231	
Principal occup	aation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

### Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Name Regina T Montoya 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of contribution (\$) 150.00 150.00 8 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: 100.00) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: 100.00) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: 100.00) Principal occupation / Job title (See Instructions) Attorney Date Contributor address: City: State: Zip Code Dallas, TX 75211 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Amount of contribution (\$) 100.00 Date Contributor address: City: State: Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Amount of contribution (\$) 250.00 Contributor address: City: State: Zip Code Dallas, TX 75214				
Ms Regina T Montoya 4 Date 5 Full name of contributor out-of-state PAC (ID# 150.00 1	Ms Regina T Montoya 4 Date 5 Full name of contributor out-of-state PAC (ID#:	Th	e Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 114 of 126
A Date 5 Full name of contributor	A Date 5 Full name of contributor out-of-state PAC (ID#:				3 Filer ID (Ethics Commission Filers)
Roslyn Dawson Thompson 150.00	Roslyn Dawson Thompson 6 Contributor address; City; State; Zip Code 12222 Merit Dr Dallas, TX 75251 Principal occupation / Job title (See Instructions) Date Full name of contributor Dallas, TX 75251 Principal occupation / Job title (See Instructions) Date Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor Dallas, TX 75251 Principal occupation / Job title (See Instructions) Attorney Date Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) Employer (See Instructions) Date Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 250.00 Amount of contribution (\$) 250.00 Cynthia Timms Contributor address: City; State; Zip Code Dallas, TX 75214	Ms Regina T M	ontoya		
6 Contributor address; City; State: Zip Code Dallas, TX 75225 8 Principal occupation / Job title (See Instructions) Date Date Full name of contributor James Tibbals Contributor address; City; State: Zip Code 12222 Merit Dr Dallas, TX 75251 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 1000.00 Date Full name of contributor Date Full name of contributor Martha Tiller Contributor address; City; State: Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-employed Amount of contribution (\$) 100.00 Amount of contribution (\$) 250.00 Date Full name of contributor Cynthia Timms Contributor address; City: State: Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75214	6 Contributor address; City: State: Zip Code 2 Abbotsford Ct Dallas, TX 75225 8 Principal occupation / Job title (See Instructions) Date Full name of contributor	4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
6 Contributor address; 2 Abbotsford Ct Dallas, TX 75225 8 Principal occupation / Job title (See Instructions) Date Date Date Sull name of contributor James Tibbals Contributor address; City: State: Zip Code 12222 Merit Dr Dallas, TX 75251 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 1000.00 Principal occupation / Job title (See Instructions) Attorney Date Full name of contributor Martha Tiller Contributor address; City: State: Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Amount of contribution (\$) 250.00 Date O3/04/2019 Full name of contributor Oynthia Timms Contributor address; 7008 Lakeshore Dr City: State: Zip Code Dallas, TX 75214	6 Contributor address; 2 Abbotsford Ct Dallas, TX 75225 8 Principal occupation / Job title (See Instructions) Date Full name of contributor	01/29/2019	Roslyn Dawson Thompson		150.00
Principal occupation / Job title (See Instructions) 9	8 Principal occupation / Job title (See Instructions) Date 02/06/2019 Full name of contributor James Tibbals Contributor address; 12222 Merit Dr Dallas, TX 75251 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Self-employed Amount of contribution (\$) 1000.00 Principal occupation / Job title (See Instructions) Attorney Amount of contribution (\$) 100.00 Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 250.00		6 Contributor address; City; State;	Zip Code	
Date 02/06/2019 Full name of contributor	Date Full name of contributor Out-of-state PAC (ID#:		2 Abbotsford Ct Dallas, 7	ΓX 75225	
Date Full name of contributor address; City; State; Zip Code 12222 Merit Dr Dallas, TX 75251	Date Contributor address; City; State; Zip Code Dallas, TX 75251	8 Principal occ	supation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Contributor address; City; State; Zip Code 12222 Merit Dr	Contributor address; City; State; Zip Code 12222 Merit Dr	Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code 12222 Merit Dr Dallas, TX 75251 Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Self-employed Amount of contribution (\$) 100.00 Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Amount of contribution (\$) 250.00 Contributor address; City; State; Zip Code Dallas, TX 75214	Contributor address; City; State; Zip Code 12222 Merit Dr Principal occupation / Job title (See Instructions) Attorney Date 03/20/2019 Principal occupation / Job title (See Instructions) Martha Tiller Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) 250.00 Contributor address; City; State; Zip Code 03/04/2019 Contributor address; City; State; Zip Code Dallas, TX 75214	02/06/2019			1000.00
Principal occupation / Job title (See Instructions) Attorney Date O3/20/2019	Principal occupation / Job title (See Instructions) Attorney Date O3/20/2019				
Attorney Date Full name of contributor out-of-state PAC (ID#:	Attorney Date Full name of contributor out-of-state PAC (ID#:		12222 Merit Dr Dallas, 7	ΓX 75251	
Martha Tiller Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 03/04/2019 Full name of contributor Cynthia Timms Contributor address; 7008 Lakeshore Dr City; State; Zip Code Dallas, TX 75214	Martha Tiller Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 03/04/2019 Full name of contributor Cynthia Timms Contributor address; City; State; Zip Code 7008 Lakeshore Dr Dallas, TX 75214	-	upation / Job title (See Instructions)		ions)
O3/20/2019 Martha Tiller Contributor address; A201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date O3/04/2019 Full name of contributor Cynthia Timms Contributor address; Toty: State: Zip Code Dallas, TX 75214 City: State: Zip Code Dallas, TX 75214	Martha Tiller Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date 03/04/2019 Full name of contributor Cynthia Timms Contributor address; City; State; Zip Code 7008 Lakeshore Dr City; State; Zip Code Dallas, TX 75214	Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#: Amount of contribution (\$) 250.00 Contributor address; City; State; Zip Code 7008 Lakeshore Dr Dallas, TX 75214	Contributor address; City; State; Zip Code 4201 Lomo Alto Dr Suite 111 Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Cynthia Timms Contributor address; City; State; Zip Code 7008 Lakeshore Dr Dallas, TX 75214	03/20/2019	Martha Tiller		
Date 03/04/2019 Full name of contributor Cynthia Timms Contributor address; 7008 Lakeshore Dr Contributor address; City; State; Zip Code Dallas, TX 75214 Amount of contribution (\$) 250.00	Date 03/04/2019 Full name of contributor Cynthia Timms Contributor address; 7008 Lakeshore Dr Contributor address; City; State; Zip Code Dallas, TX 75214 Amount of contribution (\$) 250.00				
Cynthia Timms Contributor address; City; State; Zip Code Tools Lakeshore Dr Contributor address; Dallas, TX 75214	Cynthia Timms Contributor address; City; State; Zip Code 7008 Lakeshore Dr Contributor address; Dallas, TX 75214	Principal occi	upation / Job title (See Instructions)	Employer (See Instruct	ions)
Cynthia Timms Contributor address; City; State; Zip Code Tools Lakeshore Dr Contributor address; Dallas, TX 75214	Cynthia Timms Contributor address; City; State; Zip Code 7008 Lakeshore Dr Contributor address; Dallas, TX 75214	Date	Full name of contributor	(15)	Amount of contribution (\$)
Contributor address; City; State; Zip Code 7008 Lakeshore Dr Dallas, TX 75214	Contributor address; City; State; Zip Code 7008 Lakeshore Dr Dallas, TX 75214			,ID#:	· · ·
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State;	; Zip Code	200.00
		Principal occ	upation / Job title (See Instructions)	Employer (See Instruct	tions)

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SCHEDULE A1

The	e Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 115 of 126
2 FILER NAME	:		3 Filer ID (Ethics Commission Filers)
Ms Regina T M	ontoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
01/18/2019	Sandra Tinkham		250.00
V1 , = 3, = 1	6 Contributor address; City; State;	Zip Code	200.00
	1010 Wimberly Ct Allen, T	TX 75013	
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruct	cions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/04/2019	Lawrence A Traub		200.00
	Contributor address; City; State;	Zip Code	
	4500 Fairway Ave Dallas,	TX 75219	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
02/04/2019	James Trester		2500.00
	Contributor address; City; State; 5431 Lobello Dr Dallas,	Zip Code TX 75229	
Principal occu Consultant	upation / Job title (See Instructions)	Employer (See Instruct Ryan, LLC	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/22/2019	Jessica Trevizo		1000.00
	Contributor address; City; State; 6832 Park Ln Dallas,		
Principal occu Assistant Dis	pation / Job title (See Instructions) trict Attorney	Employer (See Instruct Dallas County	cions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 116 of 126					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Ms Regina T Mo	ntoya				
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)		
03/10/2019 Jessica Trevizo 25.00					
	6 Contributor address; City; State;	Zip Code			
	6832 Park Ln Dallas, 7	TX 75225			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)		
Assistant District Attorney Dallas County					
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)		
02/08/2019	Charlie Tupper Jr		250.00		
	Contributor address; City; State;	1			
	1154 N Windomere Ave Dallas, 7	TX 75208			
Principal accum	ation / Job title (See Instructions)	Employer (See Instruct	iona)		
гинсіраї оссир	ation / Job title (See Histractions)	Employer (See instruct	ions)		
Date		(ID#:)	Amount of contribution (\$)		
01/31/2019	Catherine Turner		250.00		
	Contributor address; City; State;	Zip Code			
	6312 Chesley Ln Dallas, 7	TX 75214			
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)		
03/25/2019	Tim Umholtz	,	250.00		
00, 20, 2019	Contributor address; City; State;	Zin Codo	255.55		
		TX 75209			
	,				
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)		
	1				

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SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 117 of 126					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Ms Regina T Mo	ntoya					
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)			
01/12/2019	Phillip C Umphres		250.00			
	6 Contributor address; City; State;	Zip Code				
	8627 Royalbrook Ct Dallas, 7	TX 75243				
9 Deinsing see	nation / Joh title (Cae Instructions)	Contaver (Contactive	iona)			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)			
01/20/2010	Lupe Valdez		250.00			
01/29/2019		Zin Code	250.00			
	<u>-</u>	TX 75222				
	1.0. Box 227301 Dallas,	1X 13222				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)			
Date		(ID#:)	Amount of contribution (\$)			
02/01/2019	Lupe Valdez		200.00			
	Contributor address; City; State;	Zip Code				
	P.O. Box 227501 Dallas, 7	TX 75222				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)			
02/08/2019	Lupe Valdez	(15)1	250.00			
02/08/2019			230.00			
		Zip Code TX 75222				
	1.0. Box 22/301	111 /3222				
Principal occur	pation / Job title (See Instructions)	Employer (See Instruct	ions)			
	,	. , ,	,			

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SCHEDULE A1

The	Instruction Guide explains how to complete this 1	form.	1 Total pages Schedule A1: 118 of 126	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
03/04/2019	Lupe Valdez		200.00	
	6 Contributor address; City; State;	Zip Code		
	P.O. Box 227501 Dallas, 7	TX 75222		
O Deireireles			:	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/19/2019	Lupe Valdez		100.00	
00,19,2019	Contributor address; City; State;	Zip Code	100.00	
	P.O. Box 227501 Dallas, 7	TX 75222		
	,			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
03/12/2019	Jon Vein		250.00	
Contributor address; City; State; Zip Code 29015 Clevis Rd Rancho Palos Verdes, CA 90275				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
01/22/2019	Sol Villasana	,	250.00	
01/22/2019	Contributor address:		230.00	
	Contributor address; City; State; 809 Village Green Dr Rockwa	all, TX 75087		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 119 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of contribution (\$)
03/25/2019	Sol Villasana		200.00
03/20/2019	6 Contributor address; City; State;	Zip Code	200.00
	809 Village Green Dr Rockwall,	TX 75087	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
	,		,
Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)
02/22/2019	Mary Vogelson		100.00
		Zip Code	
	9316 Guernsey Ln Dallas, TX	75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)
03/20/2019	Philip Walker		100.00
03/20/2019	Contributor address; City; State; Z	Zip Code	100,00
	4326 Merrell Rd Dallas, TX	·	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)	Amount of contribution (\$)
02/20/2019	Thomas B Walsh IV		500.00
	Contributor address; City; State; Z		
	11007 Tibbs St Dallas, TX	75230	
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructi Winston & Strawn I	ons) T D
Attorney		Whiston & Strawn 1	31.1

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 120 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	G (ID#:)	7 Amount of contribution (\$)
02/22/2019	Donna Ward		1000.00
02/22/2019	6 Contributor address; City; State	; Zip Code	1000.00
	232 Emerald Ln Palm B	Beach, FL 33480	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Theatre Consu		Self-employed	
Date	Full name of contributor ut-of-state PAC	C (ID#:)	Amount of contribution (\$)
02/12/2019	Esmer Wear		100.00
		e; Zip Code	
	6915 Lindsley Ave Dallas,	TX 75223	
5			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/15/2019	Hilary Weinstein		100.00
00, 10, 2019	Contributor address; City; State	: Zip Code	100,000
	-	orth, TX 76107	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor) (ID#:)	Amount of contribution (\$)
01/23/2019	Les Weisbrod	,	1000.00
	Contributor address; City; State	· · Zip Code	
		TX 75230	
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Miller Weisbrod		tions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: 121 of 126		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Ms Regina T Mo	ntoya				
4 Date	5 Full name of contributor out-of-state PAC (ID	#:)	7 Amount of contribution (\$)		
02/28/2019	Mark S Werbner		500.00		
02, 20, 2013	6 Contributor address; City; State;	Zip Code			
	5543 Caruth Blvd Dallas, T2	X 75209			
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Attorney	, ,	Werbner LLC	,		
Date	Full name of contributor	#:)	Amount of contribution (\$)		
02/13/2019	James White		100.00		
	Contributor address; City; State;	Zip Code			
	12330 Creekspan Dr Dallas, TX	K 75243			
Principal occur	pation / Job title (See Instructions)	Employer (See Instruction	ane)		
i ilicipai occu	valion 7 dob title (dee instructions)	Employer (Gee mandello	7113)		
Date		#:)	Amount of contribution (\$)		
02/22/2019	Sally White		100.00		
Contributor address; City; State; Zip Code					
	10251 Kilkenny Pl Dallas, TX	ζ 75228			
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Date	Full name of contributor out-of-state PAC (ID		Amount of contribution (\$)		
03/19/2019	David Whitten	#·	100.00		
03/19/2019			100.00		
	Contributor address; City; State; 8123 San Fernando Way Dallas, T2	•			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 122 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
03/11/2019	Elaine Wiant		100.00
03/11/2017	6 Contributor address; City; State;	Zip Code	100.00
		TX 75240	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/24/2019	Ben Wilkins		100.00
U2/24/2017	Contributor address; City; State;	Zip Code	100.00
		TX 75206	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
	Linda Wilkins	, "	
03/01/2019 250.00			250.00
	-	Σip Gode ΓX 75038	
	1710 1101001 21	171 73030	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor		
	Kathryn Wilkinson	(ID#:)	Amount of contribution (\$)
03/22/2019			500.00
	Contributor address; City; State; 3705 W Beverly Dr Dallas, 7	Zip Code TX 75209	
	3700 11 Bevery 21	IN 13203	
Principal occur	nation / Job title (See Instructions)	Employer (See Instruct Caliber Home Loan	ions)
Mortgage Len	ler	Caliber Home Loan	is
	<u> </u>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1: 123 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of contribution (\$)
01/07/2019	J. McDonald Williams		1000.00
	6 Contributor address; City; S	tate; Zip Code	
	5646 Milton St Suite 407 Dal	las, TX 75206	
·	pation / Job title (See Instructions)	9 Employer (See Instruc	etions)
Chairman Eme	ritus	Belo	
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
01/25/2019	Patricia Winning		200.00
	Contributor address; City; S	tate; Zip Code	
	14752 Windward Ln Nap	oles, FL 34114	
Principal occupation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
03/22/2019	Patricia Winning		100.00
00, 22, 2019	Contributor address; City; Si	tate; Zip Code	155105
	14752 Windward Ln Nap	oles, FL 34114	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	l otions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
01/01/2019	Lisa M Winston Hicks	,	500.00
		tate; Zip Code las, TX 75208	
Principal occupation / Job title (See Instructions) Chairman of the Board		Employer (See Instruc MV Transportation	tions) 1

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SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 124 of 126		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Ms Regina T Mo	ntoya			
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)		
02/18/2019	Linda Wise	250.00		
	6 Contributor address; City; State; Zip Code			
	2719 San Jose Dr Dallas, TX 75211			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		tructions)		
Date	Full name of contributor	Amount of contribution (\$)		
03/22/2019	Women Organizing Women Democrats	2500.00		
	Contributor address; City; State; Zip Code			
	3013 Garden Ridge Ct Plano, TX 75025			
Principal occup	ation / Job title (See Instructions) Employer (See Instructions)	tructions)		
Date	Full name of contributor) Amount of contribution (\$)		
03/04/2019	Michael Wortley	250.00		
Contributor address; City; State; Zip Code 2801 Gateway Dr Suite 150 Irving, TX 75063				
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tructions)		
Date	Full name of contributor	_) Amount of contribution (\$)		
03/25/2019	Bonnie Wulff	100.00		
	Contributor address; City; State; Zip Code 5555 Wenonah Dr Dallas, TX 75209			
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	tructions)		

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 125 of 126
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Ms Regina T Mo	ntoya		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/25/2019	Felix Zamora		150.00
	6 Contributor address; City; State;	Zip Code	
	4127 Rainsong Dr Dallas,	TX 75287	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/22/2019	Sandra Zamora		500.00
	Contributor address; City; State;	; Zip Code	
	4222 Williamsburg Rd Dallas,	TX 75220	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Instruct McKesson Corpora	
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/09/2019	Veronica Zamora		100.00
	Contributor address; City; State; 4709 Forest Ln Dallas,	Zip Code TX 75244	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/01/2019	Full name of contributor out-of-state PAC James R Zavislak	(ID#:)	Amount of contribution (\$) 2000.00
	Contributor address; City; State;	; Zip Code TX 75202	
Principal occup Accountant	pation / Job title (See Instructions)	Employer (See Instruct James R. Zavislak,	ions) CPA

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SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 126 of 126					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Ms Regina T Mo	ntoya				
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)		
02/25/2019	Ann Zimmerman Gallant		500.00		
	6 Contributor address; City; State	; Zip Code			
	7231 Northaven Rd Dallas,	TX 75230			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)		
Researcher	pation / dob title (dde matractions)	Self-employed	10/13)		
researence					
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)		
02/11/2019	Cecilia McKay		500.00		
	Contributor address; City; State	e; Zip Code			
	14916 Havenshire Pl Dallas,	TX 75254			
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct Retired	tions)		
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)		
	Contributor address; City; State; Zip Code				
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)		
		e; Zip Code			
Duin aire al a consu		F	*: \		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	ATTACH ADDITIONAL CODIES O	E TUIC COUEDIII E AC NI			

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to co	mplete this form.		1 Total pages Sched	
2 FILER NAME Ms Regina T Montoya		;	Filer ID (Ethics Co	ommission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITIC	CAL CONTRIBU	JTIONS ;	\$	
14841 N Dallas Parkway Suite 14 Addis	State; Zip Code 45 on, TX 75254		Contribution \$	Catering for event on 1/23/2019 ide of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (S	ee Instructions)	11 Employer	(FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contribute	or's job title (FOR JU	JDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm	of contributor's spou	ise (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR	R JUDICIAL)			
Date Full name of contributor ☐ out-of-state 01/24/2019 Delia Jasso Contributor address; City; 821 Haines Ave Dallas	e PAC (ID#:			In-kind contribution description Catering cost for event on 1/23/2019 ide of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (S	ee Instructions)	Employer	(FOR NON-JUDICI	AL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contribute	or's job title (FOR JU	JDICIAL) (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) (FOI	R JUDICIAL)			
ATTACH ADDITIONA	AL COPIES OF TH	IIS SCHEDIJI	E AS NEEDED	

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

1 Total pages Schedule A2: 2 of 3		
3 Filer ID (Ethics Commission Filers)		
\$		
8 Amount of 9 In-kind contribution description 171.50 Catering event cost Check if travel outside of Texas. Complete Schedule T.		
yer (FOR NON-JUDICIAL)(See Instructions)		
outor's job title (FOR JUDICIAL) (See Instructions)		
rm of contributor's spouse (if any) (FOR JUDICIAL)		
Amount of In-kind contribution Contribution \$ description 171.50 Catering event cost Check if travel outside of Texas. Complete Schedule T.		
yer (FOR NON-JUDICIAL)(See Instructions)		
outor's job title (FOR JUDICIAL) (See Instructions)		
Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
DULE AS NEEDED		
- k - r -		

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

1 Total pages Schedule A2: 3 of 3	
3 Filer ID (Ethics Commission Filers)	
\$	
8 Amount of 9 In-kind contribution Contribution \$ description 343.00 Catering event cost Check if travel outside of Texas. Complete Schedule T.	
r (FOR NON-JUDICIAL)(See Instructions)	
tor's job title (FOR JUDICIAL) (See Instructions)	
of contributor's spouse (if any) (FOR JUDICIAL)	
Amount of In-kind contribution Contribution \$ description	
Check if travel outside of Texas. Complete Schedule T. r (FOR NON-JUDICIAL) (See Instructions)	
THE TRUIT OF THE T	
tor's job title (FOR JUDICIAL) (See Instructions)	
w firm of contributor's spouse (if any) (FOR JUDICIAL)	
LE AS NEEDED	

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

LOANS SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. 1 of 1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Ms Regina T Montoya 0 4 TOTAL OF UNITEMIZED LOANS \$ 9 Loan Amount (\$) Date of loan Name of lender out-of-state PAC (ID#:_ 03/18/2019 Regina Montoya 50000.00 10 Interest rate Is lender 8 Lender address; City; State; Zip Code a financial 0.% Institution? 5230 Lobello Dallas, TX 75229 11 Maturity date Q 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) none **16** GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) INFORMATION 0.00 18 Guarantor address; City; State; Zip Code not applicable 20 Principal Occupation (See Instructions) 21 Employer (See Instructions) Date of loan Loan Amount (\$) Name of lender out-of-state PAC (ID#:_ Interest rate City; Zip Code Is lender Lender address: State: a financial Institution? Maturity date Ν Principal occupation / Job title (See Instructions) Employer (See Instructions) Description of Collateral Check if personal funds were deposited into political account (See Instructions) none Amount Guaranteed (\$) **GUARANTOR** Name of guarantor INFORMATION Guarantor address; City; State; Zip Code not applicable Principal Occupation (See Instructions) Employer (See Instructions)

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory normalise above)
1 Total pages Schedule F1: 1 of 62			3 Filer ID (Ethics Commission Filers)
4 Date 01/02/2019	5 Payee name Susie MicMinn		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 14802 Enterprise Dr Suit Dâllas, TX 75234		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/03/2019	Payee name NGP VAN		
Amount (\$) 1046.37	Payee address; City; State; Zip Code 1445 New York Ave NWWanhington, DC 20005		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 01/03/2019	Payee name Texas Democratic Party Texas		
Amount (\$) 1440.00	Payee address; City; State; Zip Code P.O. Box 116 Austin, TX 78767		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other/Field		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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
Others (actions extensions thirted above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/08/2019	5 Payee name Elizabeth De Leon		
6 Amount (\$) 241.32	7 Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/08/2019	Payee name Barbara Steele		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 1924 Lanark Ave Dallas, TX 75203		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/10/2019	Payee name The Order Desk		
Amount (\$) 674.22	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1 Allas, TX 75220		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 3 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2019	5 Payee name Rachel Perry		
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 5279 Worthy Way Suite Fanview, TX 75069		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/14/2019	Payee name Elizabeth De Leon		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/14/2019	Payee name Elizabeth De Leon		
Amount (\$) 832.73	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 4 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 01/15/2019	5 Payee name Barbara Steele		
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 1924 Lanark Ave Dallas, TX 75203		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/15/2019	Payee name GBA Strategies		
Amount (\$) 36000.00	Payee address; City; State; Zip Code 1701 K Street NW Suite 6000shington, TX 20006		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/16/2019	Payee name Zach Bullard		
Amount (\$) 115.00	Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 5 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2019	5 Payee name Zach Bullard		
6 Amount (\$) 320.00	7 Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense nt Supplies
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/16/2019	Payee name Jessica Coggins		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 5230 Lobello Dr Dallas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/17/2019	Payee name Rachel Perry		
Amount (\$) 338.00	Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. I, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.	
1 Total pages Schedule F1: 6 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/18/2019	5 Payee name Reilly Echols Printing Inc		
6 Amount (\$) 2833.99	7 Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		nutside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/18/2019	Payee name Elizabeth De Leon		
Amount (\$) 387.46	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Sponsorship
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/18/2019	Payee name Rachel Perry		
Amount (\$) 610.74	Payee address; City; State; Zip Code 5279 Worthy Way Suite F2015 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (onter a dategory not noted above)
1 Total pages Schedule F1: 7 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/22/2019	5 Payee name Democracy Toolbox		
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code 900 Hermitage Ln McKinney, TX 75070		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/22/2019	Payee name DonorBox		
Amount (\$) 257.50	Payee address; City; State; Zip Code 5 3rd St Suite 900 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/23/2019	Payee name Cedric Thompson		
Amount (\$) 240.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1: 8 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 01/24/2019	5 Payee name Dianna Quiroz	
6 Amount (\$) 180.00	7 Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
Date 01/25/2019	Payee name The Order Desk	
Amount (\$) 925.38	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1@ allas, TX 75220	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 01/25/2019	Payee name Zan Miller	
Amount (\$) 240.00	Payee address; City; State; Zip Code 4535 Belvedere Dr Plano, TX 75093	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 9 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2019	5 Payee name Demetrice Ingram		
6 Amount (\$) 450.00	7 Payee address; City; State; Zip Code 1201 S Ewing Ave Suite DhOss, TX 75216		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H	Office sought	Office held
Date 01/25/2019	Payee name Sarah White		
Amount (\$) 360.00	Payee address; City; State; Zip Code 7743 Antoinette St Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T. I, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/28/2019	Payee name Cedric Thompson		
Amount (\$) 450.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 10 of 62	2 FILER NAME Ms Regina T Montoya	3 F	Filer ID (Ethics Commission Filers)
4 Date 01/28/2019	5 Payee name DeShea Norfin		
6 Amount (\$) 675.00	7 Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		of Texas. Complete Schedule T. officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/28/2019	Payee name Elizabeth De Leon		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		f Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/28/2019	Payee name Zan Miller		
Amount (\$) 120.00	Payee address; City; State; Zip Code 4535 Belvedere Dr Plano, TX 75093		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		f Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDE	D

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.
1 Total pages Schedule F1: 11 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2019	5 Payee name Zach Bullard	
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
01/29/2019	Will Fifer	
Amount (\$) 2400.00	Payee address; City; State; Zip Code 1303 Moran Dr Dallas, TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 01/29/2019	Payee name Demetrice Ingram	
Amount (\$) 510.00	Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dh08s, TX 75216	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 12 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2019	5 Payee name Robbie Bland		
6 Amount (\$) 360.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/30/2019	Payee name Communities Foundation of Texas		
Amount (\$) 90.00	Payee address; City; State; Zip Code 5500 Caruth Haven Ln Dallas, TX 75225		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense onsorship
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/30/2019	Payee name Toni Scoggins		
Amount (\$) 510.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Fayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 13 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2019	5 Payee name Rachel Perry		
6 Amount (\$) 328.46	7 Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/31/2019	Payee name Rachel Perry		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 5279 Worthy Way Suite £20% iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/31/2019	Payee name Zach Bullard		
Amount (\$) 37.88	Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 14 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 01/31/2019	5 Payee name Shelitha Savala	·
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 4042 Shoreline Dr Dallas, TX 75233	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 01/31/2019	Payee name Dianna Quiroz	
Amount (\$) 750.00	Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/01/2019	Payee name Demetrice Ingram	
Amount (\$) 750.00	Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dat08s, TX 75216	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other	er (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 15 of 62	2 FILER NAME Ms Regina T Montoya	3 F	iler ID (Ethics Commission Filers)
4 Date 02/01/2019	5 Payee name Sarah White		
6 Amount (\$) 210.00	7 Payee address; City; State; Zip Code 7743 Antoinette St Dallas, TX 75217		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Texas. Complete Schedule T. officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/01/2019	Payee name Anette Douglas		
Amount (\$) 600.00	Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Texas. Complete Schedule T. fficeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/01/2019	Payee name Brian Black		
Amount (\$) 500.00	Payee address; City; State; Zip Code 1225 Pecan St Arlington, TX 76010		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Texas. Complete Schedule T. fficeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 16 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2019	5 Payee name Brian Black		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 1225 Pecan St Arlington, TX 76010		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name NGP VAN		
Amount (\$) 2506.58	Payee address; City; State; Zip Code 1445 New York Ave NW Sasibin 2000, DC 20005		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Edwards and Patterson		
Amount (\$) 1834.84	Payee address; City; State; Zip Code 203 S Beltline Rd Irving, TX 75060		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.
1 Total pages Schedule F1: 17 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name Alex Hudson	
6 Amount (\$) 240.00	7 Payee address; City; State; Zip Code 12111 Audelia Rd Dallas, TX 75243	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/04/2019	Nasma Ltd	
Amount (\$) 3500.00	Payee address; City; State; Zip Code 8499 Greenville Ave Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 02/04/2019	Payee name Nisa Ortiz	
Amount (\$) 40.00	Payee address; City; State; Zip Code 7510 E Grand Ave Suite Dh012s, TX 75214	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Snacks for Volunteers
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 18 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name Toni Scoggins		
6 Amount (\$) 510.00	7 Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Stephanie Johnson		
Amount (\$) 350.00	Payee address; City; State; Zip Code 912 Ginger Trail DeSoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Mary Turner		
Amount (\$) 570.00	Payee address; City; State; Zip Code 7313 Beverly Dr Rowlett, TX 75089		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (onter a dategory not noted above)
1 Total pages Schedule F1: 19 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name DeShea Norfin		
6 Amount (\$) 440.00	7 Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Nisa Ortiz		
Amount (\$) 60.00	Payee address; City; State; Zip Code 7510 E Grand Ave Suite Dh00as, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Robbie Bland		
Amount (\$) 380.00	Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide ex	cplains how to complete this form	
1 Total pages Schedule F1: 20 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/04/2019	5 Payee name DonorBox		
6 Amount (\$) 25.00		e; Zip Code co, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Fees	Check if tra	avel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sough	nt Office held
Date 02/05/2019	Payee name Barbara Steele		
Amount (\$) 2500.00	Payee address; City; State 1924 Lanark Ave Dallas, TX 7	e; Zip Code 75203	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	Check if tra	ovel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sough	t Office held
Date 02/05/2019	Payee name Annette Douglas		
Amount (\$) 500.00	Payee address; City; State 2902 Robin Hill Ln Garland, TX	e; Zip Code 275044	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	Check if tra	avel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sough	nt Office held
	ATTACH ADDITIONAL COI	PIES OF THIS SCHEDULE AS	NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 21 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	5 Payee name Rachel Perry	
6 Amount (\$) 459.35	7 Payee address; City; State; Zip Code 5279 Worthy Way Suite Fatts iew, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photoshoot Expenses
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/06/2019	Payee name Shelitha Savala	
Amount (\$) 360.00	Payee address; City; State; Zip Code 4042 Shoreline Dr Dallas, TX 75233	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/06/2019	Payee name Stephanie Johnson	
Amount (\$) 250.00	Payee address; City; State; Zip Code 912 Ginger Trail DeSoto, TX 75115	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 22 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	5 Payee name Angela Guesby	
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 2813 Gambel Ln Plano, TX 75025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/07/2019	Payee name Zan Miller	
Amount (\$) 100.00	Payee address; City; State; Zip Code 4535 Belvedere Dr Plano, TX 75093	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/07/2019	Payee name Dianna Quiroz	
Amount (\$) 360.00	Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 23 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/08/2019	5 Payee name Dallas County Democratic Party		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 4209 Parry Ave Dallas, TX 75223		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/08/2019	Payee name Reilly Echols Printing Inc		
Amount (\$) 1136.63	Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/11/2019	Payee name Zsa Zsa Brown		
Amount (\$) 300.00	Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 24 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2019	5 Payee name Robbie Bland		
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/12/2019	Payee name Lillie Ford		
Amount (\$) 480.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/12/2019	Payee name Rachel Perry		
Amount (\$) 224.24	Payee address; City; State; Zip Code 5279 Worthy Way Suite F20% iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.		
1 Total pages Schedule F1: 25 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)	
4 Date 02/13/2019	5 Payee name Nisa Ortiz			
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 7510 E Grand Ave Suite DMBs, TX 75214			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		outside of Texas. Complete Schedule T. in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 02/13/2019	Payee name Elizabeth De Leon			
Amount (\$) 52.38	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 02/13/2019	Payee name Elizabeth De Leon			
Amount (\$) 2000.00	Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 26 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/13/2019	5 Payee name Demetrice Ingram`	<u>'</u>	
6 Amount (\$) 650.00	7 Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dallas, TX 75216		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/14/2019	Payee name Alex Hudson		
Amount (\$) 240.00	Payee address; City; State; Zip Code 12111 Audelia Rd Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ide of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/14/2019	Payee name Lillie Ford		
Amount (\$) 330.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/	Vages/Contract Labor	Other (enter a category not listed above)
Credit Card Fayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 27 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2019	5 Payee name Alex Hudson		
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 12111 Audelia Rd Dallas, TX 75243		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Labor	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/15/2019	Demetrice Ingram		
Amount (\$) 600.00	Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dat08s, TX 75216		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel out	side of Texas. Complete Schedule T.
OF EXPENDITURE	2	Check if Austin,	TX, officeholder living expense
		Labor	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/15/2019	Stephanie Johnson		
Amount (\$) 240.00	Payee address; City; State; Zip Code		
240.00	912 Ginger Trail DeSoto, TX 75115		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
-		Labor	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	:DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction (Guide explains how to c	omplete this form.		
1 Total pages Schedule F1: 28 of 62	2 FILER NAME Ms Regina T Montoya			3 Filer ID (Ethics Commiss	sion Filers)
4 Date 02/19/2019	5 Payee name Lorenzo Escamilla				
6 Amount (\$) 226.72	-	y; State; Zip Code as, TX 75211			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed a Salaries/Wages/Contract Labo			ntside of Texas. Complete Schedule T. TX, officeholder living expense Delivery	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder n	ame	Office sought	Office he	eld
Date 02/19/2019	Payee name Shelitha Savala				
Amount (\$) 510.00		y; State; Zip Code as, TX 75233			
PURPOSE OF EXPENDITURE	Category (See Categories listed a Salaries/Wages/Contract Labo			tside of Texas. Complete Schedule T. TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder n	ame	Office sought	Office he	ld
Date 02/19/2019	Payee name Cronicas Williams				
Amount (\$) 530.00		y; State; Zip Code caster, TX 75146			
PURPOSE OF EXPENDITURE	Category (See Categories listed a Salaries/Wages/Contract Laborates)			tside of Texas. Complete Schedule T. TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder i	name	Office sought	Office h	eld
	ATTACH ADDITION/	AL COPIES OF THIS	SCHEDULE AS NEE	:DED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 29 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2019	5 Payee name Dianna Quiroz		
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name Robbie Bland		
Amount (\$) 400.00	Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name Alex Hudson		
Amount (\$) 120.00	Payee address; City; State; Zip Code 12111 Audelia Rd Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 30 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2019	5 Payee name Robbie Bland		
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name Toni Scroggins		
Amount (\$) 704.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name Sarah White		
Amount (\$) 867.00	Payee address; City; State; Zip Code 7743 Antoinette St Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 31 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/19/2019	5 Payee name Jessica Coggins		
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 5230 Lobello Dr Dallas, TX 75229		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/19/2019	Payee name DeShea Norfin		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/20/2019	Payee name Rachel Perry		
Amount (\$) 250.00	Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		ntside of Texas. Complete Schedule T. r, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 32 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/20/2019	5 Payee name Demetrice Ingram		
6 Amount (\$) 1140.00	7 Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dallas, TX 75216		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/21/2019	Payee name Cedric Thompson		
Amount (\$) 515.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/21/2019	Payee name Shelitha Savala		
Amount (\$) 555.00	Payee address; City; State; Zip Code 4042 Shoreline Dr Dallas, TX 75233		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	
1 Total pages Schedule F1: 33 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Berlin Rosen		
6 Amount (\$) 17788.41	7 Payee address; City; State; Zip Code 15 Maiden Ln Suite 1600New York, NY 10038		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/22/2019	Payee name Cornicas Williams		
Amount (\$) 555.00	Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/22/2019	Payee name Alex Fitzgerald		
Amount (\$) 144.00	Payee address; City; State; Zip Code 4725 Fairmount St Suite Dhalas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense hoot
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction	n Guide explains how to d	complete this form.		
1 Total pages Schedule F1: 34 of 62	2 FILER NAME Ms Regina T Montoya			3 Filer ID (Ethics Commission File	ers)
4 Date 02/22/2019	5 Payee name Annette Douglas				
6 Amount (\$) 860.00	_	rity; State; Zip Code arland, TX 75044			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories liste Salaries/Wages/Contract La			ntside of Texas. Complete Schedule T.	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder	r name	Office sought	Office held	
Date 02/25/2019	Payee name Democracy Toolbox				
Amount (\$) 10000.00		ity; State; Zip Code cKinney, TX 75070			
PURPOSE OF EXPENDITURE	Category (See Categories liste Salaries/Wages/Contract La			tside of Texas. Complete Schedule T. TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder	r name	Office sought	Office held	
Date 02/25/2019	Payee name Democracy Toolbox				
Amount (\$) 2150.28		ckinney, TX 75070			
PURPOSE OF EXPENDITURE	Category (See Categories liste Salaries/Wages/Contract La	,		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholde	r name	Office sought	Office held	
	ATTACH ADDITIO	NAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)
1 Total pages Schedule F1: 35 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2019	5 Payee name Zsa Zsa Brown		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name Rachel Perry		
Amount (\$) 333.03	Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense age
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name Toni Scroggins		
Amount (\$) 410.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 36 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2019	5 Payee name Elizabeth De Leon		
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name Dianna Quiroz		
Amount (\$) 750.00	Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name Robbie Bland		
Amount (\$) 240.00	Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 37 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/25/2019	5 Payee name Elizabeth De Leon		
6 Amount (\$) 608.22	7 Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense ks for Volunteers
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/25/2019	Payee name Rachel Perry		
Amount (\$) 140.80	Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 02/26/2019	Payee name NGP VAN		
Amount (\$) 2325.00	Payee address; City; State; Zip Code 1445 New York Ave NWKarihen 2000, DC 20005		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 38 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/26/2019	5 Payee name NGP VAN		
6 Amount (\$) 55.80	7 Payee address; City; State; Zip Code 1445 New York Ave NWWSaxihengg10n, DC 20005		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/26/2019	Payee name Sarah White		
Amount (\$) 780.00	Payee address; City; State; Zip Code 7743 Antoinette St Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/26/2019	Payee name Cedric Thompson		
Amount (\$) 593.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 39 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 02/26/2019	5 Payee name Fawaz Anwar	·
6 Amount (\$) 60.00	7 Payee address; City; State; Zip Code 4057 Legacy Trail Carrollton, TX 75010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/26/2019	Payee name Rachel Perry	
Amount (\$) 3000.00	Payee address; City; State; Zip Code 5279 Worthy Way Suite F205 iew, TX 75069	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/27/2019	Payee name Zach Bullard	
Amount (\$) 1435.00	Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimburssement
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.	
1 Total pages Schedule F1: 40 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2019	5 Payee name Berlin Rosen		
6 Amount (\$) 17788.41	7 Payee address; City; State; Zip Code 15 Maiden Ln Suite 1600New York, NY 10038		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/28/2019	Payee name Toni Scroggins		
Amount (\$) 435.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Dianna Quiroz		
Amount (\$) 925.00	Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 41 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2019	5 Payee name Will Fifer		
6 Amount (\$) 2400.00	7 Payee address; City; State; Zip Code 1303 Moran Dr Dallas, TX 75218		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name DeShea Norfin		
Amount (\$) 900.00	Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Demetrice Ingram		
Amount (\$) 1260.00	Payee address; City; State; Zip Code 1201 S Ewing Ave Suite Dat Dat TX 75216		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.		
1 Total pages Schedule F1: 42 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)	
4 Date 03/01/2019	5 Payee name Robbie Bland			
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held	
Date 03/04/2019	Payee name NGP VAN			
Amount (\$) 4051.69	Payee address; City; State; Zip Code 1445 New York Ave NWWanhen2010n, DC 20005			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 03/04/2019	Payee name LodeStar Universal			
Amount (\$) 3100.00	Payee address; City; State; Zip Code 6034 Mimosa Ln Dallas, TX 75230			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 43 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Zach Bullard		
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Shelitha Savala		
Amount (\$) 435.00	Payee address; City; State; Zip Code 4042 Shoreline Dr Dallas, TX 75233		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Angela Guesby		
Amount (\$) 780.00	Payee address; City; State; Zip Code 2813 Gambel Ln Plano, TX 75025		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	s/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 44 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Cornicas Williams		
6 Amount (\$) 435.00	7 Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date 03/04/2019	Payee name Vivian Seward		
Amount (\$) 480.00	Payee address; City; State; Zip Code 2602 Primrose Ln Rowelett, TX 75089		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Zan Miller		
Amount (\$) 420.00	Payee address; City; State; Zip Code 4535 Belvedere Dr Plano, TX 75093		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 45 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Annette Douglas		
6 Amount (\$) 800.00	7 Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Stephanie Johnson		
Amount (\$) 685.00	Payee address; City; State; Zip Code 912 Ginger Trail DeSoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Mary Turner		
Amount (\$) 720.00	Payee address; City; State; Zip Code 7313 Beverly Dr Rowlett, TX 75089		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 46 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Cedric Thompson		
6 Amount (\$) 286.00	7 Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name DonorBox		
Amount (\$) 13.00	Payee address; City; State; Zip Code 5 3rd St Suite 900 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/05/2019	Payee name Sarah White		
Amount (\$) 420.00	Payee address; City; State; Zip Code 7743 Antoinette St Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 47 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2019	5 Payee name Barbara Steele		
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code 1924 Lanark Ave Dallas, TX 75203		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/05/2019	Payee name Alex Fitzgerald		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 4725 Fairmount St Suite DhBlas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 03/05/2019	Payee name Toni Scroggins		
Amount (\$) 466.00	Payee address; City; State; Zip Code 9218 Linda Vista Dr Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 48 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2019	5 Payee name Brian Black		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 1225 Pecan St Arlington, TX 76010		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/06/2019	Payee name Nisa Ortiz		
Amount (\$) 1500.00	Payee address; City; State; Zip Code 7510 E Grand Ave Suite Dh018 s, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/06/2019	Payee name Berlin Rosen		
Amount (\$) 63283.85	Payee address; City; State; Zip Code 15 Maiden Ln Suite 1600New York, NY 10038		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T. I, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.	
1 Total pages Schedule F1: 49 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2019	5 Payee name Kim Radford		
6 Amount (\$) 540.00	7 Payee address; City; State; Zip Code 527 East Woodin Blvd Dallas, TX 75216		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/06/2019	Payee name Cornicas Williams		
Amount (\$) 450.00	Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/06/2019	Payee name Shelitha Savala		
Amount (\$) 450.00	Payee address; City; State; Zip Code 4042 Shoreline Dr Dallas, TX 75233		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 50 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2019	5 Payee name DeShea Norfin		
6 Amount (\$) 620.00	7 Payee address; City; State; Zip Code 228 Pioneer Ct Lancaster, TX 75146		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/07/2019	Payee name Nasma Ltd		
Amount (\$) 3500.00	Payee address; City; State; Zip Code 8499 Greenville Ave Sui 10:a10:5, TX 75231		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/07/2019	Payee name Alex Hudson		
Amount (\$) 180.00	Payee address; City; State; Zip Code 12111 Audelia Rd Dallas, TX 75243		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 51 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2019	5 Payee name Harland Clarke		
6 Amount (\$) 126.11	7 Payee address; City; State; Zip Code 15955 La Cantera Parkw Syan Antonio, TX 78256		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/08/2019	Payee name Dallas County Young Democrats		
Amount (\$) 250.00	Payee address; City; State; Zip Code 3105 San Jacinto Suite 2009allas, TX 75204		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/08/2019	Payee name Kim Radford		
Amount (\$) 100.00	Payee address; City; State; Zip Code 527 East Woodin Blvd Dallas, TX 75216		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	Al 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.	
1 Total pages Schedule F1: 52 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Caitlin Probus		
6 Amount (\$) 140.00	7 Payee address; City; State; Zip Code 509 Kingsbridge Dr Garland, TX 75040		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Zsa Zsa Brown		
Amount (\$) 220.00	Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Tom Grimes		
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 166176 Irving, TX 75016		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 53 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID	O (Ethics Commission Filers)
4 Date 03/11/2019	5 Payee name Robbie Bland	1	
6 Amount (\$) 425.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. C Check if Austin, TX, officehol Labor	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Dianna Quiroz		
Amount (\$) 870.00	Payee address; City; State; Zip Code 3621 Frankford Rd Dallas, TX 75287		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. C Check if Austin, TX, officehold Labor	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Mary Turner		
Amount (\$) 283.00	Payee address; City; State; Zip Code 7313 Beverly Dr Rowlett, TX 75089		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. C Check if Austin, TX, officehold Labor	•
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 54 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2019	5 Payee name Kim Radford		
6 Amount (\$) 140.00	7 Payee address; City; State; Zip Code 527 East Woodin Blvd Dallas, TX 75216		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Susie McMinn		
Amount (\$) 360.00	Payee address; City; State; Zip Code 14802 Enterprise Dr Suit Dâllas, TX 75234		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/11/2019	Payee name Annette Douglas		
Amount (\$) 190.00	Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how	to complete this form.
1 Total pages Schedule F1: 55 of 62	2 FILER NAME Ms Regina T Montoya	3 Filer ID (Ethics Commission Filers)
4 Date 03/11/2019	5 Payee name Zan Miller	
6 Amount (\$) 411.60	7 Payee address; City; State; Zip Cod 4535 Belvedere Dr Plano, TX 75093	е
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule, Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 03/12/2019	Payee name Will Fifer	
Amount (\$) 40.72	Payee address; City; State; Zip Cod 1303 Moran Dr Dallas, TX 75218	е
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 03/12/2019	Payee name Angela Guesby	
Amount (\$) 315.00	Payee address; City; State; Zip Cod 2813 Gambel Ln Plano, TX 75025	е
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF TH	1IS SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 56 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2019	5 Payee name Vivian Seward		
6 Amount (\$) 275.00	7 Payee address; City; State; Zip Code 2602 Primrose Ln Rowelett, TX 75089		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/12/2019	Payee name Sydnee Seward		
Amount (\$) 120.00	Payee address; City; State; Zip Code 2602 Primrose Ln Rowelett, TX 75089		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/12/2019	Payee name Rachel Perry		
Amount (\$) 321.00	Payee address; City; State; Zip Code 5279 Worthy Way Suite £205 iew, TX 75069		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.	
1 Total pages Schedule F1: 57 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)
4 Date 03/12/2019	5 Payee name Elizabeth De Leon		
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 3441 Westminster Ave Dallas, TX 75205		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/14/2019	Payee name Berlin Rosen		
Amount (\$) 40019.00	Payee address; City; State; Zip Code 15 Maiden Ln Suite 160(New York, NY 10038		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/14/2019	Payee name Brian Black		
Amount (\$) 250.00	Payee address; City; State; Zip Code 1225 Pecan St Arlington, TX 76010		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 58 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)	
4 Date 03/15/2019	5 Payee name The Order Desk			
6 Amount (\$) 1124.75	7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1 (24 allas, TX 75220			
PURPOSE OF EXPENDITURE 9 Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Printing Expense Candidate / Officeholder name		utside of Texas. Complete Schedule T. n, TX, officeholder living expense Office held	
expenditure to benefit C/OI	Н			
Date 03/15/2019	Payee name Rachel Perry			
Amount (\$) 359.36	Payee address; City; State; Zip Code 5279 Worthy Way Suite F2015 iew, TX 75069			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 03/18/2019	Payee name Zach Bullard			
Amount (\$) 320.00	Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.	
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 NEI	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dategory not noted above)
1 Total pages Schedule F1: 59 of 62	·		3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2019	5 Payee name Reilly Echols Printing Inc		
6 Amount (\$) 3386.08	7 Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/18/2019	Payee name Public Policy Polling		
Amount (\$) 6500.00	Payee address; City; State; Zip Code 2912 Highwoods Blvd SuRtdel@h, NC 27604		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/18/2019	Payee name Zach Bullard		
Amount (\$) 80.00	Payee address; City; State; Zip Code 4201 Bunker Hill Rd Garland, TX 75048		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)		
1 Total pages Schedule F1: 60 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)		
4 Date 03/18/2019	5 Payee name Robbie Bland				
6 Amount (\$) 40.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 03/19/2019	Payee name Democracy Toolbox				
Amount (\$) 1600.00	Payee address; City; State; Zip Code 900 Hermitage Ln McKinney, TX 75070				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 03/19/2019	Payee name Jessica Coggins				
Amount (\$) 3000.00	Payee address; City; State; Zip Code 5230 Lobello Dr Dallas, TX 75229				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.			
1 Total pages Schedule F1: 61 of 62	2 FILER NAME Ms Regina T Montoya	3	3 Filer ID (Ethics Commission Filers)		
4 Date 03/19/2019	5 Payee name Robbie Bland				
6 Amount (\$) 80.00	7 Payee address; City; State; Zip Code 8555 Fair Oaks Crossing Dallas, TX 75243				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ide of Texas. Complete Schedule T. TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date 03/21/2019	Payee name Will Fifer				
Amount (\$) 153.72	Payee address; City; State; Zip Code 1303 Moran Dr Dallas, TX 75218				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date 03/21/2019	Payee name Annette Douglas				
Amount (\$) 850.00	Payee address; City; State; Zip Code 2902 Robin Hill Ln Garland, TX 75044				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		de of Texas. Complete Schedule T. "X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al 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.			
1 Total pages Schedule F1: 62 of 62	2 FILER NAME Ms Regina T Montoya		3 Filer ID (Ethics Commission Filers)		
4 Date 03/25/2019	5 Payee name Demetrice Ingram				
6 Amount (\$) 190.00	7 Payee address; City; State; Zip Code 1201 S Ewing Ave Suite DMBs, TX 75216				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		ntside of Texas. Complete Schedule T.		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					