

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

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

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

**2** Total pages filed:

33

**3** CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr

Adam

NICKNAME

LAST

SUFFIX

Bazaldua

## OFFICE USE ONLY

Date Received

**4** CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

00

Dallas TX 75357

PO Box: 571823

☐ Change of Address

**5** CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 214 )

597 4180

Date Hand-delivered or Date Postmarked

**6** CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mrs

Rhonda

NICKNAME

LAST

SUFFIX

Devan

Receipt #

Amount \$

Date Processed

Date Imaged

**7** CAMPAIGN  
TREASURER  
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

160 Hillside

Swannanoa NC 28778

**8** CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

( 828 )

674 0805

**9** REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

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

☐ July 15

☒ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

**10** PERIOD  
COVERED

Month

Day

Year

04

27

2019

THROUGH

Month

Day

Year

05

29

2019

**11** ELECTION

ELECTION DATE

Month

Day

Year

/ /

☐ Primary

☒ Runoff

☐ Other

Description

☐ General

☐ Special

**12** OFFICE

OFFICE HELD (if any)

**13** OFFICE SOUGHT (if known)

Council District 7

**GO TO PAGE 2**

**FORM C/OH**  
**COVER SHEET PG 2**

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Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Revised 9/8/2015

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME Mr Adam Bazaldua	<b>20</b> Filer ID (Ethics Commission Filers)
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<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 27,500.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 4,495.71
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 17,180.97
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
1 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

04/28/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brian Garner

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

100.00

**6** Contributor address;

City; State; Zip Code

P.O. Box 18018

Dallas, TX 75218

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

**9** Employer (See Instructions)

Date

05/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dallas Green Alliance

Amount of contribution (\$)

300.00

Contributor address;

City; State; Zip Code

P.O. Box 59828

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jacqueline Espinal

Amount of contribution (\$)

800.00

Contributor address;

City; State; Zip Code

1200 Main St

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Caroline Baxter

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

9214 Sweetwater

Dallas, TX 75227

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
2 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/05/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Timothy Boss

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

100.00

**6** Contributor address;

City; State; Zip Code

3633 La Vern

Dallas, TX 75227

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

**9** Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephen Egemasi

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

7124 Belteau

Dallas, TX 75227

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Johnny Aguinaga

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2027 Morris

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jim Shermbeck Downwinders Education Fund

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

P.O. Box 76384

Dallas, TX 75376

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

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

The Instruction Guide explains how to complete this form.

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

Mr Adam Bazaldua

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

05/05/2019

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

Matthew Headley

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

50.00

**6** Contributor address;

City; State; Zip Code

9214 SWEETWATER

Dallas, TX 75227

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

## Date

05/05/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephanie Timko

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

2421 Dorrington

Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Andrew Morris

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

831 Shady Lane

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/07/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

J. McDonald Williams

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

8604 Greenville Ave Suite 200

Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
4 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/07/2019

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

Ellen Williams

**7** Amount of contribution (\$)  
1000.00

**6** Contributor address; City; State; Zip Code

8604 Greenville Ave Suite 200 Dallas, TX 75243

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

**9** Employer (See Instructions)

Date  
05/07/2019

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

Paul Hille

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code

5927 Palo Pinto Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/08/2019

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

William Weinberg

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code

2349 Allen St Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/08/2019

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

Melissa Prycer

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code

2907 Sharpview Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
5 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/08/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Betsy Kleinman

**6** Contributor address;

City; State; Zip Code

6926 Midbury

Dallas, TX 75230

**7** Amount of contribution (\$)  
200.00

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

**9** Employer (See Instructions)

Date  
05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Nancy Best

Contributor address;

City; State; Zip Code

9762 Audubon

Dallas, TX 75220

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Newlin

Contributor address;

City; State; Zip Code

2861 Vacherie

Dallas, TX 75227

Amount of contribution (\$)  
150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Billings

Contributor address;

City; State; Zip Code

14841 Dallas Parkway Suite 760

Dallas, TX 75254

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
6 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

05/09/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dallas Firefighters Assoc Public Saftey Committee

**6** Contributor address;

City; State; Zip Code

10956 Audelia Rd

Dallas, TX 75243

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

2500.00

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

**9** Employer (See Instructions)

Date

05/09/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lucy Billingsley

Contributor address;

City; State; Zip Code

3229 Halifax

Dallas, TX 75207

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dallas Retired Firefighters Assoc PAC Fund

Contributor address;

City; State; Zip Code

P.O. Box 17540

Carrollton, TX 75011

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Robertson

Contributor address;

City; State; Zip Code

3712 Centenary Ave

Dallas, TX 75225

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
7 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/11/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jane Hoffman

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

100.00

**6** Contributor address;

City; State; Zip Code

6747 Lupton

Dallas, TX 75225

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

**9** Employer (See Instructions)

Date  
05/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Trevor Pearlman

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

200 Crescent Ct Suite 1040

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

New American PAC

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

400 South Zang Blvd Suite 600

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jessica Castillo

Amount of contribution (\$)

300.00

Contributor address;

City; State; Zip Code

813 Lakewoodland

Little Elm, TX 75068

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
8 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

05/13/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Rene Martinez

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

150.00

**6** Contributor address;

City; State; Zip Code

7007 Arboreal

Dallas, TX 75231

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

**9** Employer (See Instructions)

Date

05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mary Beth Marshall

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1 East End Ave Suite 6A

NY, NY 10075

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hector Flores

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

1030 Tracy Ave

Duncanville, TX 75137

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephen Springfield

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1503 Eastus

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
9 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date

05/15/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wick Allison

**6** Contributor address;

City; State; Zip Code

4340 Versailles

Highland Park, TX 75205

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

1000.00

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

**9** Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tammy Johnson

Contributor address;

City; State; Zip Code

2401 South Blvd

Dallas, TX 75215

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kurt Watkins

Contributor address;

City; State; Zip Code

4030 Commerce Suite 559

Dallas, TX 75204

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Caroline Denison

Contributor address;

City; State; Zip Code

15250 Prestonwood Blvd Suite 236 Dallas, TX 76248

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

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

The Instruction Guide explains how to complete this form.

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

Mr Adam Bazaldua

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

05/15/2019

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

Delia Jasso

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

250.00

**6** Contributor address;

City; State; Zip Code

821 Haines

Dallas, TX 75208

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

## Date

05/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Veale

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

1717 Arts Plaza Suite 2207

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/10/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Culmer

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

2311 Oldbridge

Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Peter Urrutia

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

10401 Augusta

Rowlett, TX 75089

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

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

The Instruction Guide explains how to complete this form.

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

Mr Adam Bazaldua

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

05/16/2019

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

Randall White

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

100.00

**6** Contributor address;

City; State; Zip Code

1939 Mayflower Dr

Dallas, TX 75208

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

## Date

05/17/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hasani Burton

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

5334 Bexar

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/17/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linda Garner

## Amount of contribution (\$)

200.00

## Contributor address;

City; State; Zip Code

1819 S Ervay

Dallas, TX 75215

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/17/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Matt Johns

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

8171 Midtown Blvd Suite 2211

Dallas, TX 75231

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
12 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/17/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Grantham

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

100.00

**6** Contributor address;

City; State; Zip Code

4101 Commerce St Suite 1

Dallas, TX 75226

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

**9** Employer (See Instructions)

Date

05/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lawerence Lane

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4101 Commerce St Suite 1

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Loraine Yeoham

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6333 Forest Highlands

Ft. Worth, TX 76132

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Nancy Best

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

9762 Audubon

Dallas, TX 75220

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
13 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/18/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Christopher Hamilton

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

250.00

**6** Contributor address;

City; State; Zip Code

5521 Swiss Ave

Dallas, TX 75214

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

**9** Employer (See Instructions)

Date  
05/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joanna Hampton

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

5408 Swiss Ave

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kelly Harrell

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

5807 Westmont

Austin, TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ron Natinsky

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

4719 Cole Ave Suite 648

Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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



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

The Instruction Guide explains how to complete this form.

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

Mr Adam Bazaldua

**3** Filer ID (Ethics Commission Filers)**4** Date  
  
05/20/2019**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Parsons

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

50.00

**6** Contributor address;

City; State; Zip Code

5317 McCommas

Dallas, TX 75206

**8** Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date  
  
05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dale Davenport

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

21421 CR 638

Royce City, TX 75189

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cheryl Young

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1404 Grand Teton

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
  
05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Melissa Reynolds

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

713 Driftwood

Denton, TX 76209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
15 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/21/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joe Maples

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

100.00

**6** Contributor address;

City; State; Zip Code

P.O. Box 14186

Irving, TX 75014

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

**9** Employer (See Instructions)

Date

05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brian Garner

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 18018

Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wayne Dry

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6006 Marvin Loving

Garland, TX 75474

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marcos Ronquillo

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

8931 Clubcreek

Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
16 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/22/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wayne Dry

**6** Contributor address;

City; State; Zip Code

6006 Marvin Loving

Garland, TX 75474

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

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

**9** Employer (See Instructions)

Date  
05/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Manuel Valadez

Contributor address;

City; State; Zip Code

4304 St Francis

Dallas, TX 75227

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jina Galliford

Contributor address;

City; State; Zip Code

6202 Parkdale Dr

Dallas, TX 75227

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dallas Green Alliance

Contributor address;

City; State; Zip Code

P.O. Box 59828

Dallas, TX 75229

Amount of contribution (\$)  
350.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
17 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/24/2019

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

**6** Contributor address; City; State; Zip Code  
14785 Preston Rd Suite 455 Dallas, TX 75254

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

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

**9** Employer (See Instructions)

Date  
05/25/2019

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

Contributor address; City; State; Zip Code  
707 N EDGEFIELD DALLAS, TX 75208

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/25/2019

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

Contributor address; City; State; Zip Code  
8472 Banquo Dallas, TX 75228

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/29/2019

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

Contributor address; City; State; Zip Code  
2534 S. Blvd Dallas, TX 75215

Amount of contribution (\$)  
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
18 of 18

**2** FILER NAME

Mr Adam Bazaldua

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

**4** Date  
05/29/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chad West

**6** Contributor address;

City; State; Zip Code

3606 S Tyler

Dallas, TX 75224

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

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

**9** Employer (See Instructions)

Date  
05/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ray Switzer

Contributor address;

City; State; Zip Code

203 N Willomet

Dallas, TX 75208

Amount of contribution (\$)  
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Sierra Club PAC of Texas

Contributor address;

City; State; Zip Code

6406 N I35 Suite 1805

Austin, TX 78752

Amount of contribution (\$)  
250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raquel Favela

Contributor address;

City; State; Zip Code

2658 Forest Pebble

San Antonio, TX 78232

Amount of contribution (\$)  
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# LOANS

# SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:  
1 of 1

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan  
05/15/2019

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

9 Loan Amount (\$)  
4495.71

6 Is lender  
a financial  
Institution?  
  
Y ☒ N ☐

8 Lender address; City; State; Zip Code  
6926 Belteau Dallas, TX 75227

10 Interest rate  
0.0%

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ none

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

16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

0.00

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

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

Loan Amount (\$)

Is lender  
a financial  
Institution?  
  
Y ☐ N ☐

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

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

GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 11		2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)	
4 Date 04/29/2019		5 Payee name The Lot			
6 Amount (\$) 222.92		7 Payee address; City; State; Zip Code 7530 E Grand Dallas, TX 75214			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 05/04/2019		Payee name Demetrice Frazier			
Amount (\$) 200.00		Payee address; City; State; Zip Code 1893 W Mockingbird Suite 114 Dallas, TX 75235			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 05/04/2019		Payee name Travon Green			
Amount (\$) 200.00		Payee address; City; State; Zip Code 1893 W Mockingbird Suite 114 Dallas, TX 75235			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2 of 11		<b>2</b> FILER NAME Mr Adam Bazaldua		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/04/2019		<b>5</b> Payee name Reginald Whitemon			
<b>6</b> Amount (\$) 200.00		<b>7</b> Payee address; City; State; Zip Code 5011 Groom Dallas, TX 75227			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/2019		Payee name Idena Thompson			
Amount (\$) 200.00		Payee address; City; State; Zip Code 5011 Groom Dallas, TX 75227			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/06/2019		Payee name SIGNAGE SYSTEMS			
Amount (\$) 364.37		Payee address; City; State; Zip Code 7900 FERGUSON RD DALLAS, TX 75228			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Advertising Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 11		2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)	
4 Date 05/06/2019		5 Payee name SIGNAGE SYSTEMS			
6 Amount (\$) 138.56		7 Payee address; City; State; Zip Code 7900 FERGUSON RD DALLAS, TX 75228			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Advertising Expense		(b) Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
Date 05/08/2019		Payee name Daryl Blair Elite News			
Amount (\$) 500.00		Payee address; City; State; Zip Code 1911 E. Ledbetter Dallas, TX 75216			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Advertising Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
Date 05/14/2019		Payee name Texas Democratic Party			
Amount (\$) 320.00		Payee address; City; State; Zip Code P.O. Box 116 Austin, TX 78767			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Data		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Data	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/14/2019	<b>5</b> Payee name Print Burner LLC		
<b>6</b> Amount (\$) 145.23	<b>7</b> Payee address; City; State; Zip Code 1412 Main Street Dallas, TX 75202		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name                      Office sought                      Office held			
Date 05/14/2019	Payee name Greyson Designs		
Amount (\$) 103.92	Payee address; City; State; Zip Code 9022 Garland Rd Dallas, TX 75218		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name                      Office sought                      Office held			
Date 05/15/2019	Payee name Adam Bazaldua		
Amount (\$) 4704.71	Payee address; City; State; Zip Code 6926 Belteau Ln Dallas, TX 75227		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Loan Repayment/Reimbursement	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name                      Office sought                      Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 5 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/16/2019	<b>5</b> Payee name Michelle Embler	
<b>6</b> Amount (\$) 450.00	<b>7</b> Payee address; City; State; Zip Code 1200 Main Street Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/17/2019	Candidate / Officeholder name Provisions Consulting	
Amount (\$) 650.00	Payee address; City; State; Zip Code 12100 Ford Rd Dallas, TX 75234	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Consulting Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/17/2019	Candidate / Officeholder name Big D Party & Event	
Amount (\$) 314.38	Payee address; City; State; Zip Code 3237 Commander Carrollton, TX 75006	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Event Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 6 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/20/2019	<b>5</b> Payee name Digital Room LLC	
<b>6</b> Amount (\$) 1187.00	<b>7</b> Payee address; City; State; Zip Code 1130 Ave H Street Arlington, TX 76011	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 05/20/2019	Payee name Avi Adelman	
Amount (\$) 150.00	Payee address; City; State; Zip Code 5620 East Side Dallas, TX 75214	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 05/21/2019	Payee name Millie Domenech	
Amount (\$) 500.00	Payee address; City; State; Zip Code 5750 E University Blvd Dallas, TX 76206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 7 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/24/2019	<b>5</b> Payee name Clear Channel Outdoor	
<b>6</b> Amount (\$) 1881.00	<b>7</b> Payee address; City; State; Zip Code 3700 E Randal Mills Rd Arlington, TX 76011	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/24/2019	Candidate / Officeholder name Payee name OfficeMax	Office sought Office held
Amount (\$) 147.13	Payee address; City; State; Zip Code 2415 N Haskell Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/24/2019	Candidate / Officeholder name Payee name Cristin Padgett Cristin Padgett	Office sought Office held
Amount (\$) 100.00	Payee address; City; State; Zip Code 5818 E University Dallas, TX 75206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 8 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/25/2019	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 367.00	<b>7</b> Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/27/2019	Payee name Demetrice Frazier	
Amount (\$) 175.00	Payee address; City; State; Zip Code 1893 W Mockingbird Dallas, TX 75235	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/27/2019	Payee name Travon Green	
Amount (\$) 175.00	Payee address; City; State; Zip Code 1893 W Mockingbird Dallas, TX 75235	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 9 of 11		<b>2</b> FILER NAME Mr Adam Bazaldua		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/27/2019		<b>5</b> Payee name Reginald Whitemon			
<b>6</b> Amount (\$) 235.00		<b>7</b> Payee address; City; State; Zip Code 5011 Groom Dallas, TX 75227			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/27/2019		Payee name Idena Thompson			
Amount (\$) 235.00		Payee address; City; State; Zip Code 5011 Groom Dallas, TX 75227			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Salaries/Wages/Contract Labor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/28/2019		Payee name Home Depot			
Amount (\$) 121.00		Payee address; City; State; Zip Code 6000 Skillman Dallas, TX 75231			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Advertising Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 10 of 11		<b>2</b> FILER NAME Mr Adam Bazaldua		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/28/2019		<b>5</b> Payee name Digital Room LLC			
<b>6</b> Amount (\$) 715.50		<b>7</b> Payee address; City; State; Zip Code 1130 Ave H Street Arlington, TX 76011			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense		<b>(b)</b> Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/28/2019		Payee name Michelle Embler			
Amount (\$) 176.00		Payee address; City; State; Zip Code 1200 Main Street Dallas, TX 75201			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Reimbursement (Mailer Paper)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/29/2019		Payee name Digital Room LLC			
Amount (\$) 941.39		Payee address; City; State; Zip Code 1130 Ave H Street Arlington, TX 76011			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Advertising Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 11 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/29/2019	<b>5</b> Payee name Hustle, Inc	
<b>6</b> Amount (\$) 1360.86	<b>7</b> Payee address; City; State; Zip Code 1381 9th Ave San Francisco, CA 94122	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name	
Amount (\$)	Office sought	
Office held	Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		