

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:

6

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY			
	Paul		E				
	NICKNAME	LAST	SUFFIX	Date Received			
	Ridley						
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE		
	5100 Victor St		Dallas TX	75214			
<input type="checkbox"/> Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked			
	(469)	834 1107					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$		
	Paul		E	Date Processed			
	NICKNAME	LAST	SUFFIX	Date Imaged			
	Ridley						
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE		
(Residence or Business)	5100 Victor St.		Dallas TX	75214			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(469)	834 1107					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	12	04	2020	THROUGH	12	31	2020
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	05	01	2021	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) Council District 14			

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FORM C/OH
COVER SHEET PG 2

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

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Paul E Ridley

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 700.00
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	\$ 20,000.00
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
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 2**2** FILER NAME

Paul E Ridley

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

12/19/2020

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

Martha Heimberg

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1523 Abrams Rd.

Dallas, TX 75214

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

Date

12/21/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Drumm

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2325 Centurion Ct.

Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/22/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Olive Talley

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6133 Prospect Ave.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/26/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rick Bentley

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5651 Vickery Blvd.

Dallas, TX 75206-6232

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 2**2** FILER NAME

Paul E Ridley

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

12/28/2020

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

Margaret Moschetto

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

5031 Homer St.

Dallas, TX 75206-6679

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

Date

12/28/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Rieves

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5530 Goodwin Ave.

Dallas, TX 75206-6213

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/23/2020

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Norma Minnis

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6219 Prospect Ave.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1**2** FILER NAME

Paul E Ridley

3 Filer ID (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan
12/31/2020**7** Name of lender ☐ out-of-state PAC (ID#: _____)
Paul E Ridley**9** Loan Amount (\$)
20000.00**6** Is lender
a financial
Institution?

Y ☒ N**8** Lender address; City; State; Zip Code
5100 Victor St. Dallas, TX 75214**10** Interest rate
0.0%**11** Maturity date
01/01/2001**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☒ none**15** Check if personal funds were deposited into political
account (See Instructions)
☒**16** GUARANTOR
INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)**18** Guarantor address; City; State; Zip Code☒ not applicable**20** Principal Occupation (See Instructions)**21** Employer (See Instructions)

Date of loan

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

Loan Amount (\$)

Is lender
a financial
Institution?

Y ☐ N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ noneCheck 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.