

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Jaime	MI	2. Total Pages Filed: 6
	NICKNAME	LAST Resendez	SUFFIX	3. Office Held Council District 5
4. SUPPLEMENTAL 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			
5. PERIOD / COVERED	7/1/2020 THROUGH 12/31/2020			
6. ELECTION	Month Day Year 5/1/2021 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special <input checked="" type="checkbox"/> N/A			
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 1,135.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 106.72
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> 10. AFFIDAVIT AFFIX NOTARY STAMP / SEAL ABOVE </div> <div style="width: 55%; text-align: center;"> I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code. ***ELECTRONICALLY CERTIFIED*** _____ Signature of Candidate or Officeholder </div> </div>				
Sworn to and subscribed before me, by the said <u>Mr Jaime Resendez</u> , this the <u>2nd</u> day of <u>February</u> , 20 <u>21</u> , to certify which, witness my hand and seal of office.				
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>				

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

Mr Jaime Resendez

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

07/12/2020

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

Larry Offutt

6 Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

7 Amount of contribution (\$)

100.00

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

Steak N Shake

Date

12/07/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Offutt

Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Steak N Shake

Date

12/11/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam Bazaldua

Contributor address;

City; State; Zip Code

6926 Belteau Lane

Dallas, TX 75227

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)
Council Member

Employer (See Instructions)

City of Dallas

Date

12/30/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris heinbaugh

Contributor address;

City; State; Zip Code

1801 annex ave

Dallas, TX 75204

Amount of contribution (\$)

35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

AT&T Performing Arts Center

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**

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

Mr Jaime Resendez

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

12/30/2020

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: TX)

Angelica Fountain

6 Contributor address;

City; State; Zip Code

1121 Beachview Suite 1206

Dallas, TX 75218

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

Assistant Principal

9 Employer (See Instructions)

Irving ISD

Date

12/27/2020

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#:)

Lee Kleinman

Contributor address;

City; State; Zip Code

7336 Hill Forest Dr

Dallas, TX 75230

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Council Member

Employer (See Instructions)

City of Dallas

Date

Full name of contributor

☐ out-of-state PAC (ID#:)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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: 1 of 3		2 FILER NAME Mr Jaime Resendez		3 Filer ID (Ethics Commission Filers)	
4 Date 07/31/2020		5 Payee name Chase Bank			
6 Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5
Date 08/31/2020		Payee name Chase Bank			
Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5
Date 09/30/2020		Payee name Chase Bank			
Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5

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1 Total pages Schedule F1: 2 of 3		2 FILER NAME Mr Jaime Resendez		3 Filer ID (Ethics Commission Filers)	
4 Date 10/30/2020		5 Payee name Chase Bank			
6 Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		7 Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5
Date 11/30/2020		Payee name Chase Bank			
Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5
Date 12/31/2020		Payee name Chase Bank			
Amount (\$) 12.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 1838 S Buckner Blvd Dallas, TX 75217			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	Office held Council District 5

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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)

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1 Total pages Schedule F1: 3 of 3	2 FILER NAME Mr Jaime Resendez	3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2020	5 Payee name PayPal	
6 Amount (\$) 34.72 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Jaime Resendez Office sought: Council District 5 Office held: Council District 5		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 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)	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 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)	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 Candidate / Officeholder name Office sought Office held		

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