

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:

50

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
	Mrs	Paula	C	
NICKNAME	LAST	SUFFIX		
	Blackmon			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
	6408 Patrick Drive Dallas TX 75214			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(214)	394 6593		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
	Mrs	Linda		
	NICKNAME	LAST	SUFFIX	
		England		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	6567 Anita Dallas TX 75214			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(214)	876 5814		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 01 / 31 / 2019 THROUGH 03 / 25 / 2019			
11 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 9	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Mrs Paula C Blackmon

15 Filer ID (Ethics Commission Filers)

**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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 545.00

2. **TOTAL POLITICAL CONTRIBUTIONS**
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 45146.87

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. **TOTAL POLITICAL EXPENDITURES** \$ 21060.17

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 23634.83

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

18 AFFIDAVIT

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mrs Paula C Blackmon, this the 4th day of April, 2019, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Mrs Paula C Blackmon

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 44,250.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 351.87
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 21,060.17
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 29**2** FILER NAME

Mrs Paula C Blackmon

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

02/09/2019

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

Kyle Phillips

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6407 Bob O Link

Dallas, TX 75214

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

Date

02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gloria Tarpley

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

8378 Forest Hills Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Falk

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4611 W. Amherst Avenue

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Betsy del Monte

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4420 Greenbrier Dr.

Dallas, TX 75225

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 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
02/22/2019

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

Amanda Sanchez

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code

14818 Canyon Ridge Drive Mesquite, TX 75180

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/25/2019

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

Chris Heinbaugh

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code

1801 Annex Ave Suite 507 Dallas, TX 75204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

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

Gloria Tarpley

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code

8378 Forest Hills Blvd. Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

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

Lizabeth Tschurr

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code

6315 6315 Mercedes Ave. Dallas, TX 75214

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 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
02/26/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lynette Hall

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6626 Mercedes Drive

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Howard

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

9623 Athlone Drive

Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Adam Starr

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6713 Avalon Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Judie Heitzman

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6602 Kenwood Avenue

Dallas, TX 75214

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:
4 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/01/2019

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

John Elrod

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

7900 Xavier Court

Dallas, TX 75218

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

Date

03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kenneth Bernstein

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

8246 Forest Hills

Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Andrew Stern

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5916 Club Oaks Drive

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Valerie Adams

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

8171 San Benito Way

Dallas, TX 75218

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 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/04/2019

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

Cheryl Small

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

5941 Club Oaks Drive

Dallas, TX 75248

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

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nicole Moler

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6151 Velasco Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rod Givens

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6200 Los Robles Lane

Mesquite, TX 75150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frances Eichorst

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

6740 Westlake Avenue

Dallas, TX 75214

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 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/05/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lisa LeMaster

6 Contributor address;

City; State; Zip Code

6157 Chesley Lane

Dallas, TX 75214

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beverly OHanlon

Contributor address;

City; State; Zip Code

7204 Wabash Circle

Dallas, TX 75214

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Neumann

Contributor address;

City; State; Zip Code

6318 Turner Way

Dallas, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/09/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Ortman

Contributor address;

City; State; Zip Code

8106 San Leandro Drive

Dallas, TX 75218

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:
7 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/09/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Bagley

6 Contributor address;

City; State; Zip Code

8139 Barbaree Blvd

Dallas, TX 75228

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence Davidson

Contributor address;

City; State; Zip Code

6451 Patrick Drive

Dallas, TX 75214

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marty Ruiz

Contributor address;

City; State; Zip Code

6451 Patrick Drive

Dallas, TX 75214

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jack Corgan

Contributor address;

City; State; Zip Code

6651 Lakeshore Drive

Dallas, TX 75214

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:
8 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/19/2019

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

6 Contributor address; City; State; Zip Code
5532 Ellsworth Avenue Dallas, TX 75206

7 Amount of contribution (\$)
100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/22/2019

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

Contributor address; City; State; Zip Code
8366 Santa Clara Drive Dallas, TX 75218

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/23/2019

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

Contributor address; City; State; Zip Code
4323 Dickason Avenue Suite 11 Dallas, TX 75219

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

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

Contributor address; City; State; Zip Code
6627 Weatherford Court McLean, VA 22101

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:
9 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/25/2019

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

Tricia Linderman

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

4409 Westside Drive

Dallas, TX 75209

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

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Falvo

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

2507 Auburn Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathleen Foley

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

7600 W. Lake Meade Blvd.

Las Vegas, NV 89128

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Schwartz

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

7124 Pasadena Avenue

Dallas, TX 75214

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 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/19/2019

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

David Pittman

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

6232 Highgate Lane

Dallas, TX 75214

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

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Austin Schenkel

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

5550 Monticello

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bud Beene

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

12597 Montego Plaza

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Judith Shure

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4501 Pomona Road

Dallas, TX 75209

Principal occupation / Job title (See Instructions)

.00

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 29**2** FILER NAME

Mrs Paula C Blackmon

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

02/14/2019

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

Charles Glover

7 Amount of contribution (\$)

150.00

6 Contributor address;

City; State; Zip Code

10021 Gateway Lane

Dallas, TX 75218

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

Date

02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mitch Paradise

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

7130 Alexander Drive

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tim Coman

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

6442 Chesley

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kenneth Malcolmson

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

3217 Armstrong Avenue

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:
12 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/04/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Pearce

7 Amount of contribution (\$)

150.00

6 Contributor address;

City; State; Zip Code

5835 McCommas Blvd.

Dallas, TX 75206

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gloria Tarpley

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

8378 Forest Hills Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tracy Barrilleaux

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

5616 Reiger Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/19/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kate Kettles

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

6463 Lange Circle

Dallas, TX 75214

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:
13 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/23/2019

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

Sally Niemiec

7 Amount of contribution (\$)

150.00

6 Contributor address;

City; State; Zip Code

5847 Monticello Ave

Dallas, TX 75206

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

Date

02/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joshua Prywes

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

4323 Dickason Avenue Suite 11 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Veletta Forsythe-Lill

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

622 Blair Blvd.

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Derek McClain

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

7331 Fieldgate Drive

Dallas, TX 75230

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 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
02/06/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Isett

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

4610 Indiana Avenue

Lubbock, TX 79413

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Margolin

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2828 Hood Street Suite 1604

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Menges

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

11234 Shelterwood Circle

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pete Schenkle

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

614 N Bishop Suite Ste.

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:
15 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
02/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marybeth Shapiro

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

6656 Lakewood Blvd

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matty Jones

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1714 Windmill Hill Lane

DeSoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amy Fitzgerald

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6175 Vickery Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jason Simon

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

1917 Valley Oaks Court

Irving, TX 75061

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 29**2** FILER NAME

Mrs Paula C Blackmon

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

02/25/2019

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

Bradley Almond

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

8115 San Benito Way

Dallas, TX 75214

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

Date

03/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry Offutt

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gary Griffith

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6875 Carolyncrest Drive

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Philip Crone

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6518 Trammel Drive

Dallas, TX 75214

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 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/19/2019

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

Anne Conner

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

7110 Lakewood Blvd.

Dallas, TX 75214

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

Date

03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Scott Hofland

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7278 Williamson Circle

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Holly Reed

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

7123 LaVista Drive

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gloria Tarpley

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

8378 Forest Hills Blvd.

Dallas, TX 75214

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 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/19/2019

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

Gina Norris

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

4240 Prescott Avenue Suite 7 Dallas, TX 75219

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/28/2019

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

Dustin Marshall

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6464 Mimosa Lane Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/04/2019

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

Alan Walne

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

10020 Caribou Trail Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/04/2019

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

Joan Walne

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

10020 Caribou Trail 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:
19 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
02/25/2019

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

Lance Barksdale

6 Contributor address; City; State; Zip Code

1209 Surry Place Drive Cleburne, TX 76033

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/04/2019

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

Lucy Billingsley

Contributor address; City; State; Zip Code

1722 Routh Street Suite 770 Dallas, TX 75201

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/20/2019

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

Jon Napper

Contributor address; City; State; Zip Code

300 N Akard Suite 3108 Dallas, TX 75201

Amount of contribution (\$)
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/18/2019

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

Beth Huddleston

Contributor address; City; State; Zip Code

3102 Beverly Drive Dallas, TX 75205

Amount of contribution (\$)
500.00

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:
20 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/04/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jessica Burrow

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

6658 Avalon Avenue

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald Kirk

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6342 Mercedes Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/18/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Maria Hasbany

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3509 Hillbrook

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dupree Scovell

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

7034 Alexander

Dallas, TX 75214

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:
21 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/23/2019

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

William Vandiver

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

6705 Bob O Link Drive

Dallas, TX 75214

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

Date

03/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Byron Campbell

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6508 Kenwood Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

P. Wes Black

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6251 Palo Pinto Ave

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Timmins

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

8185 San Benito Way

Dallas, TX 75218

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:
22 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

03/04/2019

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

Brandy Treadway

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

7240 Yamini Drive

Dallas, TX 75230

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

Date

03/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Bird

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

9710 Blanco Drive

Lantana, TX 76226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thomas Dunning

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

2100 Ross Avenue Suite 1200

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Edwin Cabaniss

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1344 N. Windomere

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:
23 of 29**2** FILER NAME

Mrs Paula C Blackmon

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

02/06/2019

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

Sandy Stansbury

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

6278 Martel Avenue

Dallas, TX 75214

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

Date

02/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Deborah Alves

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

3500 Fairmount Street Suite 712 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald Steinhart

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

25 Robledo Drive

Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chris Wells

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

7238 Mimosa Lane

Dallas, TX 75230

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:
24 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/05/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Schweizer

7 Amount of contribution (\$)

550.00

6 Contributor address;

City; State; Zip Code

7104 Cornelia Lane

Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Craig Hall

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6801 Gaylord Parkway Suite 100 Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kathryn Hall

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6801 Gaylord Parkway Suite 100 Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Neal Sleeper

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3324 Blackburn Street

Dallas, TX 75204

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:
25 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/20/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brenda Jackson

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

5539 McCommas Drive

Dallas, TX 75206

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Ewert

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

7147 Westlake Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Rob Richmond

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6904 Tokalon Drive

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert England

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6567 Anita Street

Dallas, TX 75214

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:
26 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/01/2019

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

Carol Payne

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
8207 San Benito Way Dallas, TX 75218

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/18/2019

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

Max Wells

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
3831 Turtle Creek Blvd. Suite 10-E Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/25/2019

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

William McManemin

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
5145 Yolanda Lane Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/01/2019

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

Danielle Blakely

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
701 Justice Avenue Dallas, TX 79416

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:
27 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/01/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Caldwell

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

3511 Trinity Meadows Drive

Dallas, TX 79707

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/27/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Richard Collins

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

8150 N. Central Exp. Suite 1900

Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert Long

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

507 Exposition Avenue

Dallas, TX 75226

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jennifer Karol

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5370 Meaders Lane

Dallas, TX 75229

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:
28 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date

03/18/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Apartment Association of Greater Dallas-PAC

6 Contributor address;

City; State; Zip Code

5728 LBJ Freeway Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

2500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Coats Rose Political Action Committee

Contributor address;

City; State; Zip Code

9 Greenway Plaza Suite 1100

Houston, TX 77046

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Daniel Deichert

Contributor address;

City; State; Zip Code

7347 Meadow Lake

Dallas, TX 75214

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Julie Pankey

Contributor address;

City; State; Zip Code

3435 Wendy Lane

Dallas, TX 75214

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 29

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date
03/08/2019

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

Texans for an Educated Workforce

6 Contributor address; City; State; Zip Code

6963 Bob O Link Dallas, TX 75214

7 Amount of contribution (\$)
2500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/08/2019

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

Joe Alcantar

Contributor address; City; State; Zip Code

7304 Park Lane Dallas, TX 75225

Amount of contribution (\$)
500.00

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)

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
1 of 1

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
03/22/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Byron Campbell

7 Contributor address; City; State; Zip Code
6508 Kenwood Avenue Dallas, TX 75214

8 Amount of Contribution \$
351.87

9 In-kind contribution description
Fundraising event expenses

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

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

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (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) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor 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 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 02/20/2019		5 Payee name Office Depot			
6 Amount (\$) 368.05		7 Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 Push cards	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 02/21/2019		Payee name Hardland Clarke			
Amount (\$) 15.54		Payee address; City; State; Zip Code 15955 LaCanterra Pkwy San Antonio, TX 78256			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check order	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 02/26/2019		Payee name Office Depot			
Amount (\$) 58.84		Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 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.

1 Total pages Schedule F1: 2 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 02/26/2019		5 Payee name Print Dallas			
6 Amount (\$) 286.86		7 Payee address; City; State; Zip Code 1910 Pacific Ave Dallas, TX 75201			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 Push cards	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 02/28/2019		Payee name Royal Thai			
Amount (\$) 37.01		Payee address; City; State; Zip Code 5500 Greenville Ave. Suite 1008 Dallas, TX 75206			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 03/01/2019		Payee name Office Depot			
Amount (\$) 146.55		Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer ink	
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.

1 Total pages Schedule F1: 3 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2019		5 Payee name Edwards and Patterson Signs			
6 Amount (\$) 2676.56		7 Payee address; City; State; Zip Code 203 South Beltline Irving, TX 75060			
8 PURPOSE OF EXPENDITURE		(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 Yard signs	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 03/05/2019		Payee name Print Dallas			
Amount (\$) 1721.98		Payee address; City; State; Zip Code 1910 Pacific Ave Dallas, TX 75201			
PURPOSE OF EXPENDITURE		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 Stationary envelopes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held			
Date 03/11/2019		Payee name Office Depot			
Amount (\$) 7.33		Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies	
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.

1 Total pages Schedule F1: 4 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/12/2019		5 Payee name Greater East Dallas Chamber of Commerce			
6 Amount (\$) 40.00		7 Payee address; City; State; Zip Code 9543 Losa Dr. Suite 118 Dallas, TX 75218			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Luncheon tickets	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/12/2019		Payee name Print Dallas			
Amount (\$) 936.36		Payee address; City; State; Zip Code 1910 Pacific Ave Dallas, TX 75201			
PURPOSE OF EXPENDITURE		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 campaign materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/15/2019		Payee name Print Dallas			
Amount (\$) 373.46		Payee address; City; State; Zip Code 1910 Pacific Ave Dallas, TX 75201			
PURPOSE OF EXPENDITURE		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 Stationary envelopes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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.

1 Total pages Schedule F1: 5 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/15/2019		5 Payee name Office Depot			
6 Amount (\$) 97.04		7 Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 office supplies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/18/2019		Payee name United States Postal Service			
Amount (\$) 245.00		Payee address; City; State; Zip Code 6640 Abrams Rd Dallas, TX 75231			
PURPOSE OF EXPENDITURE		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 Postage	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/18/2019		Payee name Federal Express			
Amount (\$) 196.20		Payee address; City; State; Zip Code 5500 Greenville Avenue Dallas, TX 75206			
PURPOSE OF EXPENDITURE		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 Overnight printing flyers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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.

1 Total pages Schedule F1: 6 of 17	2 FILER NAME Mrs Paula C Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2019	5 Payee name Office Depot	
6 Amount (\$) 64.82	7 Payee address; City; State; Zip Code 5111 Greenville Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/19/2019	Payee name Office Depot	
Amount (\$) 11.20	Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/19/2019	Payee name United States Postal Service	
Amount (\$) 35.00	Payee address; City; State; Zip Code 6640 Abrams Rd Dallas, TX 75231	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
	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.

1 Total pages Schedule F1: 7 of 17	2 FILER NAME Mrs Paula C Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/19/2019	5 Payee name Woodrow Wilson High School	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 100 Glasgow Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(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 Ad - School Playbill
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/21/2019	Candidate / Officeholder name Payee name Finishing and Mailing Center	
Amount (\$) 3774.14	Payee address; City; State; Zip Code 2151 W. Commerce St. Dallas, TX 75212	
PURPOSE OF EXPENDITURE	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 Direct Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/22/2019	Candidate / Officeholder name Payee name Finishing and Mailing Center	
Amount (\$) 48.31	Payee address; City; State; Zip Code 2151 W. Commerce St. Dallas, TX 75212	
PURPOSE OF EXPENDITURE	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 Direct Mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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.

1 Total pages Schedule F1: 8 of 17	2 FILER NAME Mrs Paula C Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Office Depot	
6 Amount (\$) 11.75	7 Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/22/2019	Payee name Office Depot	
Amount (\$) 17.86	Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 03/25/2019	Payee name Kendall Creative	
Amount (\$) 1110.19	Payee address; City; State; Zip Code 17120 Dallas Pkwy. Suite 200 Dallas, TX 75248	
PURPOSE OF EXPENDITURE	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 T Shirts Stickers
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.

1 Total pages Schedule F1: 9 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 02/18/2019		5 Payee name PayPal			
6 Amount (\$) 88.84		7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 02/19/2019		Payee name PayPal			
Amount (\$) 29.60		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 02/22/2019		Payee name PayPal			
Amount (\$) 25.55		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
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: 10 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 02/25/2019		5 Payee name PayPal			
6 Amount (\$) 58.35		7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/26/2019		Payee name PayPal			
Amount (\$) 40.40		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/28/2019		Payee name PayPal			
Amount (\$) 14.25		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/04/2019		5 Payee name PayPal			
6 Amount (\$) 79.74		7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing feesd	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 03/05/2019		Payee name PayPal			
Amount (\$) 33.40		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 03/07/2019		Payee name PayPal			
Amount (\$) 61.55		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
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: 12 of 17	2 FILER NAME Mrs Paula C Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/13/2019	5 Payee name PayPal	
6 Amount (\$) 23.55	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/17/2019	Payee name PayPal	
Amount (\$) 18.30	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	
Date 03/20/2019	Payee name PayPal	
Amount (\$) 68.85	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/24/2019		5 Payee name PayPal			
6 Amount (\$) 76.65		7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/25/2019		Payee name PayPal			
Amount (\$) 34.25		Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/26/2019		Payee name Texas Democratic Party			
Amount (\$) 227.50		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) Polling Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter database	
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.

1 Total pages Schedule F1: 14 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 02/26/2019		5 Payee name Landrieux Harrah			
6 Amount (\$) 1192.50		7 Payee address; City; State; Zip Code 5108 Gaston Avenue Dallas, TX 75214			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office assistant	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 02/28/2019		Payee name Carter Link			
Amount (\$) 600.00		Payee address; City; State; Zip Code 1625 E. 36th Place Tulsa, OK 74105			
PURPOSE OF EXPENDITURE		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 Push card design	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/01/2019		Payee name Zoe Halfmann			
Amount (\$) 4000.00		Payee address; City; State; Zip Code 1710 Mary Street Dallas, TX 75206			
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 Campaign manager	
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.

1 Total pages Schedule F1: 15 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/05/2019		5 Payee name Zoe Halfmann			
6 Amount (\$) 157.23		7 Payee address; City; State; Zip Code 1710 Mary Street Dallas, TX 75206			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for printing and event exp	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/19/2019		Payee name Landrieux Harrah			
Amount (\$) 840.00		Payee address; City; State; Zip Code 5108 Gaston Avenue Dallas, TX 75214			
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 Office assistant	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/20/2019		Payee name Office Depot			
Amount (\$) 0.48		Payee address; City; State; Zip Code 5111 Greenville Avenue Dallas, TX 75206			
PURPOSE OF EXPENDITURE		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 campaign flyers	
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.

1 Total pages Schedule F1: 16 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/22/2019		5 Payee name Texas Democratic Party			
6 Amount (\$) 227.50		7 Payee address; City; State; Zip Code P.O. Box 116 Austin, TX 78767			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Polling 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 Voter database	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/22/2019		Payee name Varidocs			
Amount (\$) 275.83		Payee address; City; State; Zip Code 11419 Ferrell Dr. Suite 100 Dallas, TX 75234			
PURPOSE OF EXPENDITURE		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 campaign materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 03/22/2019		Payee name Mrs Paula C Blackmon			
Amount (\$) 227.50		Payee address; City; State; Zip Code 6408 Patrick Drive Dallas, TX 75214			
PURPOSE OF EXPENDITURE		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 Voter Database TX Democratic Party	
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.

1 Total pages Schedule F1: 17 of 17		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 03/22/2019		5 Payee name Mrs Paula C Blackmon			
6 Amount (\$) 128.30		7 Payee address; City; State; Zip Code 6408 Patrick Drive Dallas, TX 75214			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies	
9 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
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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