Supplemen Officeholde	tal Report r			FOR Cover She	et SR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Paula	МІ	2. Total Pages Filed: 55	
	NICKNAME	LAST Blackmon	SUFFIX	3. Office Held Dallas City Cour	ncil District 9
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day be	fore election C Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	X July 15	c 8th day bef	ore election c Exceeded limit	\$500 c Final Report	
5. PERIOD / COVERED	1/1/2024 тнгоидн 6/30/2024				
6. ELECTION	Month Day Year				
	5/3/2025	c Prima	ory c Runoff	X General c Spe	ecial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00			\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$5,500.00			\$5,500.00
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$0.00			\$0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES \$4,401.52			\$ 4,401.52
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00			\$ 0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 37,825.00
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00	
	TOTALS	8. TOTAL POLITICA	8. TOTAL POLITICAL EXPENDITURES		\$14,237.11
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR			AMOUNT OF OFFICEHOLDER CO		\$0.00
10. AFFIDAVIT		is true a		of perjury, that the accompai Il information required to be i	
AFFLY NOTABY CTAN	MD / CEAL ADOVE		***ELECTRONICAL	LY CERTIFIED***	
AFFIX NOTARY STAI	MP / SEAL ABOVE		Signature of Candid	date or Officeholder	
Sworn to and subscribed	before me, by the said Pa	ula Blackmon		, this the 15th	day
of July , 2	20_24 , to certify whi	ch, witness my hand ar	nd seal of office.		
Signature of officer ac	dministering oath	Printed name of offic	cer administering oath	Title of officer ad	ministering oath

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 1 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
04/17/2024	Peter Schaar			50.00
Campaign Contribution	6 Contributor address; 6834 Chantilly Lane	City; Dallas,	State; Zip Code TX 75214	
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/17/2024	Chris Wallace			250.00
Campaign Contribution	Contributor address; 4235 Castle Rock Court	City;	State; Zip Code G, TX 75038	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/17/2024	Shelby Bobosky	_		500.00
Campaign Contribution	Contributor address; 6823 La Vista Drive	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/17/2024	Full name of contributor Jennifer Owen	out-of-state PAC	· (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 6541 Arborist Lane	City; Dallas,	State: Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete t	his form.	1 Total pages Schedule A1: 2 of 32
2 FILER NAME Paula Blackmon			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of contribution (\$)
04/17/2024	Larry Offutt		100.00
Campaign Contribution	6 Contributor address; City;	State; Zip Code as, TX 75206	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
04/17/2024	Jill Kotvis		500.00
Campaign Contribution	Contributor address; City; 6620 Yosemite Lane Dall	State; Zip Code as, TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 04/17/2024	Full name of contributor	PAC (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 25 Robledo Drive Dall	State; Zip Code as, TX 75230	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 04/17/2024	Full name of contributor out-of-state Rob Richmond	PAC (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 6904 Tokalon Drive Dall	State: Zip Code as, TX 75214	
Principal occu	eation / Job title (See Instructions)	Employer (See Instruc	 ctions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

ine	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 3 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
04/17/2024	Scott Chase			100.00
Campaign Contribution	6 Contributor address; 728 W Colorado	City;	State; Zip Code TX 75208	
8 Principal occu	 upation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/17/2024	Byron Campbell			500.00
Campaign Contribution	Contributor address; 6508 Kenwood Ave	City;	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/18/2024	Veletta Forsythe-Lill			250.00
	Contributor address;	City;	State; Zip Code TX 75223	
Campaign Contribution	622 Blair Blvd	Danas,	111 /6 226	
Campaign Contribution Principal occu		Danas,	Employer (See Instruc	tions)
Contribution	622 Blair Blvd	Dalias,	Employer (See Instruc	Amount of contribution (\$) 500.00
Principal occu	622 Blair Blvd pation / Job title (See Instructions) Full name of contributor	□ out-of-state PAC	Employer (See Instruc	Amount of contribution (\$)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 4 of 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor out-of-state_PAC (ID	D#:)	7 Amount of contribution (\$)
04/18/2024	Gloria Tarpley		250.00
Campaign Contribution	6 Contributor address; City; 8378 Forest Hills Blvd Dallas, T	State; Zip Code "X 75218	
8 Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/18/2024	Harryette Ehrhardt		100.00
Campaign Contribution		State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/18/2024	Tyler Dupree Scovell		500.00
Campaign Contribution	Contributor address; City; 7034 Alexander Drive Dallas, T.	State; Zip Code X 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/18/2024	Full name of contributor	D#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; 6333 East Mockingbird Lane 147-464Dallas, T	State: Zip Code X 75214	
	ation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1: 5 of 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor ut-of-state PA	C (ID#:)	7 Amount of contribution (\$)
04/18/2024	Felix Saucedo		100.00
Campaign Contribution	6 Contributor address; City; 6729 Santa Maria Lane Dallas	State; Zip Code s, TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
04/20/2024	Daniel Ortman		250.00
Campaign Contribution	Contributor address; City; 8106 San Leandro Dr Dallas	State; Zip Code s, TX 75218	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
04/22/2024	Terry Conner		250.00
Campaign Contribution	Contributor address; City; 7110 Lakewood Boulevard Dallas	State; Zip Code s, TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 04/25/2024	Full name of contributor ☐ out-of-state_PA Betty Rice	C (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 2611 Millmar Drive Dallas	State: Zip Code , TX 75228	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 6 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/25/2024	David Cash			1000.00
Campaign Contribution	6 Contributor address; 8602 Garland Road	City;	State; Zip Code TX 75218	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/25/2024	Duncan Fulton			500.00
Campaign Contribution	Contributor address; 6629 Golf Drive	City;	State; Zip Code TX 75205	
Principal occup	nation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/25/2024	Judie Heitzman			100.00
Campaign Contribution	Contributor address; 6602 Kenwood Ave	Citv:	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/25/2024	Full name of contributor Peter Schaar	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 6834 Chantilly Lane	City; Dallas,	State: Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 7 of 32
2 FILER NAME Paula Blackmon			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (IDs	D#:)	7 Amount of contribution (\$)
04/25/2024	Dirk Hilkmann		1000.00
Campaign Contribution	6 Contributor address; City; S 7048 Meadow Lake Avenue Dallas, TX	State; Zip Code	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)#:)	Amount of contribution (\$)
04/25/2024	Kathryn Bazan		100.00
Campaign Contribution	Contributor address; City; Significant Street Dallas, TX	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor)#:)	Amount of contribution (\$)
04/25/2024	David Metzler		250.00
Campaign Contribution	Contributor address; City; S 8627 Vista View Dr Dallas, TX	State; Zip Code X 75243	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/25/2024	Full name of contributor	#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; 6336 Tulip Lane Dallas, TX	State: Zip Code X 75230	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule A1: 8 of 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor out-of-	-state PAC (ID#:)	7 Amount of contribution (\$)
04/25/2024	Ben Key		100.00
Campaign Contribution	6 Contributor address; City; 7109 Bennington Drive	State; Zip Code Dallas, TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date	Full name of contributor	-state PAC (ID#:)	Amount of contribution (\$)
04/25/2024	Macey Davis		1000.00
Campaign Contribution	Contributor address; City; 8322 Ridgelea Street		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor out-of-	-state PAC (ID#:)	Amount of contribution (\$)
04/25/2024	Allen Beene		100.00
Campaign Contribution	Contributor address; City; 12597 Montego Plaza	State; Zip Code Dallas, TX 75230	
Principal occup	vation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 04/25/2024	Full name of contributor	-state PAC (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 6629 Lakeshore	State: Zip Code Dallas, TX 75214	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	l otions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 9 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
04/25/2024	Alan Walne			250.00
Campaign Contribution	6 Contributor address; 10020 Caribou Trial	City; Dallas,	State; Zip Code TX 75238	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/26/2024	Tom Ellis			50.00
Campaign Contribution	Contributor address; 6872 burwood Lane	City;	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/26/2024	Summer Loveland			50.00
Campaign Contribution	Contributor address; 7031 Lakewood Blvd	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 04/26/2024	Full name of contributor Holly Greef	out-of-state PAC	· (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address: 6665 Lakewood Blvd	City; Dallas,	State: Zip Code TX 75214	
Principal occu	Dation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 10 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date 04/28/2024	Full name of contributor Mark Cannon	out-of-state PAC	(ID#:)	7 Amount of contribution (\$) 100.00
Campaign Contribution	6 Contributor address; 6936 Pasadena Avenue	City;	State; Zip Code TX 75214	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date 04/30/2024	Full name of contributor JoDee Neil	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; 3554 Townsend Dr	City; Dallas,	State; Zip Code TX 75229	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 05/02/2024	Full name of contributor S J Hurley	_	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 2227 Vantage St	City;	State; Zip Code TX 75207	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 05/02/2024	Full name of contributor Michael Seay		C (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 6511 Winton Street		State; Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 11 of 32
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 05/03/2024 Campaign Contribution	5 Full name of contributor □ out-of-state PAC (ID#:	500.00
8 Principal occu	pation / Job title (See Instructions) 9 Employe	er (See Instructions)
Date 05/09/2024 Campaign Contribution	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$) 250.00 ip Code
Principal occu	pation / Job title (See Instructions) Employe	r (See Instructions)
Date 05/09/2024 Campaign Contribution	Full name of contributor	100.00
Principal occu	pation / Job title (See Instructions) Employe	er (See Instructions)
Date 05/09/2024 Campaign	Full name of contributor out-of-state PAC (ID#:	100.00
Contribution Principal occup	3210 Carlisle Street Unit 62 dallas, 1X /5204	er (See Instructions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 12 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date 05/10/2024	5 Full name of contributor Bryan Tony	out-of-state PAC	(ID#:)	7 Amount of contribution (\$) 100.00
Campaign Contribution	6 Contributor address; 1500 Pecos Street 4	City; Dallas,	State; Zip Code TX 75204	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date 05/10/2024 Campaign Contribution	Full name of contributor Jesse Smith Contributor address; 2303 Cambria Blvd	City;	State; Zip Code TX 75214	Amount of contribution (\$) 100.00
Principal occu	oation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 05/10/2024	Full name of contributor Brandi Bird		(ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; 9710 Blanco Drive	City;	State; Zip Code a, TX 76226	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 05/10/2024	Full name of contributor Michael Krywucki	out-of-state PAC	(ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; 500 N Akard Suite 4000	City; Dallas,	State: Zip Code TX 75201	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 13 of 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor out-of-sta	te PAC (ID#:)	7 Amount of contribution (\$)
05/10/2024	Todd Williams		1000.00
Campaign Contribution	6 Contributor address; City; 5119 Seneca Drive D	State; Zip Code allas, TX 75209	
8 Principal occu	oation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Date	Full name of contributor	te PAC (ID#:)	Amount of contribution (\$)
05/10/2024	Jim Meara		100.00
Campaign Contribution	Contributor address; City;	State; Zip Code allas , TX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor	te PAC (ID#:)	Amount of contribution (\$)
05/12/2024	Adam Medrano		500.00
Campaign Contribution	Contributor address; City; 2338 Douglas Ave D	State; Zip Code allas, TX 75219	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date 05/13/2024	Full name of contributor	te PAC (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; City; 8102 Old Moss Road D	State: Zip Code allas, TX 75231	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	ctions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: 14 of 32
2 FILER NAME		;	3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of contribution (\$)
05/13/2024	Joe Alcantar		1000.00
Campaign Contribution	6 Contributor address; City; S 7304 Lane Park Ct Dallas, TX	State; Zip Code X 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor	#:)	Amount of contribution (\$)
05/14/2024	Laura Miller		1000.00
Campaign Contribution	Contributor address; City; S P.O. Box 191466 Dallas, TX	State; Zip Code 75219	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor	#:)	Amount of contribution (\$)
05/14/2024	Bobby Abtahi		250.00
Campaign Contribution	Contributor address; City; S 1126 North Zang Boulevard Dallas, TX	State; Zip Code X 75203	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date 05/14/2024	Full name of contributor	#:)	Amount of contribution (\$) 50.00
Campaign Contribution	Contributor address; City; Dallas, TX	State: Zip Code 775228	
	ation / Job title (See Instructions)	Employer (See Instruction	ns)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 15 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
05/14/2024	Jennifer Karol			500.00
Campaign Contribution	6 Contributor address; 5370 Meaders Lane	City; Dallas,	State; Zip Code , TX 75229	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
05/14/2024	Terry Syler			200.00
Campaign Contribution	Contributor address; 6661 Lakewood Blvd	City;	State; Zip Code ,TX 75214	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	cions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
05/15/2024	Matt Vruggink			1000.00
Campaign Contribution	Contributor address; 6727 Sunnyland Lane	Citv:	State; Zip Code , TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 05/16/2024	Full name of contributor Calen Bedford	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 1600 N Haskell Ave Unit 6	City; Dallas,	State: Zip Code TX 75204	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how t	co complete this	form.	1 Total pages Schedule A1: 16 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
05/16/2024	Chris Heinbaugh			100.00
Campaign Contribution	6 Contributor address; 1801 Annex Ave 507	City;	State; Zip Code TX 75204	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
05/17/2024	Regen Horchow			100.00
Campaign Contribution	Contributor address; 1918 N. Olive Street 603	City;	State; Zip Code TX 75201	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
05/17/2024	Barbara Clay			250.00
Campaign Contribution	Contributor address; 8246 Forest Hills Boulevard	City; Dallas,	State; Zip Code TX 75218	
Principal occu	Deation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 05/18/2024	Full name of contributor John Pouland	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 1033 Resolute Road	City; Cool, 7	State: Zip Code ГХ 76066	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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05/20/2024 Concentration 6 Concentration 692 8 Principal occupation / J Date Full 05/21/2024 Date	name of contributor lin Fitzgibbons tributor address; 46 Southridge Drive lob title (See Instructions)	City;	(ID#:) State; Zip Code TX 75214 9 Employer (See Instruc	3 Filer ID (Ethics Commission Filers)7 Amount of contribution (\$)1000.00
4 Date 5 Full 05/20/2024 Co. Campaign 6 Contribution 694 8 Principal occupation / J Date Full 05/21/2024 Date	lin Fitzgibbons tributor address; 46 Southridge Drive	City;	State; Zip Code TX 75214	· · ·
05/20/2024 Co. Campaign 6 Contribution 694 8 Principal occupation / J Date Full 05/21/2024 Date	lin Fitzgibbons tributor address; 46 Southridge Drive	City;	State; Zip Code TX 75214	· · ·
Campaign Contribution 6 Con 694 8 Principal occupation / J Date Full 05/21/2024 Date	tributor address; 46 Southridge Drive	•	TX 75214	1000.00
Contribution 694 8 Principal occupation / J Date Full 05/21/2024 Date	46 Southridge Drive	•	TX 75214	
Date Full 05/21/2024 Date	ob title (See Instructions)		Employer (See Instruct	
05/21/2024 Dat			5 Employer (See manuc	tions)
	name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	n Deichert			1000.00
Campaign Con	tributor address; 47 Meadowlake	City;	State; Zip Code TX 75214	
Principal occupation / Jo	bb title (See Instructions)		Employer (See Instruct	tions)
Date Full	name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/28/2024 Ros	slyn Dawson Thompson			100.00
Campaign Contribution 2 A	tributor address; Abbotsford Ct	City; Dallas,	State; Zip Code TX 75225	
Principal occupation / Jo	bb title (See Instructions)		Employer (See Instruct	tions)
	name of contributor phen Hulsey	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Con Contribution 652	tributor address; 26 Trammel Drive	City; Dallas,	State; Zip Code TX 75214	
Principal occupation / Jo	bb title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 18 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
06/03/2024	Liz Tschurr			100.00
Campaign Contribution	6 Contributor address; 6315 Mercedes	City; Dallas,	State; Zip Code TX 75214	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
06/03/2024	Omar Narvaez			100.00
Campaign Contribution	Contributor address; 411 Broadway Ave 5320	City;	State; Zip Code TX 75212	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
06/03/2024	Mickie Bragalone			1000.00
Campaign Contribution	Contributor address; 4105 Lawther	City; Dallas,	State; Zip Code TX 75214	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 06/03/2024	Full name of contributor Casie Pierce	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 6047 Parkdale	City; Dallas,	State: Zip Code TX 75227	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to compl	lete this form.	1 Total pages Schedule A1: 19 of 32
2 FILER NAME Paula Blackmon			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-	-state PAC (ID#:)	7 Amount of contribution (\$)
06/03/2024	Roger Albright		100.00
Campaign Contribution	6 Contributor address; City; 6446 Patrick Dr	State; Zip Code Dallas, TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	f-state PAC (ID#:)	Amount of contribution (\$)
06/04/2024	Debbie Kirby		250.00
Campaign Contribution	Contributor address; City; 7027 Merrilee Lane		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor	f-state PAC (ID#:)	Amount of contribution (\$)
06/04/2024	Jeff Gatlin		1000.00
Campaign Contribution	Contributor address; City; P.O. Box 180908	State; Zip Code Dallas, TX 75218	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 06/05/2024	Full name of contributor □ out-of- Jaynie Schultz	-state PAC (ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; 11222 Saint Michaels Drive	Dallas, TX 75230 Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	itions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to co	complete this	form.	1 Total pages Schedule A1: 20 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
06/06/2024	LeAnne Williams			50.00
Campaign Contribution	6 Contributor address; 321 Over Dale Court	City; Sunnyv	State; Zip Code vale, TX 75182	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/06/2024	Samuel Sanchez			50.00
Campaign Contribution	Contributor address; 2318 Glengariff	City;	State; Zip Code TX 75228	
Principal occup	ation / Job title (See Instructions)		Employer (See Instructi	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/06/2024	Jennifer Grantham			100.00
Campaign Contribution	Contributor address; 4101 Commerce St Ste 1	City; Dallas,	State; Zip Code TX 75226	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/06/2024	Full name of contributor 🔲 a	out-of-state PAC	(ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address: 6307 Club Lake Court	City; Dallas,	State: Zip Code TX 75214	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

le A1:	1 Total pages Schedule A1: 21 of 32	form.	to complete this	Instruction Guide explains how	The
nmission Filers)	3 Filer ID (Ethics Commission				2 FILER NAME
					Paula Blackmon
ıtion (\$)	7 Amount of contribution (\$	(ID#:)	out-of-state PAC	5 Full name of contributor	4 Date
	50.00			Angela Paluso	06/06/2024
		State; Zip Code TX 75214	City; Dallas,	6 Contributor address; 6535 Bob O Link	Campaign Contribution
	ions)	9 Employer (See Instruc		pation / Job title (See Instructions)	8 Principal occup
ution (\$)	Amount of contribution (\$	(ID#:)	out-of-state PAC	Full name of contributor	Date
	500.00			Jeff Snoyer	06/07/2024
		State; Zip Code TX 75205	City; Dallas,	Contributor address; 3639 Overbrook Dr	Campaign Contribution
	ions)	Employer (See Instruc		pation / Job title (See Instructions)	Principal occup
ution (\$)	Amount of contribution (\$	(ID#:)	out-of-state PAC	Full name of contributor	Date
	100.00			Chris Applequist	06/07/2024
		State; Zip Code TX 75287	City; Dallas,	Contributor address; 17440 Dallas Parkway Ste	Campaign Contribution
	ions)	Employer (See Instruc		pation / Job title (See Instructions)	Principal occup
ution (\$)	Amount of contribution (\$ 1000.00	(ID#:)	out-of-state PAC	Full name of contributor Arcilia Acosta	Date 06/07/2024
		State: Zip Code TX 75247	City; Dallas,	Contributor address; 535 Regal Row	Campaign Contribution
	ions)	Employer (See Instruc		pation / Job title (See Instructions)	Principal occup
_	ions)		City; Dallas,	-	Contribution

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 22 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
06/10/2024	Jud Pankey			50.00
Campaign Contribution	6 Contributor address; 3435 Wendy Lane	City; Dallas,	State; Zip Code TX 75214	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/10/2024	Kelly Drake			50.00
Campaign Contribution	Contributor address; 3202 San Vicente Ave	City; Dallas,	State; Zip Code TX 75228	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/10/2024	Madelyn Rybczyk			250.00
Campaign Contribution	Contributor address; 1507 Tranquilla Drive	City; Dallas,	State; Zip Code TX 75218	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/10/2024	Full name of contributor John Creuzot	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 8185 San Leandro Drive	City; Dallas,	State: Zip Code TX 75218	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 23 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
06/10/2024	Erin Johnston			100.00
Campaign Contribution	6 Contributor address; 6604 Northridge	City; Dallas,	State; Zip Code TX 75214	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/10/2024	Jennifer Hoesterey			50.00
Campaign Contribution	Contributor address; 1409 Bella Vista	City;	State; Zip Code TX 75218	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/10/2024	Isaac Faz			50.00
Campaign Contribution	Contributor address; 101 North Clinton Avenue	City;	State; Zip Code TX 75208	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/11/2024	Full name of contributor Neal Sleeper	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 3374 Blackburn	City; Dallas,	State: Zip Code TX 75204	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	iions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: 24 of 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Paula Blackmon			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
06/11/2024	Theresa Gappa		50.00
Campaign Contribution	6 Contributor address; City; 9302 West Lake Highlands Drive Dallas, 7	State; Zip Code ΓΧ 75218	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
06/11/2024	James Caldwell		1000.00
Campaign Contribution	Contributor address; City;	State; Zip Code c, TX 79423	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
06/11/2024	Michael Seay		50.00
Campaign Contribution	Contributor address; City; 6511 Winton Street Dallas, 7	State; Zip Code ГХ 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 06/11/2024	Full name of contributor	ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; City; 500 Elm Street Dallas, 7	State: Zip Code ΓΧ 75202	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

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	5 Full name of contributor			3 Filer ID (Ethics Commission Filers)
4 Date	5. Full name of contributor			
	5 Full name of contributor			
0.6/11/2004	J I dil fiame di contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
06/11/2024	Michelle Wittenburg			100.00
Campaign Contribution	6 Contributor address; 806 W 30th 1/2 St	City; Austin,	State; Zip Code , TX 78705	
8 Principal occupa	ation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/11/2024	Ryan Trimble			50.00
Campaign Contribution	Contributor address; 8912 Lockhaven Drive	City; Dallas,	State; Zip Code TX 75238	
Principal occupa	tion / Job title (See Instructions)		Employer (See Instruct	cions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/11/2024	Andrew Moore			100.00
Campaign Contribution	Contributor address; 9209 Vinewood Drive	Citv:	State; Zip Code TX 75228	
Principal occupa	ntion / Job title (See Instructions)		Employer (See Instruct	tions)
Date 06/14/2024	Full name of contributor Doric Earle	out-of-state PAC	(ID#:)	Amount of contribution (\$) 200.00
Campaign Contribution	Contributor address: 607 N. Buckner Blvd	City; Dallas,	State: Zip Code TX 75218	
Principal occupa	tion / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 26 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
06/17/2024	Janet Tharp			100.00
Campaign Contribution	6 Contributor address; 7933 Goodshire Ave	City;	State; Zip Code TX 75231	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/26/2024	Scotty Hermann			100.00
Campaign Contribution	Contributor address; 2930 Savannah Court	City;	State; Zip Code TX 76710	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
06/26/2024	George Mason			100.00
Campaign Contribution	Contributor address; 6821 Carolyncrest Drive	City;	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 06/26/2024	Full name of contributor Garrett Boone	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor, address; 2417 Loving Ave	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 27 of 32
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 06/28/2024 Campaign Contribution	5 Full name of contributor out-of-state PAC (ID#: James Mattingly 6 Contributor address; City; State 5151 Belt Line Rd Ste 1150 Dallas, TX 75	100.00 e; Zip Code
8 Principal occu	pation / Job title (See Instructions) 9 En	nployer (See Instructions)
Date 04/01/2024 Campaign Contribution	Full name of contributor out-of-state PAC (ID#: Southwest Airlines Co PAC Contributor address; City; State P.O. Box 36611 Dallas, TX 75	1500.00
Principal occup	eation / Job title (See Instructions)	nployer (See Instructions)
Date 04/15/2024 Campaign Contribution	Full name of contributor	500.00
Principal occup	pation / Job title (See Instructions)	nployer (See Instructions)
Date 04/22/2024 Campaign Contribution	Full name of contributor out-of-state PAC (ID#: Pete Schenkel Contributor address; City; State 614 North Bishop Suite 2 Dallas, TX 75	Amount of contribution (\$) 300.00
Principal occup	pation / Job title (See Instructions)	nployer (See Instructions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 28 of 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paula Blackmon				
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
05/13/2024	Pete Schenkel			500.00
Campaign Contribution	6 Contributor address; 614 North Bishop Suite 2	City; Dallas,	State; Zip Code TX 75208	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
05/14/2024	VJ Martin			25.00
Campaign Contribution	Contributor address; 8230 Claremont Dr	City;	State; Zip Code TX 75228	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
06/11/2024	Ken Benson			500.00
Campaign Contribution	Contributor address; 1527 1527 Waterside Ct	Citv:	State; Zip Code TX 75218	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 06/07/2024	Full name of contributor Kathleen Irvin	out-of-state PAC	(ID#:)	Amount of contribution (\$) 700.00
Campaign Contribution	Contributor address; 6620 Ridgemont	City; Dallas,	State: Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 29 of 32
2 FILER NAME Paula Blackmon				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
06/10/2024	Thomas Dunning			250.00
Campaign Contribution	6 Contributor address; 2100 Ross Ave Ste 1200	City; Dallas,	State; Zip Code TX 75201	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/11/2024	Craig McCartney			250.00
Campaign Contribution	Contributor address; 6735 6735 Gaston Ave	City;	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
06/11/2024	Bo Slaughter			250.00
Campaign Contribution	Contributor address; 5801 Marvin D Love	City; Dallas,	State; Zip Code TX 75237	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/17/2024	Full name of contributor Deedie Rose	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 1000.00
Officeholder Contribution	Contributor address: 5 Willow Wood Circle	City; Dallas,	State: Zip Code TX 75205	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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SCHEDULE A1

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SCHEDULE A1

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			3 Filer ID (Ethics Commission Filers)
5 Full name of contributor Sam Coats		C (ID#:)	7 Amount of contribution (\$) 500.00
6 Contributor address; 26 Ryddington Pl	City; Dallas,	State; Zip Code TX 75230	
ation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Full name of contributor Willis Johnson	_		Amount of contribution (\$) 500.00
Contributor address; 1700 Pacific Avenue	City;	State; Zip Code	
tion / Job title (See Instructions)		Employer (See Instruct	cions)
Full name of contributor James Rigelsky	_	C (ID#:)	Amount of contribution (\$) 1500.00
Contributor address; 6342 Belmont	City;	State; Zip Code TX 75214	
tion / Job title (See Instructions)		Employer (See Instruct	tions)
Full name of contributor Sandy Stansbury	out-of-state PAC	(ID#:)	Amount of contribution (\$) 250.00
Contributor address; 6278 Martel Ave	City; Dallas,	State: Zip Code TX 75214	
tion / Job title (See Instructions)		Employer (See Instruct	tions)
t t	Contributor address; 26 Ryddington PI Ition / Job title (See Instructions) Full name of contributor Willis Johnson Contributor address; 1700 Pacific Avenue Ion / Job title (See Instructions) Full name of contributor James Rigelsky Contributor address; 6342 Belmont Ition / Job title (See Instructions) Full name of contributor Sandy Stansbury Contributor address; 6278 Martel Ave	Contributor address; 26 Ryddington Pl Dallas, tition / Job title (See Instructions) Full name of contributor	City; State; Zip Code Dallas, TX 75230 State Zip Code Dallas, TX 75230 State Zip Code Dallas, TX 75230 State Zip Code Dallas, TX 75230 State Zip Code

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SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 32 of 32
2 FILER NAME Paula Blackmon			3 Filer ID (Ethics Commission Filers)
4 Date 06/18/2024	Jerome Frank	C (ID#:)	7 Amount of contribution (\$) 250.00
Officeholder Contribution	6 Contributor address; City; 6310 Lemmon Suite 210 Dallas,	State; Zip Code , TX 75209	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date 06/11/2024 Officeholder	Dooley Associates PC Contributor address; City;	State; Zip Code	Amount of contribution (\$) 100.00
Contribution Principal occup	14228 Midway Ste 214 Dallas, ation / Job title (See Instructions)	TX 75244 Employer (See Instruct	tions)
Date	_	C (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
	4-1-4-014-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	Guioi (einei a sategei	, nethered above,
1 Total pages Schedule F1:	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
06/24/2024	Bread Zeppelin			
6 Amount (\$) 67.78	7 Payee address; 1300 Main St Dallas, TX 75202	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Staff Meal	Food Beverage Exper	nse	
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
06/24/2024	CURB LV TAXI			
Amount (\$) 34.91	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1111 34th Avenue Long Island City, NY 1110	6		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Taxi	Travel Out Of Distric	et	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
06/24/2024	CURB LV TAXI			
Amount (\$) 21.01	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1111 34th Avenue Long Island City, NY 1110	6		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Taxi	Travel Out Of Distric	et	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/24/2024	WHITTLESEA BLUE Cab		
6 Amount (\$) 18.54 Officeholder Funds for Officeholder Expenditures	7 Payee address; 2000 Industrial Road Las Vegas, NV 89102	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Taxi	Travel Out Of Distric	rt
OF EXPENDITURE	Tuni	Travel Out Of Distric	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/20/2024	DESERT CAB		
Amount (\$) 35.09	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	4675 S Wynn Rd Las Vegas, NV 89103		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Taxi	Travel Out Of Distric	et
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/20/2024	FOODA		
Amount (\$) 15.14	Payee address; 1 N Dearborn Street Ste 600	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	Chicago, IL 60602		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (ether a satege	, ,
1 Total pages Schedule F1: 3 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
06/18/2024	NATIONAL ANTHEM			
6 Amount (\$) 70.37 Officeholder Funds for Officeholder Expenditures	7 Payee address; 2130 Commerce St 2nd Floor Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Meal	Food Beverage Exper	nse	
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
06/14/2024	Lakewood Country Club			
Amount (\$) 966.32	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	6430 Gaston Ave Dallas, TX 75214			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Meals Entertainment	Food Beverage Exper	nse	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
06/12/2024	Bread Zeppelin			
Amount (\$) 58.33	Payee address; 1300 Main St	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1500 Main St. Banas, 111 75252			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OF	1			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/04/2024	Bread Zeppelin		
6 Amount (\$) 62.04	7 Payee address; 1300 Main St Dallas, TX 75202	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Staff Meal	Food Beverage Expe	nse
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/20/2024	GIVEBUTTER		
Amount (\$) 267.78	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	2810 North Church StreeWilmington, DE 19802		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Donation to Black Cl	namber of Commerce
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/17/2024	Milagro Tacos Cantina		
Amount (\$) 61.16	Payee address; 440 Singleton Dallas, TX 75212	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Staff Meal	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDIII E AS NEE	-nen
	AT INCH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	-DLD

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 5 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/14/2024	Bread Zeppelin		
6 Amount (\$) 57.54	7 Payee address; 1300 Main St Dallas, TX 75202	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Staff Meal	Food Beverage Exper	nse
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/13/2024	Dallas Arboretum		
Amount (\$) 70.09	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	8525 Garland Road Dallas, TX 75218		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Date 05/07/2024	Payee name Bread Zeppelin		
05/07/2024	Bread Zeppelin Payee address;	City;	State; Zip Code
05/07/2024	Bread Zeppelin	City;	State; Zip Code
05/07/2024 Amount (\$) 65.27 Officeholder Funds for	Bread Zeppelin Payee address;	City; Description	State; Zip Code
05/07/2024 Amount (\$) 65.27 Officeholder Funds for	Bread Zeppelin Payee address; 1300 Main St Dallas, TX 75202		
O5/07/2024 Amount (\$) 65.27 Officeholder Funds for Officeholder Expenditures PURPOSE OF	Bread Zeppelin Payee address; 1300 Main St Dallas, TX 75202 Category (See Categories listed at the top of this schedule)	Description Food Beverage Expen	
O5/07/2024 Amount (\$) 65.27 Officeholder Funds for Officeholder Expenditures PURPOSE OF	Bread Zeppelin Payee address; 1300 Main St Dallas, TX 75202 Category (See Categories listed at the top of this schedule) Staff Meal Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Description Food Beverage Expen	nse

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 6 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/06/2024	Presidents House Coffee		
$ \begin{array}{c} \textbf{6} \ \text{Amount (\$)} \\ 10.83 \\ \\ \text{Officeholder Funds for} \\ \\ \text{Officeholder Expenditures} \\ \end{array} $	7 Payee address; 700 San Jacinto Austin, TX 78701	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Coffee	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/23/2024	Bread Zeppelin		
Amount (\$) 62.03	Payee address; 1300 Main St Dallas, TX 75202	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures		T 5	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
04/22/2024	San Martin Bakery		
Amount (\$) 35.63	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	3120 McKinney Ave Dallas, TX 75204		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 7 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/17/2024	Bread Zeppelin			
6 Amount (\$) 51.99 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1300 Main St Dallas, TX 75202	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/16/2024	KENT FINE CHOCOLATE			
Amount (\$) 405.94 Officeholder Funds for	Payee address; 7255 FERNMEADOW DRallas, TX 75248	City;	State;	Zip Code
Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Gifts	Gift Awards Memoria	als Expense	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/03/2024	Bread Zeppelin			
Amount (\$) 106.09	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1300 Main St Dallas, TX 75202			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Staff Meal	Food Beverage Exper	nse	
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.		n, TX, officeholder living	·
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to e	complete this form.	Other (enter a catego	ny not listed above)
1 Total pages Schedule F1: 8 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name		<u> </u>	
03/28/2024	MOCKINGBIRD LANE FLORIST			
6 Amount (\$) 65.98 Officeholder Funds for	7 Payee address; 5606 E Mockingbird Ln Dallas, TX 75206	City;	State;	Zip Code
Officeholder Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Gift/Awards/Memorials Expense	Constituent Flowers		
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/28/2024	Bread Zeppelin			
Amount (\$)	Payee address;	City;	State;	Zip Code
75.39 Officeholder Funds for Officeholder Expenditures	1300 Main St Dallas, TX 75202			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Flowers	Gift Awards Memori	als Expense	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
03/15/2024	MARRIOTT MARQUIS WASHINGTON			
Amount (\$) 1189.65	Payee address; 901 Massachusetts Ave NW áshington, DC 20001	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	701 Wassachuseus Ave (Washington, De 2000)			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Hotel	Travel Out Of Distric	et	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	cale. (citie. a category normales aporte)
1 Total pages Schedule F1: 9 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/14/2024	National Democratic Club		
6 Amount (\$) 81.73 Officeholder Funds for	7 Payee address; 30 Ivy St SE Washington, DC 20003	City;	State; Zip Code
Officeholder Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Drinks	Food Beverage Exper	nse
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/05/2024	MONKEY KING NOODLES		
Amount (\$) 55.74	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	2933 Main Street Dallas, TX 75202		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/27/2024	Bread Zeppelin		
Amount (\$)	Payee address;	City;	State; Zip Code
04.04	1300 Main St Dallas, TX 75202	City,	State, Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
I	Official traveroutside of fexas, complete ochedule 1.		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 10 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics (Commission Filers)
4 Date	5 Payee name			
02/13/2024	Bread Zeppelin			
6 Amount (\$) 64.84 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1300 Main St Dallas, TX 75202	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	C	office held
Date	Payee name			
02/09/2024	ALLGOOD CAFÉ			
Amount (\$) 19.17	Payee address; 2934 Main St Dallas, TX 75226	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Staff Meal	Food Beverage Exper	nse	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	С	ffice held
Date	Payee name			
Bato				
02/06/2024	Bread Zeppelin			
Amount (\$) 42.16	Payee address;	City;	State;	Zip Code
Officeholder Funds for Officeholder Expenditures	1300 Main St Dallas, TX 75202			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Staff Meal	Food Beverage Exper	nse	
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	(Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 11 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/25/2024	IHEMMS		
6 Amount (\$) 74.36 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1601 E Cesar Chavez St Austin, TX 78702	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Travel Out Of District	Taxi	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/25/2024	Taco Joint		
Amount (\$) 51.27	Payee address; 6434 E Mockingbird Ln Dallas, TX 75214	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Meal	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/25/2024	HUDSON ST		
Amount (\$) 11.13	Payee address;	City;	State; Zip Code
Officeholder Funds for Officeholder Expenditures	400 Union Bower Ct Irving, TX 75061		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Snack	Food Beverage Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/08/2024	NOBLE COYOTE COFFEE		
6 Amount (\$) 61.38 Officeholder Funds for Officeholder Expenditures	7 Payee address; 819 Exposition Ave Dallas, TX 75226	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Gifts and coffee	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/27/2024	DALLAS MORNING NEWS		
Amount (\$) 32.51	Payee address; 1954 Commerce St Dallas, TX 75201	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Subscription	Fees	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/18/2024	Office Depot		
Amount (\$) 48.68	Payee address; 5111 Greenville Ave Dallas, TX 75206	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3111 Greenvine Ave Danas, 1A 73200		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Labels and plastic bo	ox to store supplies
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category	/ Not listed above)
1 Total pages Schedule F1: 13 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
06/17/2024	EAGLE POSTAL CENTER			
6 Amount (\$) 389.75	7 Payee address; 6333 E Mockingbird Ln Suite 147	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Dallas, TX 75214			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	PO Box	Office Overhead Ren	ital Expense	
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
06/13/2024	BIRDIES EASTSIDE			
Amount (\$) 3795.00	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	6221 E Mockingbird Ln Suite 147 Dallas, TX 75214			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Birthday Fundraiser	Event Expense		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	C	Office held
Date	Payee name			
06/10/2024	Southwest Airlines			
Amount (\$) 148.97	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2702 Love Field Dr Dallas, TX 75235			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Austin	Travel Out Of Distric	et	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 14 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/05/2024	Upward Public Affairs		
6 Amount (\$) 2500.00 Campaign Funds for	7 Payee address; 2211 Weatherbee Fort Worth, TX 76110	City;	State; Zip Code
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting	Consulting Expense	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/05/2024	Texas Democratic Party		
Amount (\$)	Payee address;	City;	State; Zip Code
920.00 Campaign Funds for Campaign Expenditures	P.O. Box 15707 Austin, TX 78761		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Texas VAN	Fees	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/05/2024	Southwest Airlines		
Amount (\$) 308.98	Payee address; 2702 Love Field Dr Dallas, TX 75235	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2702 Love Field Di Ballas, 17, 73233		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Travel Out Of District	El Paso	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Guior (cinici a sategor	y
1 Total pages Schedule F1: 15 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name		<u>I</u>	
06/03/2024	MAILCHIMP			
6 Amount (\$) 117.26	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF	Email Platform	Solicitation Fundrais	ing Expense	
EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	•	Office held
Date	Payee name			
05/28/2024	Dallas Morning News			
Amount (\$) 32.51	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1954 Commerce Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Subscription	Fees		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(Office held
Date	Payee name			
05/14/2024	HALL LONE STAR ASSOCIATION			
05/14/2024 Amount (\$) 25.00	Payee address;	City;	State;	Zip Code
23.00	2301 Ross Avenue Dallas, TX 75201	City,	otate,	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Parking	Travel In District		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OF	l			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)	
1 Total pages Schedule F1: 16 of 21	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
05/02/2024	MAILCHIMP			
6 Amount (\$) 117.26 Campaign Funds for	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City;	State; Zip Code	
Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE	Email Platform	Solicitation Fundraising Expense		
OF EXPENDITURE				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
04/29/2024	Dallas Morning News			
Amount (\$) 32.51	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	1954 Commerce Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Subscription	Fees		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
04/25/2024	WHITE ROCK ALE HOUSE			
Amount (\$) 266.81	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	7331 Gaston Ave Dallas, TX 75214			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Bond Meeting	Event Expense		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 17 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/23/2024	THOMAS GARZA PHOTO			
6 Amount (\$) 525.00 Campaign Funds for Campaign Expenditures	7 Payee address; 400 North Saint Paul Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Photography	Consulting Expense		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/15/2024	BIRDIES EASTSIDE			
Amount (\$) 300.00	Payee address; 6221 E Mockingbird Ln Suite 147	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Dallas, TX 75214			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Birthday Fundraiser Deposit	Event Expense		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
04/04/2024	KATHY FIELDER DESIGN			
Amount (\$) 2000.00	Payee address; 4503 Travis St A Dallas, TX 75205	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	-505 Havis St.11 Banas, 171 /5205			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Consulting	Consulting Expense		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 18 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
04/02/2024	MAILCHIMP			
6 Amount (\$) 117.26 Campaign Funds for Campaign Expenditures	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Email Platform	Solicitation Fundraising Expense		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
03/27/2024	Dallas Morning News			
Amount (\$) 32.51	Payee address; 1954 Commerce Dallas, TX 75201	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	0-1	Decembrish		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Subscription	Fees		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
03/04/2024	MAILCHIMP			
Amount (\$) 117.26	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	405 N Angier Ave NE Atlanta, GA 30308			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Email Platform	Solicitation Fundrais	ing Expense	
OF EXPENDITURE		January 1 differential	6F	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 19 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
02/27/2024	Dallas Morning News			
6 Amount (\$) 32.51 Campaign Funds for Campaign Expenditures	7 Payee address; 1954 Commerce Dallas, TX 75201	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Subscription	Fees		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/27/2024	Stonewall Democrats			
Amount (\$) 25.00	Payee address; P.O. Box 192305 Dallas, TX 75219	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Dues	Fees		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/20/2024	DALLAS COUNTY DEMOCRATS			
Amount (\$) 500.00	Payee address;	City;	State; Zip Code	
Campaign Funds for Campaign Expenditures	1414 N Washington AveDallas, TX 75204			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contribution	Contributions Donati Officeholder Politica	ions Made By Candidate Il Committee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 20 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
02/06/2024	AMM POLITICAL STRATEGIES			
6 Amount (\$) 1335.30 Campaign Funds for Campaign Expenditures	7 Payee address; 507 N Sylvania Ave Fort Worth, TX 76111	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Phones from 2023	Consulting Expense		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/02/2024	MAILCHIMP			
Amount (\$) 117.26	Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Email Platform	Solicitation Fundraising Expense		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/29/2024	Dallas Morning News			
Amount (\$) 32.51	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	1954 Commerce Dallas, TX 75201			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Subscription	Fees		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	, -	,
1 Total pages Schedule F1: 21 of 21	2 FILER NAME Paula Blackmon		3 Filer ID (Ethic	s Commission Filers)
4 Date	5 Payee name			
01/11/2024	NATHAN JOHNSON CAMPAIGN			
6 Amount (\$) 250.00 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 670994 Dallas, TX 75367	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Contribution		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01/02/2024	MAILCHIMP			
Amount (\$) 117.26 Campaign Funds for Campaign Expenditures	Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Email Platform	Solicitation Fundraising Expense T. Check if Austin, TX, officeholder living expense		
	Check if travel outside of Texas. Complete Schedule T.			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	