

# Supplemental Report Officeholder

# FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Paula</b>	MI	2. Total Pages Filed: <b>10</b>
	NICKNAME	LAST <b>Blackmon</b>	SUFFIX	3. Office Held <b>Council District 9</b>
4. SUPPLEMENTAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report			
5. PERIOD / COVERED	7/1/2021    THROUGH    12/31/2021			
6. ELECTION	Month    Day    Year <b>5/6/2023</b> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A			
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 9,000.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 354.86
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 1,771.43
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 975.41
		8. TOTAL POLITICAL EXPENDITURES		\$ 14028.56
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="text-align: center;"> <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code.</p> <p>***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div>				
Sworn to and subscribed before me, by the said <u>Paula Blackmon</u> , this the <u>5th</u> day of <u>January</u> , 20 <u>22</u> , to certify which, witness my hand and seal of office.				
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>				

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

The Instruction Guide explains how to complete this form.

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

Paula Blackmon

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

07/23/2021

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

Craig Hall

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

6801 Gaylord Pkwy Suite 100 Frisco, TX 75034

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

1000.00

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

## Date

07/23/2021

Officeholder  
Contribution

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Domingo Garcia

## Contributor address; City; State; Zip Code

1111 W Mockingbird Suite 1200 Dallas, TX 75247

## Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

07/23/2021

Officeholder  
Contribution

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kathryn Hall

## Contributor address; City; State; Zip Code

6801 Gaylord Pkwy Suite 100 Frisco, TX 75034

## Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

08/20/2021

Officeholder  
Contribution

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tim Byrne

## Contributor address; City; State; Zip Code

2000 McKinney Ave Suite 1000 Dallas, TX 75201

## Amount of contribution (\$)

2000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

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

The Instruction Guide explains how to complete this form.

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

Paula Blackmon

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

08/20/2021

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

Jeff Courtwright

**6** Contributor address;

City; State; Zip Code

6758 Avalon Ave

Dallas, TX 75214

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

2000.00

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

## Date

09/29/2021

Officeholder  
Contribution

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mack Pogue

## Contributor address;

City; State; Zip Code

P.O. Box 1920

Dallas, TX 75221

## Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

09/29/2021

Officeholder  
Contribution

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Delores Pogue

## Contributor address;

City; State; Zip Code

P.O. Box 1920

Dallas, TX 75221

## Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

## Contributor address;

City; State; Zip Code

## Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1 of 7	<b>2</b> FILER NAME Paula Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/23/2021	<b>5</b> Payee name Lakewood Country Club	
<b>6</b> Amount (\$) 370.31 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 6430 Gaston Ave Dallas, TX 75214	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date  11/24/2021	Payee name  Kents Fine Chocolates	
Amount (\$) 324.75 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 8526 Eustis Dallas, TX 75218	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Gift/Awards/Memorials Expense	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Gifts
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date  12/06/2021	Payee name  Neiman Marcus	
Amount (\$) 306.30 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 8687 N Central Expy Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2 of 7	<b>2</b> FILER NAME Paula Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/09/2021	<b>5</b> Payee name Doc Popcorn	
<b>6</b> Amount (\$) 415.21  Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 920 S Harwood Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Gifts
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  07/06/2021	Candidate / Officeholder name  Payee name MailChimp	
Amount (\$) 181.22  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  08/02/2021	Candidate / Officeholder name  Payee name MailChimp	
Amount (\$) 181.22  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3 of 7	<b>2</b> FILER NAME Paula Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/02/2021	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) 181.22 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  10/04/2021	Candidate / Officeholder name  Payee name MailChimp	
Amount (\$) 181.22 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  11/02/2021	Candidate / Officeholder name  Payee name MailChimp	
Amount (\$) 181.22 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4 of 7	<b>2</b> FILER NAME Paula Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date  12/02/2021	<b>5</b> Payee name  MailChimp		
<b>6</b> Amount (\$) 181.22  Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 675 Ponce de Leon Atlanta, GA 30308		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Advertising	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name      Office sought      Office held			
Date  07/22/2021	Payee name  Trulucks Seafood		
Amount (\$) 140.34  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 400 Colorado Austin, TX 78701		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name      Office sought      Office held			
Date  08/16/2021	Payee name  Hudson House		
Amount (\$) 130.34  Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 4040 Abrams Rd Dallas, TX 75214		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name      Office sought      Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 5 of 7		<b>2</b> FILER NAME Paula Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/23/2021		<b>5</b> Payee name Meso Maya			
<b>6</b> Amount (\$) 136.37 Campaign Funds for Campaign Expenditures		<b>7</b> Payee address; City; State; Zip Code 1611 McKinney Ave Dallas, TX 75202			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Food/Beverage Expense		<b>(b)</b> Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Food/Beverage Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date  08/23/2021		Payee name  Tim Reeves Consulting			
Amount (\$) 2200.00 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 2310 5214 Vickery Dallas, TX 75206			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Consulting Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  General Consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date  09/09/2021		Payee name  NLLEO			
Amount (\$) 126.99 Campaign Funds for Campaign Expenditures		Payee address; City; State; Zip Code 3730 Ladd St. Dallas, TX 75212			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 6 of 7	<b>2</b> FILER NAME Paula Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/10/2021	<b>5</b> Payee name Tim Reeves Consulting	
<b>6</b> Amount (\$) 1100.00 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 5214 Vickery Dallas, TX 75206	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  General Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  10/07/2021	Candidate / Officeholder name  Tim Reeves Consulting	
Amount (\$) 1100.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 5214 Vickery Dallas, TX 75206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  General Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  12/26/2021	Candidate / Officeholder name  Tim Reeves Consulting	
Amount (\$) 2200.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 5214 Vickery Dallas, TX 75206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  General Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 7 of 7	<b>2</b> FILER NAME Paula Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/20/2021	<b>5</b> Payee name William Chris Vineyards	
<b>6</b> Amount (\$) 831.79 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; City; State; Zip Code 10352 US Hwy 290 Hye, TX 78635	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Gifts
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  11/04/2021	Candidate / Officeholder name  Upward Public Affairs	
Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2211 Weatherbee Fort Worth, TX 76110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date  12/07/2021	Candidate / Officeholder name  Upward Public Affairs	
Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2211 Weatherbee Fort Worth, TX 76110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED