City Secretary's Office

Supplement Officeholder	al Report		FOR Cover She	MSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MI Paul E	Total Pages Filed: 8	
	NICKNAME	Ridley	3. Office Held Dallas City Coun	cil
4. SUPPLEMENTAL REPORT TYPE	☆ January 15	c 30th day before election c Runoff	c 15th day after camp treasurer appointmen (officeholder only)	
	c July 15	c 8th day before election c Exceeded \$500 limit	c Final Report	
5. PERIOD / COVERED		7/1/2022 THROUGH 12/31/2022		
6. ELECTION	Month Day Year			
	5/6/2023	c Primary c Runoff $oldsymbol{\chi}$ (General c Spe	ecial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LE PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS	·	\$0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$1,000.00
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LE	\$0.00	
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 16,208.45
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
		8. TOTAL POLITICAL EXPENDITURES		\$ 195.66
9. OFFICEHOLDER FUN FOR CAMPAIGN PURF		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
10. AFFIDAVIT		I swear, or affirm, under penalty of perju is true and correct and includes all inform me under Title 15, Election code.		
ELECTRONICALLY CERTIFIED				
AFFIX NOTARY STAMP / SEAL ABOVE ————————————————————————————————————				
Sworn to and subscribed before me, by the said Paul E Ridley , this the 17th day			day	
of January , 20	<u>23</u> , to certify which,	, witness my hand and seal of office.		
Signature of officer ad-	ministering oath	Printed name of officer administering oath	Title of officer add	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 6
2 FILER NAME Paul E Ridley		3 Filer ID (Ethics Commission Filers)
4 Date 07/28/2022 Campaign Contribution	5 Full name of contributor out-of-state PAC (ID#:) Jeff Carey 6 Contributor address; City; State; Zip Code 300 E. Round Grove Suite 621 Lewisville, TX 75067	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	ctions)
Date 09/15/2022 Campaign Contribution	Full name of contributor	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ctions)
Date 09/15/2022 Campaign Contribution	Full name of contributor	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Date 10/12/2022 Campaign Contribution	Full name of contributor	Amount of contribution (\$) 206.46
Principal occup	Dation / Job title (See Instructions) Employer (See Instructions)	Ctions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to co	omplete this	form.	1 Total pages Schedule A1: 2 of 6
2 FILER NAME Paul E Ridley				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor 🔲 o	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
10/21/2022	Alan Naul			1000.00
Campaign Contribution	6 Contributor address; 3899 Maple Ave Suite 300	City;	State; Zip Code TX 75219	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	iions)
Date	Full name of contributor 📗 o	out-of-state PAC	(ID#:)	Amount of contribution (\$)
12/31/2022	Karen Casey			51.99
Campaign Contribution		City;	State; Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 09/02/2022	Bill Ohland	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 0000 P.O. Box 140810	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 10/12/2022	Full name of contributor □ o	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; C 3435 Wendy Ln.	City; Dallas,	State; Zip Code TX 75214	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	Instruction Guide explains how to co	omplete this	form.	1 Total pages Schedule A1: 3 of 6
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Paul E Ridley				
4 Date	5 Full name of contributor	out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
10/12/2022	Judson Pankey			300.00
Campaign Contribution	6 Contributor address; 3435 Wendy Ln.	City; Dallas, 7	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 (\$)
10/12/2022	Noah and Molly Flabiano			250.00
Campaign Contribution		City;	State; Zip Code TX 75209	
Principal occup	ation / Job title (See Instructions)		Employer (See Instructi	ions)
Date	Full name of contributor	out-of-state PAC ((ID#:)	Amount of contribution (\$)
10/12/2022	Joann and Brian Leslie			150.00
Campaign Contribution	Contributor address; C 6226 McCommas	City; Dallas,	State; Zip Code TX 75214	
Principal occup	nation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 10/12/2022	Full name of contributor on Neal Sleeper	out-of-state PAC ((ID#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; C 3374 Blackburn	City; Dallas,	State: Zip Code TX 75201	
Principal occup	nation / Job title (See Instructions)		Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 4 of 6
2 FILER NAME Paul E Ridley				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
10/12/2022	Laura and Chad Schieber			500.00
Campaign Contribution	6 Contributor address; 3209 Drexel Dr	City; Dallas,	State; Zip Code TX 75205	
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 (\$)
10/12/2022	Donald J McNamara			1000.00
Campaign Contribution	Contributor address; 3899 Maple Ave Suite 300	City; Dallas,	State; Zip Code TX 75219	
Principal occu	pation / Job title (See Instructions)		Employer (See Instructi	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
08/02/2022	Ray Hunt			1000.00
Campaign Contribution	Contributor address; 1900 N Akard	City; Dallas,	State; Zip Code TX 75201	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 10/22/2022	Full name of contributor Phil Cobb	out-of-state PAC	(ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; 3839 McKinney Ave. Suite 155	City; Dallas,	State: Zip Code TX 75204	
Principal occu	oation / Job title (See Instructions)		Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 5 of 6
2 FILER NAME Paul E Ridley			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
10/26/2022	Richard Friedman		1000.00
Campaign Contribution	6 Contributor address; City; 20 University Rd Cambri	State; Zip Code dge, MA 02138	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
10/26/2022	Nancy M Klemm		1000.00
Campaign Contribution	Contributor address; City;	State; Zip Code , MA 02115	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
12/30/2022	Jesus and Jane Montfort		1000.00
Campaign Contribution	Contributor address; City; 1610 Hyland Greens Dr Grapev	State; Zip Code ine, TX 76051	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 12/30/2022	Full name of contributor	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address: City; 3105 San Jacinto Suite 107 Dallas,	State: Zip Code TX 75204	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 6
2 FILER NAME Paul E Ridley				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
12/30/2022	Gilbert Aranza			1000.00
Campaign Contribution	6 Contributor address; 000 P.O Box 601527	City; Dallas,	State; Zip Code TX 75360	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
12/30/2022	Roselind Aranza			1000.00
Campaign Contribution	Contributor address; 3445 University	City;	State; Zip Code TX 75205	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
10/07/2022	Matt Segrest			1000.00
Officeholder Contribution	Contributor address; 3012 Fairmont St. Suite 100	City; Dallas,	State; Zip Code TX 75201	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS SCHEDULE E

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

ii the requested	information is not applicable, DO N	Of include this page in the re	port.
The	Instruction Guide explains how to com	plete this form.	1 Total pages Schedule E: 1 of 1
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Paul E Ridley			
4 TOTAL OF UN	NITEMIZED LOANS		0.00
5 Date of loan	7 Name of lender out-of-stat	te PAC (ID#:)	9 Loan Amount (\$)
- Bate of loan	Cut-of-state	(ID#)	= Loan thount (\$\psi\$)
6 Is lender a financial Institution?	8 Lender address; City; State; Zip Code		10 Interest rate
Y N			11 Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	
14 Description of Coll	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political tions)
16 GUARANTOR INFORMATION	17 Name of guarantor	,	19 Amount Guaranteed (\$)
	18 Guarantor address; City;	State; Zip Code	
not applicable	16 Guarantor address, City,	State, Zip Code	
20 Principal Occupa	tion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender out-of-star	te PAC (ID#:)	Loan Amount (\$)
			Interest rate
ls lender a financial	Lender address; City;	State; Zip Code	
Institution?			Maturity date
Y N			
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Coll	ateral	Check if personal fund	ds were deposited into political
none		account (See Instruct	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City;	State; Zip Code	
not applicable			
Principal Occupati	ion (See Instructions)	Employer (See Instructions)	
	ATTACH ADDITIONAL CO	PPIES 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	complete this form.		,
1 Total pages Schedule F1: 1 of 1	2 FILER NAME Paul E Ridley		3 Filer ID (Ethics Commission Fil	
4 Date	5 Payee name		1	
12/31/2022	PayPal			
6 Amount (\$) 185.66 Campaign Funds for Campaign Expenditures	7 Payee address; 2211 N 1st Street San Jose, CA 94088	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Fees	Bank fee		
	(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/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
12/22/2022	Bank of Texas			
Amount (\$) 10.00 Campaign Funds for Campaign Expenditures	Payee address; P.O. Box 660747 Dallas, TX 75266	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fees	Bank Fee		
	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			
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 Austii	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	