

Supplemental Report Officeholder

FORM Cover Sheet SR

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|---|--|--|--------|--|
| 1. CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Paul | MI | 2. Total Pages Filed: 5 |
| | NICKNAME | LAST Ridley | SUFFIX | 3. Office Held Dallas City Council D14 |
| 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 | 7/1/2023 THROUGH 12/31/2023 | | | |
| 6. ELECTION | Month Day Year <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) | | \$ 0.00 |
| | EXPENDITURE TOTALS | 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | \$ 0.00 |
| | | 4. TOTAL OFFICEHOLDER EXPENDITURES | | \$ 0.00 |
| 8. POLITICAL (Campaign) | CONTRIBUTION TOTALS | 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | \$ 0.00 |
| | | 6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 20.00 |
| | EXPENDITURE TOTALS | 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED | | \$ 0.00 |
| | | 8. TOTAL POLITICAL EXPENDITURES | | \$ 800.08 |
| 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>Paul Ridley</u> , this the <u>12th</u> day of <u>January</u> , 20 <u>24</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

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 1 |
| 2 FILER NAME Paul Ridley | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/14/2023 Campaign Contribution | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew Bell 6 Contributor address; City; State; Zip Code 3030 McKinney Ave. Suite 403 Dallas, TX 75204 | 7 Amount of contribution (\$) 20.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> 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

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
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.

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|---|--|--|--|---|-------------|
| 1 Total pages Schedule F1: 1 of 1 | | 2 FILER NAME Paul Ridley | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 07/25/2023 | | 5 Payee name Mail House | | | |
| 6 Amount (\$) 649.01 Campaign Funds for Campaign Expenditures | | 7 Payee address; 2276 Vantage Dallas, TX 75207 City; State; Zip Code | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Mail out ads | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| Date 12/14/2023 | | Payee name PayPal | | | |
| Amount (\$) 1.07 Campaign Funds for Campaign Expenditures | | Payee address; 2211 N. 1st. St. San Jose, CA 95131 City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Fees | | Description contribution service fees | |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| Date 09/12/2023 | | Payee name Junius Hts Historic District Assn | | | |
| Amount (\$) 150.00 Campaign Funds for Campaign Expenditures | | Payee address; 715 Parkmont Dallas, TX 75214 City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description home tour sponsorship | |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

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 F3: 1 of 1 | |
| 2 FILER NAME Paul Ridley | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 07/03/2023 Campaign Funds for Campaign Expenditures | 5 Name of person from whom investment is purchased Charles Schwab Co | | |
| | 6 Address of person from whom investment is purchased; City; State; Zip Code 211 Main St. San Francisco, CA 94105 | | |
| | 7 Description of investment Money market fund | | |
| | 8 Amount of investment (\$) 50000.00 | | |
| Date | Name of person from whom investment is purchased | | |
| | Address of person from whom investment is purchased; City; State; Zip Code | | |
| | Description of investment | | |
| | Amount of investment (\$) | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

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 K: 1 of 1 |
| 2 FILER NAME Paul Ridley | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 12/31/2023 Campaign Funds for Campaign Expenditures | 5 Name of person from whom amount is received Charles Schwab Co 6 Address of person from whom amount is received; City; State; Zip Code 211 Main St. San Francisco, CA 94105 | 8 Amount (\$) 1297.92 |
| 7 Purpose for which amount is received Interest on money market investment <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date | Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code | Amount (\$) |
| Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date | Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code | Amount (\$) |
| Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer | | |
| Date | Name of person from whom amount is received Address of person from whom amount is received; City; State; Zip Code | Amount (\$) |
| Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED