

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

13

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mr

Adam

NICKNAME

LAST

SUFFIX

Bazaldua

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

00

Dallas TX 75357

PO Box: 571823

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

597 4180

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mrs

Rhonda

NICKNAME

LAST

SUFFIX

Devan

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

160 Hillside

Swannanoa NC 28778

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(828)

674 0805

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☒ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

03

26

2019

THROUGH

Month

Day

Year

04

24

2019

11 ELECTION

ELECTION DATE

Month

Day

Year

05

04

2019

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Council District 7

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Mr Adam Bazaldua

15 Filer ID (Ethics Commission Filers)

**16 NOTICE FROM
POLITICAL
COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 269.00

2. **TOTAL POLITICAL CONTRIBUTIONS**
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 4958.18

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 1037.55

4. **TOTAL POLITICAL EXPENDITURES** \$ 6703.10

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 1291.08

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2209.24

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

ELECTRONICALLY CERTIFIED

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr Adam Bazaldua, this the 26th day of April, 2019, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mr Adam Bazaldua	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,689.18
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 2,209.24
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,665.55
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date
03/27/2019

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

Shannon Scott

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code

4926 Misson Ave Suite #2214 Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/28/2019

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

Larry Florio

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

65 E 55th St New York, NY 10022

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2019

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

Mario Trevino

Amount of contribution (\$)

150.00

Contributor address; City; State; Zip Code

P.O. Box 691565 San Antonio, TX 78269

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2019

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

Roberto Ruiz

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

4529 Southern Ave Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date

03/29/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Annette Searcy

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1517 Hillcrest

Ft Worth, TX 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jose Rivas

Amount of contribution (\$)

125.00

Contributor address;

City; State; Zip Code

6145 Parkdale Dr

Dallas, TX 75227

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alexandres

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

4026 Cedar Springs

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chad Schulin

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

5840 Legacy Cir

Plano, TX 75024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date

04/06/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Simmons

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

5306 Perrington Heights

Houston, TX 77056

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles Billings

Amount of contribution (\$)

160.00

Contributor address;

City; State; Zip Code

14841 Dallas Pkwy Suite 760

Dallas, TX 75254

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Steven Wollard

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1200 Main Street

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Keith Cedotal

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

3316 Sharpview Ln

Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date
04/15/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Elizabeth Rose

6 Contributor address;

City; State; Zip Code

4004 Hearthstone

Mesquite, TX 75150

7 Amount of contribution (\$)
50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jenny Lopez

Contributor address;

City; State; Zip Code

105 Lacy Oak

Waxahachie, TX 75165

Amount of contribution (\$)
70.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Holmes

Contributor address;

City; State; Zip Code

1026 WINNETKA

Dallas, TX 75208

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Albert Deberry

Contributor address;

City; State; Zip Code

3519 Preakness Dr

Flower Mound, TX 75028

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date

04/15/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wilson Chu

6 Contributor address;

City; State; Zip Code

2501 Harwood

Dallas, TX 75201

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Melissa Reynolds

Contributor address;

City; State; Zip Code

713 Driftwood

Denton, TX 76209

Amount of contribution (\$)

125.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Wick Allison

Contributor address;

City; State; Zip Code

750 St Paul

Dallas, TX 75201

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/21/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linda Garner

Contributor address;

City; State; Zip Code

1819 S Ervay

Dallas, TX 75215

Amount of contribution (\$)

150.00

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:
6 of 6

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 Date
04/21/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

William McManemin

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

5145 Yolanda Ln

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marcos Ronquillo

Amount of contribution (\$)

259.18

Contributor address;

City; State; Zip Code

8931 Clubcreek

Dallas, TX 75238

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME

Mr Adam Bazaldua

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 2209.24

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender
a financial
Institution?

Y N

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ none

15 Check if personal funds were deposited into political
account (See Instructions)

☐

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender
a financial
Institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political
account (See Instructions)

☐

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 3	2 FILER NAME Mr Adam Bazaldua	3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2019	5 Payee name SIGNAGE SYSTEMS	
6 Amount (\$) 715.53	7 Payee address; City; State; Zip Code 7900 FERGUSON RD DALLAS, TX 75228	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 03/29/2019	Payee name Adam Bazaldua	
Amount (\$) 485.00	Payee address; City; State; Zip Code 6926 Belteau Dallas, TX 75227	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Payment
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 04/01/2019	Payee name Politimize	
Amount (\$) 2500.00	Payee address; City; State; Zip Code 1412 Main Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PR Management
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 3		2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)	
4 Date 04/05/2019		5 Payee name Paypal			
6 Amount (\$) 152.79		7 Payee address; City; State; Zip Code 2415 Haskell Dallas, TX 75204			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/15/2019		Payee name Texas Democratic Party			
Amount (\$) 320.00		Payee address; City; State; Zip Code 4209 Parry Dallas, TX 75223			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN Data	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/16/2019		Payee name Michelle Embler			
Amount (\$) 760.00		Payee address; City; State; Zip Code 1200 Main Street Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Wages	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 3		2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)	
4 Date 04/16/2019		5 Payee name Provisions Consulting			
6 Amount (\$) 150.00		7 Payee address; City; State; Zip Code 12100 Ford Rd Dallas, TX 75234			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Outreach	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/18/2019		Payee name Dallas Parks & Rec			
Amount (\$) 120.00		Payee address; City; State; Zip Code 1500 Marilla Dallas, TX 75201			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Space	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/22/2019		Payee name SIGNAGE SYSTEMS			
Amount (\$) 462.23		Payee address; City; State; Zip Code 7900 FERGUSON RD DALLAS, TX 75228			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED