

# 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:

17

<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	Mr	Jaime			
	NICKNAME	LAST	SUFFIX	Date Received	
		Resendez			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE
	1458 Mission Hills Lane		Dallas TX		75217
<b>5</b> CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( 855 )	534 2595			
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	Mr	Adrian		Amount \$	
	NICKNAME	LAST	SUFFIX	Date Processed	
	AC	Clark		Date Imaged	
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE
	2835 Meadow Way		Dallas TX		75228
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( 855 )	534 2595			
<b>9</b> REPORT TYPE	<input 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
<b>10</b> PERIOD COVERED	Month      Day      Year		Month      Day      Year		
	04 / 25 / 2019		THROUGH 06 / 30 / 2019		
<b>11</b> ELECTION	ELECTION DATE		ELECTION TYPE		
	Month      Day      Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	<input checked="" type="checkbox"/> Other Description Municipal		
<b>12</b> OFFICE	OFFICE HELD (if any)		<b>13</b> OFFICE SOUGHT (if known)		
			Council District 5		

**GO TO PAGE 2**

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

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Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Revised 9/8/2015

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME Mr Jaime Resendez		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,400.00
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 type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 15,190.29
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 Jaime Resendez

3 Filer ID (Ethics Commission Filers)

4 Date

04/26/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lois Spinola

7 Amount of contribution (\$)

250.00

6 Contributor address;

City; State; Zip Code

468 Windsor Ridge Dr

Irving, TX 75038

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Javier Olguin

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

3205 Statler

Dallas, TX 75150

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

East Field Pleasant Grove Campus

Date

05/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Frank Adler

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

2501 Avenue J Suite 100

Arlington, TX 76006

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)

Date

05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Apartment Association of Greater Dallas- PAC

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

5728 LBJ Frwy Suite 100

Dallas, TX 75240

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 Jaime Resendez

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

05/07/2019

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

PETE SCHENKEL

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

500.00

**6** Contributor address;

City; State; Zip Code

614 N BISHOP Suite 3

Dallas, TX 75208

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

## Date

05/31/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bill Ohland

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

P.O. Box 595789

Dallas, TX 75359

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/31/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Citizens of Affordable Housing PAC

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

7114 Royal Ln

Dallas, TX 75230

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

06/04/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Roland Parrish

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

1256 Regents Park Ct

Desoto, TX 75115

## 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:  
3 of 6

**2** FILER NAME

Mr Jaime Resendez

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

**4** Date

06/11/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jean Dean

**6** Contributor address;

City; State; Zip Code

P.O. Box 140039

Dallas, TX 75214

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

1000.00

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

**9** Employer (See Instructions)

Date

04/30/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hector Flores

Contributor address;

City; State; Zip Code

1030 Tracy Ave

Duncanville, TX 75137

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tre Black

Contributor address;

City; State; Zip Code

2426 W Tenth St

Dallas, TX 75211

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)  
Executive

Employer (See Instructions)  
On-Target

Date

05/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Eric Puente

Contributor address;

City; State; Zip Code

3300 Oak Lawn Ave Suite 401

Dallas, TX 75219

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)  
Attorney

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:  
4 of 6**2** FILER NAME

Mr Jaime Resendez

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

05/04/2019

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

Michele Leal

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

250.00

**6** Contributor address;

City; State; Zip Code

224 W 30th St

Houston, TX 77018

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

Self- Employed

## Date

05/04/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Billy Gipson

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

3244 Silver Creek Dr

Mesquite, TX 75181

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

Dallas County

## Date

05/07/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeremiah Walters

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

902 E 5th St

Austin, TX 78702

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

The Walters Law Firm

## Date

05/17/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wendy Lopez

## Amount of contribution (\$)

50.00

## Contributor address;

City; State; Zip Code

2719 Point View Dr

Cedar Hill, TX 75104

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

Texas Army National Guard

**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 Jaime Resendez

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

**4** Date  
06/07/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeremiah Walters

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

100.00

**6** Contributor address;

City; State; Zip Code

902 E 5th St Suite 902,

Austin, TX 78702

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

**9** Employer (See Instructions)

The Walters Law Firm

Date  
04/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

The Real Estate Council PAC

Amount of contribution (\$)

2500.00

Contributor address;

City; State; Zip Code

3100 McKinnon St Suite 1150

Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/25/2019

Full name of contributor

☒ out-of-state PAC (ID#: \_\_\_\_\_)

Ascend PAC

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1700 Kalorama Rd NW Suite 404

Washington, DC 20009

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Maria Martinez

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

702 Holcomb Rd

Dallas, TX 75217

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

DoorDash

**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:  
6 of 6

**2** FILER NAME

Mr Jaime Resendez

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

**4** Date

06/06/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Larry Offutt

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

300.00

**6** Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206

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

Director Safety and Risk

**9** Employer (See Instructions)

Steak N Shake

Date

05/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Rachelle Florez

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

0000 unknown

Dallas, TX 00000

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Malones Cost Plus

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.

# 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 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 04/26/2019		<b>5</b> Payee name Alpha Merit Committee			
<b>6</b> Amount (\$) 52.00		<b>7</b> Payee address; City; State; Zip Code P.O. Box 153123 Dallas, TX 75215			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Comm...		<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  Donation	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Date 04/29/2019		Payee name Office Depot			
Amount (\$) 391.65		Payee address; City; State; Zip Code 3797 W Emporium Circle, Suite 240 Austin, TX 78741			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Date 05/03/2019		Payee name Facebook			
Amount (\$) 250.00		Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025			
<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 Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	

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: 2 of 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/06/2019		<b>5</b> Payee name Executive Press			
<b>6</b> Amount (\$) 142.89		<b>7</b> Payee address; City; State; Zip Code 1400 Presidential Dr Suite 1400 Richardson, TX 75081			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Printing 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  Printing Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/06/2019		Payee name Executive Press			
Amount (\$) 1666.74		Payee address; City; State; Zip Code 1401 Presidential Dr Suite 1400 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/06/2019		Payee name Executive Press			
Amount (\$) 1668.96		Payee address; City; State; Zip Code 1400 Presidential Dr Suite 1400 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
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.

<b>1</b> Total pages Schedule F1: 3 of 8	<b>2</b> FILER NAME Mr Jaime Resendez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/06/2019	<b>5</b> Payee name Executive Press	
<b>6</b> Amount (\$) 1486.95	<b>7</b> Payee address; City; State; Zip Code 1401 Presidential Dr Suite 1100 Richardson, TX 75081	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Printing 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  Printing Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Jaime Resendez Office sought: Council District 5 Office held:		
Date 05/03/2019	Payee name Sams Club	
Amount (\$) 90.60	Payee address; City; State; Zip Code 5555 S Buckner Blvd Dallas, TX 75217	
<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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Jaime Resendez Office sought: Council District 5 Office held:		
Date 05/04/2019	Payee name Facebook	
Amount (\$) 250.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
<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 Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Jaime Resendez Office sought: Council District 5 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.

<b>1</b> Total pages Schedule F1: 4 of 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/04/2019		<b>5</b> Payee name Circle Grill			
<b>6</b> Amount (\$) 1649.32		<b>7</b> Payee address; City; State; Zip Code 3701 N Buckner Dallas, TX 75228			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Event 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  Event Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/06/2019		Payee name Matthew Wilson			
Amount (\$) 690.00		Payee address; City; State; Zip Code 508 Esterine Dallas, TX 75217			
<b>PURPOSE OF EXPENDITURE</b>		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  Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/08/2019		Payee name Grassroots Democracy			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 1426 E Waco Dallas, TX 75216			
<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 Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					

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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: 5 of 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/18/2019		<b>5</b> Payee name Campaign Worker			
<b>6</b> Amount (\$) 127.00		<b>7</b> Payee address; City; State; Zip Code 1458 Mission Hills Ln Dallas, TX 75217			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		<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  Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/28/2019		Payee name Executive Press			
Amount (\$) 338.82		Payee address; City; State; Zip Code 1400 Presidential Dr Suite 1100 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/28/2019		Payee name Executive Press			
Amount (\$) 283.07		Payee address; City; State; Zip Code 1401 Presidential Dr Suite 1100 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					

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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: 6 of 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 06/10/2019		<b>5</b> Payee name USPS			
<b>6</b> Amount (\$) 77.00		<b>7</b> Payee address; City; State; Zip Code 350 S BUCKNER BLVD Dallas, TX 75217			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Mailing Cost		<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  Mailing Cost	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Date 06/13/2019		Payee name Executive Press			
Amount (\$) 135.31		Payee address; City; State; Zip Code 1400 Presidential Dr Suite 110 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Date 05/28/2019		Payee name Executive Press			
Amount (\$) 471.97		Payee address; City; State; Zip Code 1400 Pres Suite 110 Richardson, TX 75081			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Printing Expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	

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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: 7 of 8		<b>2</b> FILER NAME Mr Jaime Resendez		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 06/18/2019		<b>5</b> Payee name Angry Dog			
<b>6</b> Amount (\$) 353.61		<b>7</b> Payee address; City; State; Zip Code 2726 Commerce St Dallas, TX 75226			
<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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/03/2019		Payee name Campaign Workers			
Amount (\$) 1486.00		Payee address; City; State; Zip Code 1458 Mission Hills Ln Dallas, TX 75217			
<b>PURPOSE OF EXPENDITURE</b>		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  Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					
Date 05/04/2019		Payee name Campaign Workers			
Amount (\$) 2000.00		Payee address; City; State; Zip Code 1458 Mission Hills Ln Dallas, TX 75217			
<b>PURPOSE OF EXPENDITURE</b>		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  Contract Labor	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jaime Resendez		Office sought Council District 5	
Office held					

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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: 8 of 8	<b>2</b> FILER NAME Mr Jaime Resendez	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/01/2019	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 78.40	<b>7</b> Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees	<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  PayPal Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Jaime Resendez	Office sought Council District 5
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <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
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <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

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