

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	2. Total Pages Filed:
		Paul	E	7
4. SUPPLEMENTAL REPORT TYPE	NICKNAME	LAST	SUFFIX	3. Office Held
		Ridley		Dallas City Council 14
5. PERIOD / COVERED	<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			
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)		\$9,150.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$0.00
		8. TOTAL POLITICAL EXPENDITURES		\$3,665.33
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES	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 perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code. <div style="text-align: center;"> ***ELECTRONICALLY CERTIFIED*** <hr/> Signature of Candidate or Officeholder </div> AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said <u>Paul E Ridley</u> , this the <u>18th</u> day of <u>January</u> , 20 <u>22</u> , 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				

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 4**2** FILER NAME

Paul E Ridley

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

12/09/2021

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

Coats Rose, P.C. Political Action Committee

6 Contributor address;

City; State; Zip Code

9 Greenway Plaza Suite 1000

Houston, TX 77046

7 Amount of contribution (\$)

500.00

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

Date

07/01/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carol Donovan

Contributor address;

City; State; Zip Code

6333 Mockingbird Ln. Suite 147

Dallas, TX 75214

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Omar Alam

Contributor address;

City; State; Zip Code

500 W. 5th St. Suite 700

Austin, TX 78701

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Phil Cobb

Contributor address;

City; State; Zip Code

3839 McKinney Ave. Suite 155

Dallas, TX 75204

Amount of contribution (\$)

500.00

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 4**2** FILER NAME

Paul E Ridley

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

07/20/2021

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

Kevin Hickman

6 Contributor address;

City; State; Zip Code

9474 Gatetrail Dr.

Dallas, TX 75238

7 Amount of contribution (\$)

500.00

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

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Henry Rossi

Contributor address;

City; State; Zip Code

3601 Turtle Creek Blvd. Suite T6 Dallas, TX 75219

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Turner

Contributor address;

City; State; Zip Code

2626 Cole Ave. Suite 606

Dallas, TX 75204

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pete Schenkel

Contributor address;

City; State; Zip Code

4231 Belclaire Ave.

Dallas, TX 75205

Amount of contribution (\$)

500.00

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:
3 of 4**2** FILER NAME

Paul E Ridley

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

07/20/2021

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

James B Reeder

6 Contributor address;

City; State; Zip Code

1925 Cedar Springs Rd. Suite 302 Dallas, TX 75201

7 Amount of contribution (\$)

500.00

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

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Mihalopoulos

Contributor address;

City; State; Zip Code

3932 Potomac Ave.

Dallas, TX 75205

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Neal D Sleeper

Contributor address;

City; State; Zip Code

3374 Blackburn St.

Dallas, TX 75204

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John N Walker

Contributor address;

City; State; Zip Code

2519 Thomas Ave.

Dallas, TX 75201

Amount of contribution (\$)

500.00

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:
4 of 4**2** FILER NAME

Paul E Ridley

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

07/20/2021

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

Donald J McNamara

6 Contributor address;

City; State; Zip Code

3899 Maple Ave. Suite 300

Dallas, TX 75219

7 Amount of contribution (\$)

1000.00

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

Date

07/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: TX _____)

Mary Fairchild

Contributor address;

City; State; Zip Code

1600 Bent Creek Dr.

Southlake, TX 76092

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/21/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

J. Christopher Luna

Contributor address;

City; State; Zip Code

P.O. Box 131523

Dallas, TX 75313

Amount of contribution (\$)

750.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2021

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bradly Boswell

Contributor address;

City; State; Zip Code

P.O. Box 560491

Dallas, TX 75356

Amount of contribution (\$)

1000.00

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.

SCHEDULE F1

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)

1 Total pages Schedule F1: 1 of 2	2 FILER NAME Paul E Ridley	3 Filer ID (Ethics Commission Filers)
---	--------------------------------------	--

5	Payee name	Shelby Patterson
---	------------	------------------

7 Payee address; City; State; Zip Code
4612 Junius St. Suite C Dallas, TX 75246

(b) Description

☐ Check if travel outside of Texas. Complete Schedule T.

☐ 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
--	-------------------------------	---------------	-------------

Payee name
Taylor Adams

Payee address;	City; State; Zip Code
519 Oak Cliff Blvd.	Dallas, TX 75208

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	Office held
--	-------------------------------	---------------	-------------

Payee name	Joan Ridley
------------	-------------

Payee address;	City; State; Zip Code
5100 Victor St.	Dallas, TX 75214

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	Office held
--	-------------------------------	---------------	-------------

Forms provided by Texas Ethics Commission

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 2	2 FILER NAME Paul E Ridley	3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2021	5 Payee name Lakewood Advocate	
6 Amount (\$) 639.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 6301 Gaston Ave. Suite 820 Dallas, TX 75214	
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 local promo
9 Complete <u>ONLY</u> 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 <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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 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 <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