

# 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:

50

<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	Mrs	Paula	C		
	NICKNAME	LAST	SUFFIX	Date Received	
		Blackmon			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE
	6408 Patrick Drive		Dallas TX	75214	
<b>5</b> CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( 214 )	394 6593			
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	Mrs	Linda		Amount \$	
	NICKNAME	LAST	SUFFIX	Date Processed	
		England		Date Imaged	
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE
	6567 Anita		Dallas TX	75214	
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	( 214 )	876 5814			
<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 type="checkbox"/> July 15 <input checked="" 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 05 / 29 / 2019		
<b>11</b> ELECTION	ELECTION DATE		ELECTION TYPE		
	Month      Day      Year	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special			
	06 / 08 / 2019				
<b>12</b> OFFICE	OFFICE HELD (if any)		<b>13</b> OFFICE SOUGHT (if known) Council District 9		

**GO TO PAGE 2**

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

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 FILER NAME</b> Mrs Paula C Blackmon		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 58,750.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,200.00
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	\$ 54,276.24
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 26**2** FILER NAME

Mrs Paula C Blackmon

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

04/27/2019

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

John Botefuhr

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

100.00

**6** Contributor address;

City; State; Zip Code

10119 Estacado

Dallas, TX 75228

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

## Date

05/04/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ken Montgomery

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

2022 Crest Ridge

Dallas, TX 75228

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/05/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jason and Amy Kulas

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

6843 Lakewood Blvd

Dallas, TX 75214

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/05/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Darren Boruff

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

6445 Lake Circle Drive

Dallas, TX 75214

## 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 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/05/2019

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

Judith Shure

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

100.00

**6** Contributor address;

City; State; Zip Code

4501 Pomona Rd

Dallas, TX 75209

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

## Date

05/05/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Evan Stone

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

5300 Goodwin Ave

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cheryl Small

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

5941 Club Oaks Drive

Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/06/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Elrod

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

7900 Xavier Court

Dallas, TX 75218

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 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/07/2019

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

Janie Clinkscales

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

100.00

**6** Contributor address;

City; State; Zip Code

433 E. Las Colinas Suite 3433

Irving, TX 75039

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

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jim Bagley

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

8139 Barbaree Dr

Dallas, TX 75228

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/21/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Roger Gault

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

6444 Lavendale Ave

Dallas, TX 75230

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/23/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

R Lawrence Davidson

## Amount of contribution (\$)

100.00

## Contributor address;

City; State; Zip Code

6334 Gaston Ave.

Dallas, TX 75214

## 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:  
4 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/09/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Laura Reed

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

100.00

**6** Contributor address;

City; State; Zip Code

5214 Vickery Blvd.

Dallas, TX 75206

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

**9** Employer (See Instructions)

Date  
05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Margaret Jordan

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

3500 Fairmount Street

Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kevin Bryant

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

4463 Brookview Drive

Dallas, TX 75220

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/24/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Adenilda Bryant

Amount of contribution (\$)

150.00

Contributor address;

City; State; Zip Code

4463 Brookview Dr.

Dallas, TX 75220

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 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/27/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Glover

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

150.00

**6** Contributor address;

City; State; Zip Code

10021 Gateway Lane

Dallas, TX 75218

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

**9** Employer (See Instructions)

Date  
05/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Philip Crone

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

6518 Trammel Dr.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Moore

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6649 Avalon Avenue

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Erin Johnston

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

6604 Northridge

Dallas, TX 75214

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 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/05/2019

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

Gloria Tarpley

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

250.00

**6** Contributor address;

City; State; Zip Code

8378 Forest Hills Blvd.

Dallas, TX 75218

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

## Date

05/05/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Veletta Forsythe-Lill

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

622 Blair Blvd.

Dallas, TX 75223

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/07/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Philip Ritter

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

10824 Aladdin Cr

Dallas, TX 75229

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/10/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tamber Johnson

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

P.O. Box 570588

Dallas, TX 75357

## 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:  
7 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/15/2019

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

Pryor Blackwell

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

250.00

**6** Contributor address;

City; State; Zip Code

4301 Beverly Drive

Dallas, TX 75205

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

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Carl Isett

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

4610 Indiana

Lubbock, TX 79413

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jason Simon

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

1917 Valley Oaks Court

Irving, TX 75061

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Courtney Spellicy

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

7117 Wake Forrest Drive

Dallas, TX 75214

## 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:  
8 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/23/2019

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

Katrina Keyes

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

250.00

**6** Contributor address;

City; State; Zip Code

3839 Mckinney Ave.

Dallas, TX 75204

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

## Date

05/14/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Davis

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

8926 Lakewood Blvd

Dallas, TX 75214

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Gleeson

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

7007 Prestonshire Lane

Dallas, TX 75225

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mary Fairchild

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

1800 Bent Creek Dr.

Southlake, TX 76092

## 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:  
9 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/16/2019

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

Richard Rivera

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

250.00

**6** Contributor address;

City; State; Zip Code

P.O. Box 540131

Dallas, TX 75354

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

## Date

05/09/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Timothy Reeves

## Amount of contribution (\$)

250.00

## Contributor address;

City; State; Zip Code

5214 Vickery Blvd.

Dallas, TX 75206

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/14/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Pete Schenkel

## Amount of contribution (\$)

300.00

## Contributor address;

City; State; Zip Code

614 N. Bishop Suite #3

Dallas, TX 75208

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/17/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anthony Campagna

## Amount of contribution (\$)

300.00

## Contributor address;

City; State; Zip Code

728 N. Paulus

Dallas, TX 75214

## 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:  
10 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/18/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anne Raymond

**7** Amount of contribution (\$)  
350.00

**6** Contributor address;

City; State; Zip Code

4111 W. Lawther

Dallas, TX 75214

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

**9** Employer (See Instructions)

Date  
05/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marcos G Ronquillo

Amount of contribution (\$)  
350.00

Contributor address;

City; State; Zip Code

13155 Noel Road Suite 700

Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dirk Hilkmann

Amount of contribution (\$)  
500.00

Contributor address;

City; State; Zip Code

7048 Meadow Lake Ave

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dave Wishnew

Amount of contribution (\$)  
500.00

Contributor address;

City; State; Zip Code

1700 Pacific Avenue Suite 2390

Dallas, TX 75201

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:  
11 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/02/2019

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

**6** Contributor address; City; State; Zip Code  
2215 Cedar Springs Suite 2108 DALLAS, TX 75201

**7** Amount of contribution (\$)  
500.00

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

**9** Employer (See Instructions)

Date  
05/03/2019

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

Contributor address; City; State; Zip Code  
P.O. Box 670506 DALLAS, TX 75367

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/05/2019

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

Contributor address; City; State; Zip Code  
6658 Avalon Ave Dallas, TX 75214

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/05/2019

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

Contributor address; City; State; Zip Code  
6964 Tokalon Drive Dallas, TX 75214

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:  
12 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date

05/05/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bobby Lyle

**6** Contributor address; City; State; Zip Code

6688 North Central Expressway Dallas, TX 75206

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

500.00

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

**9** Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marybeth Shapiro

Contributor address; City; State; Zip Code

6656 Lakewood Blvd Dallas, TX 75214

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Garrett Boone

Contributor address; City; State; Zip Code

5949 Sherry Suite #1010 Dallas, TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lisa Cabaniss

Contributor address; City; State; Zip Code

1344 N. Windomere Dallas, TX 75208

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:  
13 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/08/2019

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

Andrew Stern

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

500.00

**6** Contributor address;

City; State; Zip Code

5916 Club Oaks Drive

Dallas, TX 75248

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

## Date

05/09/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Daniel

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

10215 Lake Gardens Drive

Dallas, TX 75218

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/09/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linda McMahon

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

2355 Thomas Avenue

Dallas, TX 75201

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/09/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ronald Steinhart

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

25 Robledo Drive

Dallas, TX 75230

## 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:  
14 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/10/2019

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

Fouad Bashour

**6** Contributor address; City; State; Zip Code

3879 Maple Ave Suite #400 Dallas, TX 75219

**7** Amount of contribution (\$)  
500.00

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

**9** Employer (See Instructions)

Date  
05/12/2019

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

Bay Miltenberger

Contributor address; City; State; Zip Code

4627 Miron Dr Dallas, TX 75220

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/12/2019

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

Bay Miltenberger

Contributor address; City; State; Zip Code

4627 Miron Dr Dallas, TX 75220

Amount of contribution (\$)  
500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/14/2019

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

Alan Walne

Contributor address; City; State; Zip Code

10020 Caribou Trail Dallas, TX 75238

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:  
15 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/15/2019

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

Don Glendenning

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

500.00

**6** Contributor address;

City; State; Zip Code

3401 Lee Parkway

Dallas, TX 75219

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

## Date

05/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kay Fulton

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

6629 Golf

Dallas, TX 75205

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Neal Sleeper

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

3324 Blackburn St

Dallas, TX 75204

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Munding

## Amount of contribution (\$)

500.00

## Contributor address;

City; State; Zip Code

3413 Southwestern

Dallas, TX 75225

## 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:  
16 of 26

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date  
05/24/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michele Wheeler

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

3409 Swanson Drive

Plano, TX 75025

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
05/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joe Alcantar

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

7304 Lane Park Court

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Christopher Luna

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

P.O. Box 131523

Dallas, TX 75313

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brian Burr

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4103 Hyde Park Dr

Sugarland, TX 77479

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:  
17 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/16/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bill Ohland

**6** Contributor address;

City; State; Zip Code

P.O. Box 595789

Dallas, TX 75359

**7** Amount of contribution (\$)  
500.00

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

**9** Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Roberto Bonilla

Contributor address;

City; State; Zip Code

2502 Oak Hill

Missouri City, TX 77459

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/20/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joe Alcantar

Contributor address;

City; State; Zip Code

7304 Lane Park Court

Dallas, TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Linebarger Goggan Blair Sampson, LLP

Contributor address;

City; State; Zip Code

P.O. Box 17428

Austin, TX 78760

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:  
18 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
04/25/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeff Gatlin

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

600.00

**6** Contributor address;

City; State; Zip Code

1330 Centerville Rd.

Dallas, TX 75218

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

**9** Employer (See Instructions)

Date

05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anne Conner

Amount of contribution (\$)

750.00

Contributor address;

City; State; Zip Code

7110 Lakewood Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/22/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Matthew Fitzgerald

Amount of contribution (\$)

750.00

Contributor address;

City; State; Zip Code

6175 Vickery Blvd.

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Rob Richmond

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6904 Tokalon

Dallas, TX 75214

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:  
19 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/06/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael A Krywucki

**6** Contributor address;

City; State; Zip Code

500 N Akard

Dallas, TX 75201

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

1000.00

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

**9** Employer (See Instructions)

Date  
05/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Casey McManemin

Contributor address;

City; State; Zip Code

5145 Yolanda

Dallas, TX 75229

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lee Kleinman

Contributor address;

City; State; Zip Code

11322 E Ricks Circle

Dallas, TX 75230

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mason Brown

Contributor address;

City; State; Zip Code

P.O. Box 29615

Dallas, TX 75229

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.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
20 of 26

2 FILER NAME

Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 Date  
05/10/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Manny Ybarra

7 Amount of contribution (\$)  
1000.00

6 Contributor address;

City; State; Zip Code

8222 Douglas Sr

Dallas, TX 75225

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jere Thompson

Amount of contribution (\$)  
1000.00

Contributor address;

City; State; Zip Code

3609 Centenary

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hunter Hunt

Amount of contribution (\$)  
1000.00

Contributor address;

City; State; Zip Code

6800 Lakewood Blvd

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/15/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Evelyn Rose

Amount of contribution (\$)  
1000.00

Contributor address;

City; State; Zip Code

5 Willowood St

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:  
21 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/16/2019

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

Michael Terry

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

1000.00

**6** Contributor address;

City; State; Zip Code

5950 Berkshire Ln

Dallas, TX 75225

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

## Date

05/16/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Garrett Boone

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

5949 Sherry Suite #1010

Dallas, TX 75225

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/20/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anne Conner

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

7110 Lakewood Blvd

Dallas, TX 75214

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/20/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cappy McGarr

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

1901 N Akard

Dallas, TX 75201

## 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:  
22 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/21/2019

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

John Muse

**6** Contributor address; City; State; Zip Code

3131 Turtle Creek Suite 1020 Dallas, TX 75219

**7** Amount of contribution (\$)  
1000.00

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

**9** Employer (See Instructions)

Date  
05/22/2019

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

Donald McNamara

Contributor address; City; State; Zip Code

3899 Maple Ave Suite #300 Dallas, TX 75219

Amount of contribution (\$)  
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/22/2019

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

Frank Mihalopoulos

Contributor address; City; State; Zip Code

4545 N. Central Expwy Suite #200 Dallas, TX 75205

Amount of contribution (\$)  
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/22/2019

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

WM2 Company, LLC

Contributor address; City; State; Zip Code

3889 Maple Ave Suite #350 Dallas, TX 75219

Amount of contribution (\$)  
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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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:  
23 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/25/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kirk Wilson

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

1000.00

**6** Contributor address;

City; State; Zip Code

4418 Brookview Dr.

Dallas, TX 75220

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

**9** Employer (See Instructions)

Date  
05/09/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Richard Collins

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

8150 N. Central Expwy Suite #1900 Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Craig Hall

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6801 Gaylord Pkwy Suite #100

Frisco, TX 75034

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
05/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ron Barnhill

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2313 Amhearst Lane

Flower Mound, TX 75028

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:  
24 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/20/2019

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

James Caldwell

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

1000.00

**6** Contributor address;

City; State; Zip Code

3511 Trinity Meadows

Midland, TX 79707

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

## Date

05/20/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Danielle Blakely

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

101 Justice

Lubbock, TX 79416

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tim Byrne

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

2000 McKinney Ave. Suite 1000 Dallas, TX 75201

## Principal occupation / Job title (See Instructions)

## Employer (See Instructions)

## Date

05/15/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Melanie Byrne

## Amount of contribution (\$)

1000.00

## Contributor address;

City; State; Zip Code

2000 McKinney Ave. Suite 1000 Dallas, TX 75201

## 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:  
25 of 26**2** FILER NAME

Mrs Paula C Blackmon

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

05/10/2019

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

Dallas Firefighters Association Public Safety Committee

**6** Contributor address;

City; State; Zip Code

10956 Audelia Drive

Dallas, TX 75243

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

1500.00

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

## Date

05/22/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

The Real Estate Council Political Action Committee

## Contributor address;

City; State; Zip Code

3100 McKinnon Street Suite #1150 Dallas, TX 75201

## Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/02/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Metroplex Association of Realtors PAC

## Contributor address;

City; State; Zip Code

8201 N.Stemmons Frwy

Dallas, TX 75247

## Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

## Date

05/09/2019

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

HBA of Greater Dallas HOMEPAC

## Contributor address;

City; State; Zip Code

5816 W. Plano Prkwy

Plano, TX 75093

## Amount of contribution (\$)

2500.00

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:  
26 of 26

**2** FILER NAME

Mrs Paula C Blackmon

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

**4** Date  
05/28/2019

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

DeMetris Sampson

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

250.00

**6** Contributor address;

City; State; Zip Code

4347 S. Hampton Road

Dallas, TX 75232

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

**9** 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)

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.**

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
1 of 1

2 FILER NAME  
Mrs Paula C Blackmon

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
05/29/2019

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Ben Ralston

7 Contributor address; City; State; Zip Code  
2417 Fabens Suite H Dallas, TX 75229

8 Amount of Contribution \$  
600.00

9 In-kind contribution description  
Billboard

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

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date  
05/29/2019

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

Contributor address; City; State; Zip Code  
2417 Fabens Dallas, TX 75229

Amount of Contribution \$  
600.00

In-kind contribution description  
Billboard

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

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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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 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/29/2019		<b>5</b> Payee name Paul Schweitzer			
<b>6</b> Amount (\$) 165.19		<b>7</b> Payee address; City; State; Zip Code 7104 Cornelia Lane Dallas, TX 75214			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement		<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  Yard stakes	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Laquia Anderson			
Amount (\$) 195.00		Payee address; City; State; Zip Code 908 Gross Rd Suite 533 Mesquite, TX 75149			
<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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Sha-Keitha Caldwell			
Amount (\$) 195.00		Payee address; City; State; Zip Code 908 Gross Rd Mesquite, TX 75149			
<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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 2 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/03/2019		<b>5</b> Payee name Remington Research Group			
<b>6</b> Amount (\$) 250.00		<b>7</b> Payee address; City; State; Zip Code P.O. Box 5960 Kansas City, MO 64171			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Polling 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  Polling	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/28/2019		Payee name District 9 Draught House			
Amount (\$) 216.19		Payee address; City; State; Zip Code 718 N. Buckner Dallas, TX 75218			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Event Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Campaign event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/30/2019		Payee name Nikia Johnson			
Amount (\$) 285.00		Payee address; City; State; Zip Code 800 Link Drive Duncanville, TX 75116			
<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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 3 of 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/17/2019	<b>5</b> Payee name Nikia Johnson	
<b>6</b> Amount (\$) 277.50	<b>7</b> Payee address; City; State; Zip Code 800 Link Dr. Duncanville, TX 75116	
<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  Walk Program
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 05/21/2019	Payee name Tim Reeves Consulting	
Amount (\$) 8441.25	Payee address; City; State; Zip Code 5214 Vickery Blvd. Dallas, TX 75206	
<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  Direct Mail
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 05/23/2019	Payee name Cynethia Cole	
Amount (\$) 292.50	Payee address; City; State; Zip Code 514 Caravaca Dr Garland, TX 75043	
<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  Phone bank
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/23/2019		<b>5</b> Payee name Wanda Jefferson			
<b>6</b> Amount (\$) 315.00		<b>7</b> Payee address; City; State; Zip Code 4804 Chilton Dr Dallas, TX 75227			
<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	
				Phones	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/04/2019		Payee name Angela Paluso			
Amount (\$) 329.99		Payee address; City; State; Zip Code 6535 Bob OLink Dallas, TX 75215			
<b>PURPOSE OF EXPENDITURE</b>		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	
				Event Expenses	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/25/2019		Payee name Article I Communications			
Amount (\$) 4930.00		Payee address; City; State; Zip Code 141 Elm St Suite 500 Buffalo, NY 14203			
<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	
				Direct Mail	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/01/2019		<b>5</b> Payee name Zoe Halfmann			
<b>6</b> Amount (\$) 4000.00		<b>7</b> Payee address; City; State; Zip Code 1710 Mary Street Dallas, TX 75206			
<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  Campaign manager	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Varidocs			
Amount (\$) 1802.37		Payee address; City; State; Zip Code 11419 Ferrell Dr. Dallas, TX 75234			
<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  Campaign materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/10/2019		Payee name Edwards and Patterson Signs			
Amount (\$) 1109.16		Payee address; City; State; Zip Code 203 S. Beltline Irving, TX 75060			
<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  Campaign signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
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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 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 04/30/2019	<b>5</b> Payee name Deinde Group	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 916 Nolte Drive Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Consulting 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  General consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 05/08/2019	Payee name Landrieux Harrah	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 5108 Gaston Avenue Dallas, TX 75214	
<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  Campaign assistant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 05/28/2019	Payee name Cinthy Wheat	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 2529 Parkrow Ave Dallas, TX 75219	
<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  Walk Program
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/28/2019	<b>5</b> Payee name Landrieux Harrah	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 5108 Gaston Avenue Dallas, TX 75214	
<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  Campaign Assistant
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name                      Office sought                      Office held		
Date 05/03/2019	Payee name Camille Freeney	
Amount (\$) 330.00	Payee address; City; State; Zip Code 1627 Branch Creek Allen, TX 75002	
<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  Walk program
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name                      Office sought                      Office held		
Date 04/30/2019	Payee name Nikia Johnson	
Amount (\$) 330.00	Payee address; City; State; Zip Code 800 Link Dr. Duncanville, TX 75116	
<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  Walk Program
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name                      Office sought                      Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 04/30/2019	<b>5</b> Payee name Brendetta McDonald	
<b>6</b> Amount (\$) 330.00	<b>7</b> Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215	
<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  Walk program
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 04/30/2019	Payee name Jasmin McDonald	
Amount (\$) 330.00	Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215	
<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  Walk program
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
Date 05/17/2019	Payee name Eurdine Ponds	
Amount (\$) 352.50	Payee address; City; State; Zip Code 2046 Berwick Dallas, TX 75215	
<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  Phones
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name      Office sought      Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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: 9 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/17/2019		<b>5</b> Payee name Brendetta McDonald			
<b>6</b> Amount (\$) 360.00		<b>7</b> Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215			
<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  Walk Program	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Charlotte Prear			
Amount (\$) 360.00		Payee address; City; State; Zip Code 5812 Logan Craft Dallas, TX 75227			
<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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Rafeel Ponds			
Amount (\$) 367.50		Payee address; City; State; Zip Code 2046 Berwick Dallas, TX 75215			
<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  Walk program	
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: 10 of 20		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 05/28/2019		5 Payee name Zoe Halfmann			
6 Amount (\$) 4000.00		7 Payee address; City; State; Zip Code 1710 Mary Street Dallas, TX 75206			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Campaign manager	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/09/2019		Payee name Article I Communications			
Amount (\$) 2500.00		Payee address; City; State; Zip Code 141 Elm St Buffalo, NY 14203			
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  Direct Mail	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/22/2019		Payee name Paula Blackmon			
Amount (\$) 882.10		Payee address; City; State; Zip Code 6408 Patrick Drive Dallas, TX 75214			
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  Travel expenses	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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.

1 Total pages Schedule F1: 11 of 20		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 05/16/2019		5 Payee name Varidocs			
6 Amount (\$) 810.04		7 Payee address; City; State; Zip Code 11419 Ferrell Dallas, TX 75234			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Printing 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  Campaign materials	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Nikia Johnson			
Amount (\$) 375.00		Payee address; City; State; Zip Code 800 Link Dr. Duncanville, TX 75116			
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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Brendetta McDonald			
Amount (\$) 375.00		Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215			
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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 12 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/23/2019		<b>5</b> Payee name Angel Jackson			
<b>6</b> Amount (\$) 375.00		<b>7</b> Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215			
<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  Walk Program	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/22/2019		Payee name Paula Blackmon			
Amount (\$) 603.47		Payee address; City; State; Zip Code 6408 Patrick Dallas, TX 75214			
<b>PURPOSE OF EXPENDITURE</b>		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  Event Expenses	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Na Caya Smith			
Amount (\$) 570.00		Payee address; City; State; Zip Code 800 Link Dr. Duncanville, TX 75116			
<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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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.

1 Total pages Schedule F1: 13 of 20		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/2019		5 Payee name Barry Blackmon			
6 Amount (\$) 412.20		7 Payee address; City; State; Zip Code 6408 Patrick Drive Dallas, TX 75214			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Loan Repayment/Reimbursement		(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 expenses	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Cynethia Cole			
Amount (\$) 450.00		Payee address; City; State; Zip Code 514 Caravaca Dr Garland, TX 75043			
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  Phone bank	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Wanda Jefferson			
Amount (\$) 450.00		Payee address; City; State; Zip Code 4804 Chilton Dr Dallas, TX 75227			
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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 14 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/23/2019		<b>5</b> Payee name Charlotte Prear			
<b>6</b> Amount (\$) 457.50		<b>7</b> Payee address; City; State; Zip Code 5812 Logan Craft Dallas, TX 75227			
<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  walk Program	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Sha-Keitha Caldwell			
Amount (\$) 457.50		Payee address; City; State; Zip Code 908 Gross Rd Mesquite, TX 75149			
<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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/23/2019		Payee name Laquia Anderson			
Amount (\$) 457.50		Payee address; City; State; Zip Code 908 Gross Rd Mesquite, TX 75149			
<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  Walk program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 15 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/23/2019		<b>5</b> Payee name Cinty Wheat			
<b>6</b> Amount (\$) 500.00		<b>7</b> Payee address; City; State; Zip Code 2529 Parkrow Ave Dallas, TX 75219			
<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  Walk Program	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 05/17/2019		Payee name DeMarcus Offord			
Amount (\$) 500.00		Payee address; City; State; Zip Code 2601 Burger St Dallas, TX 75215			
<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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Office held					
Date 05/23/2019		Payee name DeMarcus Offord			
Amount (\$) 500.00		Payee address; City; State; Zip Code 2601 Burger St Dallas, TX 75215			
<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  Walk Program	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
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: 16 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/17/2019		<b>5</b> Payee name Cinty Wheat			
<b>6</b> Amount (\$) 500.00		<b>7</b> Payee address; City; State; Zip Code 2529 Parkrow Ave Dallas, TX 75219			
<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  Walk Program	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/20/2019		Payee name Tim Reeves Consulting			
Amount (\$) 6184.20		Payee address; City; State; Zip Code 5214 Vickery Blvd. Dallas, TX 75206			
<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  Direct Mail	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/22/2019		Payee name Paula Blackmon			
Amount (\$) 143.91		Payee address; City; State; Zip Code 6408 Patrick Drive Dallas, TX 75214			
<b>PURPOSE OF EXPENDITURE</b>		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  Software expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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.

1 Total pages Schedule F1: 17 of 20		2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)	
4 Date 05/06/2019		5 Payee name Dream Cafe			
6 Amount (\$) 122.44		7 Payee address; City; State; Zip Code 6465 E Mockingbird Dallas, TX 75214			
8  <b>PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule)  Food/Beverage 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  Campaign meeting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/17/2019		Payee name Venus Ponds			
Amount (\$) 112.50		Payee address; City; State; Zip Code 519 N. Ridge Allen, TX 75002			
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  Phones	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/14/2019		Payee name Michaels			
Amount (\$) 106.99		Payee address; City; State; Zip Code 5500 Greenville Ave. Dallas, TX 75206			
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  Campaign T Shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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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: 18 of 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/10/2019	<b>5</b> Payee name Cynethia Cole	
<b>6</b> Amount (\$) 465.00	<b>7</b> Payee address; City; State; Zip Code 514 Caravaca Dr Garland, TX 75043	
<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  Phone Banking
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 05/07/2019	Payee name PayPal	
Amount (\$) 195.65	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	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  Credit card fees
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	
Date 05/10/2019	Payee name PayPal	
Amount (\$) 212.70	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
<b>PURPOSE OF EXPENDITURE</b>	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  Credit card fees
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <span>Candidate / Officeholder name</span> <span>Office sought</span> <span>Office held</span> </div>	

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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: 19 of 20		<b>2</b> FILER NAME Mrs Paula C Blackmon		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 05/29/2019		<b>5</b> Payee name Varidocs			
<b>6</b> Amount (\$) 324.18		<b>7</b> Payee address; City; State; Zip Code 11419 Ferrell Drive Dallas, TX 75234			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising 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  Postage	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 05/21/2019		Payee name Hustle			
Amount (\$) 439.71		Payee address; City; State; Zip Code 343 Sansone St San Francisco, CA 94104			
<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  Software	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 04/27/2019		Payee name Ashley Watson			
Amount (\$) 154.50		Payee address; City; State; Zip Code 2303 Stoneman Dallas, TX 75215			
<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  Walk program	
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.

<b>1</b> Total pages Schedule F1: 20 of 20	<b>2</b> FILER NAME Mrs Paula C Blackmon	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 05/06/2019	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) 900.00	<b>7</b> Payee address; City; State; Zip Code 1601 S. California Palo Alto, CA 94304	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising 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  Social media advertising
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 05/28/2019	Payee name Colannade International	
Amount (\$) 175.00	Payee address; City; State; Zip Code 3011 East Richey RD Humble, TX 77338	
<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  Call program
	<b>9</b> 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	
<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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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