

Supplemental Report Officeholder

FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	2. Total Pages Filed: 28
		Paula		
	NICKNAME	LAST	SUFFIX	3. Office Held
		Blackmon		Dallas City Council District 9
4. SUPPLEMENTAL 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			
5. PERIOD / COVERED	3/28/2023 THROUGH 4/26/2023			
6. ELECTION	Month Day Year 5/6/2023 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A			
7. OFFICE-HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$200.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$200.00
	EXPENDITURE TOTALS	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$0.00
		4. TOTAL OFFICEHOLDER EXPENDITURES		\$8,870.81
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$0.00
		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$26,500.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$0.00
		8. TOTAL POLITICAL EXPENDITURES		\$21,977.94
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES	9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD			\$0.00
10. AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code. <div style="text-align: center;"> ***ELECTRONICALLY CERTIFIED*** _____ Signature of Candidate or Officeholder </div>				
Sworn to and subscribed before me, by the said <u>Paula Blackmon</u> , this the <u>28th</u> day of <u>April</u> , 20 <u>23</u> , to certify which, witness my hand and seal of office.				
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dalton Pfiffner 6 Contributor address; City; State; Zip Code 9330 Alta Mira Dr Dallas, TX 75218	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/29/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Firefighters Association Contributor address; City; State; Zip Code 10956 Audelia Dallas, TX 75243	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Seay Contributor address; City; State; Zip Code 6511 Winton Street Dallas, TX 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne Conner Contributor address; City; State; Zip Code 7110 Lakewood Boulevard Dallas, TX 75214	Amount of contribution (\$) 250.00
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Conner 6 Contributor address; City; State; Zip Code 7110 Lakewood Boulevard Dallas, TX 75214	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrence E Syler Contributor address; City; State; Zip Code 6661 LAKEWOOD BOULEVARD DALLAS, TX 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Mihalopoulos Contributor address; City; State; Zip Code 4645 N. Central Expressway Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Police Officer PAC Contributor address; City; State; Zip Code 1412 Griffin St East Dallas, TX 75215	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/02/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Noltemy 6 Contributor address; City; State; Zip Code 1800 North Field Street Suite 4011 Dallas, TX 75202	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/02/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Owen Contributor address; City; State; Zip Code 6541 Arborist Lane Dallas, TX 75214	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) john griswold Contributor address; City; State; Zip Code 9418 Hobart Street Dallas, TX 75218	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/04/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) david cash Contributor address; City; State; Zip Code 3500 Saint Johns Drive Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Lill 6 Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/06/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veletta Forsythe-Lill Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jill Magnuson Contributor address; City; State; Zip Code 4318 Beechwood Lane Dallas, TX 75220	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/09/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Reynolds Contributor address; City; State; Zip Code 3310 Fairmount Street Dallas, TX 75201	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deedie Rose 6 Contributor address; City; State; Zip Code 5 Willow Wood Circle Dallas, TX 75205	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Heinbaugh Contributor address; City; State; Zip Code 1801 Annex Avenue Suite 507 Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caren Prothro Contributor address; City; State; Zip Code 3929 Potomac Avenue Dallas, TX 75205	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIRLEY CROW Contributor address; City; State; Zip Code 6310 MERCEDES Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUART CROW 6 Contributor address; City; State; Zip Code 6310 MERCEDES Dallas, TX 75214	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Crow Contributor address; City; State; Zip Code 4612 Watauga Dallas, TX 75209	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itzel Crow Contributor address; City; State; Zip Code 4612 Watauga Dallas, TX 75209	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Bancroft Contributor address; City; State; Zip Code 2598 Middleton Frisco, TX 75033	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Crow 6 Contributor address; City; State; Zip Code 4700 Preston Dallas, TX 75205	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/11/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Moriarty Contributor address; City; State; Zip Code 400 North Ervay Street Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/11/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam McGill Contributor address; City; State; Zip Code 9260 Meadowglen Dallas, TX 75238	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/11/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Channel Outdoor LLC PAC Contributor address; City; State; Zip Code 2325 E. Camelback Rd Suite 400 Phoenix, AZ 85018	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Fineman 6 Contributor address; City; State; Zip Code 8371 San Leandro Drive Dallas, TX 75218	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cody Armbrister Contributor address; City; State; Zip Code 4045 Bryn Mawr Dallas, TX 75225	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. Coe Juracek Contributor address; City; State; Zip Code 11460 St. Michaels Drive Dallas, TX 75230	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley Mullikin Contributor address; City; State; Zip Code 3412 Harvard Dallas, TX 75206	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan Schubert 6 Contributor address; City; State; Zip Code 4560 Lorraine Dallas, TX 75205	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert McClain Contributor address; City; State; Zip Code 3819 Maple Dallas, TX 75219	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Silverthorn Contributor address; City; State; Zip Code 2415 Grandview Richardson, TX 75080	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Bancroft Contributor address; City; State; Zip Code 2598 Middleton Frisco, TX 75033	Amount of contribution (\$) 850.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/13/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sean Rae ----- 6 Contributor address; City; State; Zip Code 4512 Lorraine Dallas, TX 75225	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/13/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Levy ----- Contributor address; City; State; Zip Code 5 Vista Lane Glen Head, NY 11545	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/13/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingston Hill Partners LLC ----- Contributor address; City; State; Zip Code 74 Talmadge Hill Road New Canaan, CT 06840	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/14/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agustin Arteaga ----- Contributor address; City; State; Zip Code 3424 Gillespie St Suite 9 Dallas, TX 75219	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danielle Williamson 6 Contributor address; City; State; Zip Code 1182 Circle on the Green Columbus, OH 43235	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/14/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonewall Democrats of Dallas Contributor address; City; State; Zip Code P.O. Box 192305 Dallas, TX 75219	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/14/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Enzler Contributor address; City; State; Zip Code 6027 Goliad Dallas, TX 75206	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherie Small Contributor address; City; State; Zip Code 7265 Inwood Road Dallas, TX 75209	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/17/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Barksdale 6 Contributor address; City; State; Zip Code 229 Spring Grove Drive Waxahachie, TX 75165	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/17/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucilo Pena Contributor address; City; State; Zip Code 1717 Arts Plaza Dallas, TX 75201	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/17/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joanna St. Angelo Contributor address; City; State; Zip Code 3221 Red Bird Ln Grapevine, TX 76051	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/17/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rob Richmond Contributor address; City; State; Zip Code 6904 Tokalon Dr Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/17/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demetris Sampson 6 Contributor address; City; State; Zip Code P.O. Box 763834 Dallas, TX 75376	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/17/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Mundinger Contributor address; City; State; Zip Code 3413 Southwestern Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/17/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge Carter Contributor address; City; State; Zip Code 3525 University Dallas, TX 75205	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Wallace Contributor address; City; State; Zip Code 4235 Castle Rock Court IRVING, TX 75038	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boaz Adler 6 Contributor address; City; State; Zip Code 5530 Ledgestone Drive Dallas, TX 75214	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/18/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Smith Contributor address; City; State; Zip Code 3210 Carlisle Suite 62 Dallas, TX 75204	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Rush Contributor address; City; State; Zip Code 5563 Ledgestone Drive Dallas, TX 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector Garcia Contributor address; City; State; Zip Code 1409 S. Lamar Suite 723 Dallas, TX 75215	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Howard 6 Contributor address; City; State; Zip Code 9623 Athlone Drive Dallas, TX 75218	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/19/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myles Peck Contributor address; City; State; Zip Code 123 East Carrillo Street Santa Barbara, CA 93101	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurt Watkins Contributor address; City; State; Zip Code 7019 Glacier Drive Dallas, TX 75227	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paige Gatlin Contributor address; City; State; Zip Code P.O. Box 670865 Dallas, TX 75367	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaynie Schultz 6 Contributor address; City; State; Zip Code 11222 St. Michaels Drive Dallas, TX 75230	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/20/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordell Adams Contributor address; City; State; Zip Code 4037 Prescott Ave Dallas, TX 75219	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sunhee Hong Contributor address; City; State; Zip Code 13740 Midway Rd 506 Dallas, TX 75244	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/24/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay Jenkins Contributor address; City; State; Zip Code 516 West Main Street Waxahachie, TX 75165	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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 17 of 17
2 FILER NAME Paula Blackmon		3 Filer ID (Ethics Commission Filers)
4 Date 04/24/2023 Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Isett 6 Contributor address; City; State; Zip Code 5102 County Road 7630 Lubbock, TX 79424	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/24/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Glendenning Contributor address; City; State; Zip Code 3401 Lee Parkway Suite 504 Dallas, TX 75219	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/24/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Karno Contributor address; City; State; Zip Code 6626 Kenwood Ave Dallas, TX 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023 Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Orozco Contributor address; City; State; Zip Code 5016 Groom Lane Dallas, TX 75227	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/26/2023	5 Payee name DREAM CAFÉ	
6 Amount (\$) 32.06 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 6465 E Mockingbird Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/25/2023	Payee name OMNI AUSTIN DOWNTOWN	
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 700 San Jacinto Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/25/2023	Payee name Bread Zeppelin	
Amount (\$) 57.41 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1300 Main St Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/24/2023	5 Payee name WOODROW WILSON Booster Club	
6 Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 100 S Glasgow Dr Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER	(b) Description Sponsorship
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/21/2023	Payee name TEXAS CHILI PARLOR	
Amount (\$) 53.48 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1409 Lavaca St Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/19/2023	Payee name Capital Sedan And Taxi	
Amount (\$) 68.40 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 13021 Dessau Rd Austin, TX 78754	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Car Service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2023	5 Payee name EAGLE POSTAL CENTER	
6 Amount (\$) 1033.20 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 6333 E Mockingbird Ln Suite 147 DALLAS, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Mailbox Expense
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 04/11/2023	Payee name Bread Zeppelin	
Amount (\$) 57.41 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1300 Main St Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 04/10/2023	Payee name OfficeMax	
Amount (\$) 37.89 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2415 N Haskell Ave Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2023	5 Payee name PROMO4GOOD	
6 Amount (\$) 2607.48 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1808 S Good Latimer Exp Dallas, TX 75226	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description T-Shirts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 04/04/2023	Payee name BGT Strategies	
Amount (\$) 3500.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1500 Pecos St Suite 4 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 04/04/2023	Payee name Tim Reeves Consulting	
Amount (\$) 425.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2310 N Henderson Ave Suite 524 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Postcards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2023	5 Payee name Central City Austin	
6 Amount (\$) 60.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 9023 Old Lampasas TrailAustin, TX 78750	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Parlors Ice Creams	
Amount (\$) 28.97 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 6465 E Mockingbird Lane Suite 465 Dallas, TX 75214	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/03/2023	Payee name The Westin Galleria Dallas	
Amount (\$) 14.07 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 13340 Dallas Pkwy Dallas, TX 75240	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 6 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2023	5 Payee name QT	
6 Amount (\$) 49.62 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1718 N Belt Line Rd Irving, TX 75061 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out Of District	(b) Description Gas
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/30/2023	Payee name Yardbird Table & Bar	
Amount (\$) 104.60 Officeholder Funds for Officeholder Expenditures	Payee address; 901 New York Ave NW Washington, DC 20001 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/29/2023	Payee name Dolcezza Gelato and Coffee	
Amount (\$) 44.37 Officeholder Funds for Officeholder Expenditures	Payee address; 1704 Connecticut Ave NW Washington, DC 20009 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2023	5 Payee name Reren Lamem & Bar	
6 Amount (\$) 96.85 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 817 7th St NW Washington, DC 20001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/21/2023	Payee name SPEEDPRO of DALLAS	
Amount (\$) 184.65 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 8230 Elmbrook Dr Suite 700 Dallas, TX 75247	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/21/2023	Payee name GALLIGASKINS SUBMARINE	
Amount (\$) 20.99 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 5817 Camp Bowie Blvd Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/11/2023	5 Payee name Tim Reeves Consulting	
6 Amount (\$) 12383.63 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2310 N Henderson Ave Suite 524 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Mailer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		
Date 04/10/2023	Payee name OfficeMax	
Amount (\$) 542.77 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2415 N Haskell Ave Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		
Date 04/10/2023	Payee name CULTIVAR COFFEE	
Amount (\$) 31.12 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1155 Peavy Rd Dallas, TX 75218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div>		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2023	5 Payee name Tim Reeves Consulting	
6 Amount (\$) 2157.88 Campaign Funds for Campaign Expenditures	7 Payee address; 2310 N Henderson Ave Suite 524 Dallas, TX 75206 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 04/03/2023	Payee name MAILCHIMP	
Amount (\$) 106.60 Campaign Funds for Campaign Expenditures	Payee address; 675 Ponce De Leon Avenue Atlanta, GA 30308 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Email Service
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
Date 04/03/2023	Payee name BGT Strategies	
Amount (\$) 3500.00 Campaign Funds for Campaign Expenditures	Payee address; 1500 Pecos St Suite 4 Dallas, TX 75204 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 10	2 FILER NAME Paula Blackmon	3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2023	5 Payee name Upward Public Affairs	
6 Amount (\$) 2500.00 Campaign Funds for Campaign Expenditures	7 Payee address; 2211 Weatherbee Fort Worth, TX 76110 City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04/26/2023	Payee name Anedot	
Amount (\$) 550.30 Campaign Funds for Campaign Expenditures	Payee address; 1920 McKinney Ave Suite 700 Dallas, TX 75201 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Online Fundraising Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED