CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:16	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mrs Paula NICKNAME LAST Blackmon	MI C SUFFIX	OFFICE USE ONLY Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	6408 Patrick Drive	Oallas TX 75214		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (214) 394 6593	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt # Amount \$	
NAME	Mrs Linda NICKNAME LAST England	SUFFIX	Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 6567 Anita	JITE #; CITY; STATE; Dallas TX 75214	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 876 5814	EXTENSION		
9 REPORT TYPE	X January 15 30th day before electrical July 15 8th day before electrical Strain Strai		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 07 / 01 / 2019	THROUGH 12	Day Year 31 2019	
11 ELECTION	BLECTION DATE Month Day Year Primary 05 / 01 / 2021 X General	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any) City Council District Nine (9)	13 OFFICE SOUGHT (if known Council District 9		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
Mrs Paula C Blackmo	on		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12325.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 919.16
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4757.23
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D ORTING PERIOD	\$ 30943.96
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	\$ 0.00
18 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.	
		ELECTRONICALLY CE	ERTIFIED
		Signature of Candid	date or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, I	by the said Mrs Paula C Blackmon	, this the
		to certify which, witness my hand and seal of office.	
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mrs Paula C Blackmon	Piler ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,325.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. SCHEDULE E: LOANS	\$ 0.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	TRIBUTIONS \$ 3,838.07
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	ONTRIBUTIONS \$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUND	\$ 0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A B	SUSINESS OF C/OH \$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	TRIBUTIONS \$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION RETURNED TO FILER	\$ 0.00

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 1 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
12/12/2019	James Boling		100.00
	6 Contributor address; City; State;	Zip Code	
	9803 Coldwater Dallas, 7	ΓX 75228	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	Tricia Linderman		100.00
	Contributor address; City; State;	Zip Code	
	4409 Westside Drive Dallas, 7	ΓX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	David Cain		500.00
	Contributor address; City; State; 6307 Club Lake Court Dallas,	Zip Code ΓX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
12/12/2019	Mary Poss		250.00
	·	Zip Code ΓX 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 2 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date		(ID#:)	7 Amount of contribution (\$)
12/12/2019	Jake Smith		100.00
	6 Contributor address; City; State;	Zip Code	
	1111 Calais Southlak	ke, TX 76092	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	iona)
6 Filicipal occu	Jation / Job title (See Instructions)	g Employer (See instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	Fred Welsh		100.00
12/12/2019	Contributor address; City; State;	Zip Code	100.00
	•	TX 75229	
	2010 Satsuma Danas, 1	1X 13229	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date		(ID#:)	Amount of contribution (\$)
12/12/2019	PETE SCHENKEL		500.00
	Contributor address; City; State;	Zip Code	
	614 N BISHOP Suite 3 Dallas, T	TX 75208	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	Jospeh Ruzicka	,10#	100.00
12/12/2019	_		100.00
	Contributor address; City; State; 6703 Southridge Dr. Dallas, T	Zip Code TX 75214	
	0703 Southinge Dr. Danas, 1	1X 73214	
Principal occur	pation / Job title (See Instructions)	Employer (See Instructi	ions)
i illopai oooap	dion / cos dio (cos monoscono)	Employer (ede menden	iono,

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 3 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	ekmon		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
12/12/2019	Barbara Pittman		100.00
	6 Contributor address; City; State;		
	6232 Highgate Lane Dallas,	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
12/12/2019	Gregory Kilhoffer		500.00
12/12/2019	Contributor address; City; State;	; Zip Code	300.00
	1209 Urban Lofts Dr. Dallas,	TX 75215	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
12/12/2019	Susan Falvo		100.00
	Contributor address; City; State; 2507 Auburn Ave Dallas,	Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
12/12/2019	Ryan Garcia		50.00
	Contributor address; City; State; 3901 Travis St Suite 102 Dallas,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 4 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date	5 Full name of contributor ut-of-state PAC ((ID#:)	7 Amount of contribution (\$)
12/12/2019 Metrotex Association of Realtors		2500.00	
	6 Contributor address; City; State;	Zip Code	
	8201 N. Stemmons Dallas, 7	TX 75247	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	Craig Hall		1000.00
12/12/2017	Contributor address; City; State;		1000.00
	6801 Gaylord Prkwy Suite 100 Dallas, 7	TX 75034	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
12/12/2019	William Vandiver		250.00
	Contributor address; City; State;	Zip Code	
	6705 Bob O'Link Dr Dallas, 7	TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/12/2019	Joe Alcantar	,	250.00
	Contributor address; City; State;		
		TX 75226	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 5 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
12/12/2019 John Scovell		1000.00	
	6 Contributor address; City; State;	Zip Code	
	6322 Deloache Dallas, T	X 75225	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
12/12/2019	Byron Campbell		250.00
	Contributor address; City; State;	Zip Code	
	6508 Kenwood Dr Dallas, T	X 75214	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
12/12/2019	Kenneth Benson		250.00
12/12/2019	Openition to a defend of the control	7:- 0-1-	230.00
	Contributor address; City; State; 1527 Waterside Dr Dallas, T		
	2 1027 77 110210100 21	11,6216	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
12/12/2019	Linda Ortman		200.00
	Contributor address; City; State;		
	8106 San Leandro Dallas, T	X 75218	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruction	ons)
	,		,

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SCHEDULE A1

The	Instruction Guide explains how to complete	1 Total pages Schedule A1: 6 of 10	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	ekmon		
4 Date	5 Full name of contributor out-of-state	PAC (ID#:)	7 Amount of contribution (\$)
12/12/2019 Michael Jung			100.00
	6 Contributor address; City; S	State; Zip Code	
	7143 Fisher Rd Da	llas, TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	itions)
Date	Full name of contributor ut-of-state	PAC (ID#:)	Amount of contribution (\$)
12/12/2019	Donna Swanson		100.00
12,12,2019		State; Zip Code	100.00
		llas, TX 75218	
	21/2 24114	140, 111, 6210	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor ut-of-state	PAC (ID#:)	Amount of contribution (\$)
12/12/2019	Jan Worrall		100.00
12/12/2019	Contributor address; City; S	State; Zip Code	100.00
		llas, TX 75214	
	over veiasee	111 / 521 /	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	etions)
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$)
12/03/2019	Jill Magnuson		150.00
		State; Zip Code	
	4318 Beechwood Lane Da	llas, TX 75220	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	etions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 7 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
12/03/2019	Wick Allison		1000.00
12,03,2019	6 Contributor address; City; State;	Zip Code	1000.00
	2885 Woodside Suite 208 Dallas, 7	ΓX 75204	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ione\
6 Fincipal occu	Saudi / 300 title (See Instructions)	, Employer (See instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/04/2019	Jan Hart Black		250.00
	Contributor address; City; State;	Zip Code	
	6463 Isabella Lane Dallas, 7	ΓX 75229	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
	, ,		,
Date		(ID#:)	Amount of contribution (\$)
12/04/2019	Gloria Tarpley		100.00
	Contributor address; City; State;	Zip Code	
	8378 Forest Hills Blvd. Dallas, 7	ΓX 75218	
Principal occur	ation / Job title (See Instructions)	Employer (See Instructi	ions)
· ····o.pa. oodap	and the control of th	p.oye. (eeee.aee.	0.0)
_			
Date	Full name of contributor out-of-state PAC (Ronald McCray		Amount of contribution (\$)
12/05/2019	Konaid Meeray		500.00
	Contributor address; City; State;	Zip Code	
	5909 Luther lane Dallas, 7	ΓX 75225	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 8 of 10	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	ekmon		
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
12/05/2019	Rita Brooks		25.00
	6 Contributor address; City; State;	Zip Code	
	7106 Lakewood Blvd Dallas, 7	TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
12/06/2019	Veletta Forsythe Lill		150.00
	Contributor address; City; State;	Zip Code	
	622 Blair Blvd. Dallas, 7	TX 75223	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
12/09/2019	Terry Conner		500.00
12/03/2017	Contributor address; City; State; 7110 Lakewood Blvd Dallas, 7	Zip Code TX 75214	300.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#·)	Amount of contribution (\$)
12/09/2019	Melissa Tinning	, (.2,,	250.00
		Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 9 of 10
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mrs Paula C Blac	kmon		
4 Date	5 Full name of contributor ut-of-state PAC (ID#:)	7 Amount of contribution (\$)
12/10/2019	Jason Simon		100.00
12/10/2019	6 Contributor address; City; State;	Zip Code	100.00
	1917 Valley Oaks Irving, T	TX 75061	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
• Timespar occu	sation, dos the (occ mandellons)	, Employer (Gee manuell	013)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
12/10/2010	Fran Eichorst		
12/10/2019	Contributor address; City; State;	Zip Code	100.00
		ΓX 75214	
	,		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
12/10/2019	Lawrence Lee Lane		100.00
	Contributor address; City; State;	Zip Code	
	4101 Commerce St. Suite 1 Dallas, 7	ΓX 75226	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
12/10/2019	Steve Davis		250.00
	Contributor address; City; State;	Zip Code	
	8322 Ridgelea Street Dallas, 7	ΓX 75209	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 10 of 10	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Mrs Paula C Blac	ekmon		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
12/10/2019	Dupree Scovell		250.00
12/10/2019	6 Contributor address; City; State		250.00
		TX 75214	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/11/2019	Carl Raines		100.00
	Contributor address; City; State		
	1445 Waterside Dallas,	TX 75218	
5			
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City; State		
Principal occur	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Fillicipal occup	valion / 300 title (See Instituctions)	Employer (See mstruc	lions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address; City; State		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	EEDED

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

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)

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 1 of 3	2 FILER NAME Mrs Paula C Blackmon	3 Filer ID (Ethics Commission File	ers)	
4 Date 12/31/2019	5 Payee name Karen W Hardtner	·		
6 Amount (\$) 205.00	7 Payee address; City; State; Zip Code 415 Janie Shreveport, LA 71106			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting software reimbursement		
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date 12/11/2019	Payee name Lakewood Growler			
Amount (\$) 386.09	Payee address; City; State; Zip Code 6448 East Mockingbird Dallas, TX 75214			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Fundraiser		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
Date 10/27/2019	Payee name Susie Cakes			
Amount (\$) 124.00	Payee address; City; State; Zip Code 6100 Luther Lane Dallas, TX 75225			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meetings		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS	S 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

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)

Credit Card Payment	credit Card Payment The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1: 2 of 3	·		3 Filer ID (Ethics Commission Filers)		
4 Date 09/13/2019	5 Payee name Lakewood Country Club				
6 Amount (\$) 140.00	7 Payee address; City; State; Zip Code 6403 Gaston Ave Dallas, TX 75214				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 10/25/2019	Payee name Armstrong for Texas				
Amount (\$) 800.00	Payee address; City; State; Zip Code 1839 Leach Dallas, TX 75212				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to campaign			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date 09/19/2019	Payee name Karen Hardtner				
Amount (\$) 2000.00	Payee address; City; State; Zip Code 415 Janie Shreveport, LA 71106				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		tside of Texas. Complete Schedule T. , 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 NEE	EDED		

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

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)

(Credit Card Payment	The Instruction Guide explains how to	complete this form.	, , ,
1	Total pages Schedule F1: 3 of 3	2 FILER NAME Mrs Paula C Blackmon		3 Filer ID (Ethics Commission Filers)
4	Date 12/12/2019	5 Payee name Jimmys		
6	Amount (\$) 182.98	7 Payee address; City; State; Zip Code 4901 Bryan Pkwy Dallas, TX 75206		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OF	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF	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)		utside of Texas. Complete Schedule T. a, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
		ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED