City Secretary's Office

Supplement Officeholder	al Report		FOR Cover She	MSR	
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST MI Adam	Total Pages Filed:     16		
	NICKNAME	LAST SUFFIX  Bazaldua	3. Office Held  District 7		
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day before election c Runoff	c 15th day after camp treasurer appointmer (officeholder only)		
	🗙 July 15	c 8th day before election c Exceeded \$500 limit	c Final Report		
5. PERIOD / COVERED	4/28/2023 THROUGH 6/30/2023				
6. ELECTION	Month Day Year				
		c Primary c Runoff $X$	General c Spe	cial c N/A	
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00			
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LO	DANS)	\$0.00	
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR L	ESS, UNLESS ITEMIZED	\$0.00	
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00	
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00			
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF L	OANS)	â 10,550.00	
	EXPENDITURE	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		₃ 3,480.00	
	TOTALS	8. TOTAL POLITICAL EXPENDITURES		\$ 22825.00	
9. OFFICEHOLDER FUN FOR CAMPAIGN PURF		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRI CAMPAIGN EXPEND TURES DURING THE REPORTING PE		\$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.					
	***ELECTRONICALLY CERTIFIED***				
AFFIX NOTARY STAN	IP / SEAL ABOVE	Signature of Candidate or	Officeholder		
Sworn to and subscribed before me, by the said Mr Adam Bazaldua , this the day			day		
of July , 20	23 , to certify which,	witness my hand and seal of office.			
Signature of officer add	ministering oath	Printed name of officer administering oath	Title of officer adr	ninistering oath	

#### 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 4
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Adam Bazal	lua			
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/28/2023	TREC PAC			2500.00
Campaign Contribution	6 Contributor address; 3100 McKinnon	City; Dallas,	State; Zip Code TX 75201	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/01/2023	Karen Bazaldua			50.00
Campaign Contribution	Contributor address; 1649 Plum Creek	City;	State; Zip Code nian, TX 76065	
Principal occu	Dation / Job title (See Instructions)		Employer (See Instruct	tions)
Date		out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/01/2023	Venton Jones			250.00
Campaign Contribution	Contributor address; 707 Vermont	City; Dallas,	State; Zip Code TX 75216	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 05/02/2023	Full name of contributor Maggie Parker	out-of-state PAC	(ID#:)	Amount of contribution (\$) 150.00
Campaign Contribution	Contributor address; 1954 Cedar Crest Blvd	City; Dallas,	State; Zip Code TX 75203	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### 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: 2 of 4
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Adam Bazalo	lua			
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
05/03/2023	Angela Hunt			250.00
Campaign Contribution	6 Contributor address; 8811 Antrim	City; Dallas,	State; Zip Code TX 75218	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	cions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/10/2023	Jeff Carey			1000.00
Campaign Contribution	Contributor address; 300 Round Grove	City; Lewisv	State; Zip Code ille, TX 75067	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
05/11/2023	Hasani Burton			1000.00
Campaign Contribution	Contributor address; 5334 Bexar	City; Dallas,	State; Zip Code TX 75215	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 05/15/2023	Full name of contributor [ Donica Oberhoff	out-of-state PAC	(ID#:)	Amount of contribution (\$) 400.00
Campaign Contribution	Contributor address; 1934 Cambria	City; San An	State: Zip Code tonio, TX 75258	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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### SCHEDULE A1

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

The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1: 3 of 4
2 FILER NAME Mr Adam Bazalo	lua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of contribution (\$)
05/15/2023	Stephen Coslik		250.00
Campaign Contribution	6 Contributor address; City; 3635 Potomac Fort	State; Zip Code Worth, TX 76107	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	PAC (ID#:)	Amount of contribution (\$)
05/15/2023	Grant Gary		250.00
Campaign Contribution	Contributor address; City;	State; Zip Code Worth, TX 76107	
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		tions)	
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
05/15/2023	Helen Giddings		200.00
Campaign Contribution	Contributor address; City; 400 zang Dalla	State; Zip Code as, TX 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 05/15/2023	Full name of contributor	PAC (ID#:)	Amount of contribution (\$) 50.00
Campaign Contribution	Contributor address; City; 160 Hillside Swar	State: Zip Code nnanoa, NC 28778	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)

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#### SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 4 of 4
<b>2</b> FILER NAME Mr Adam Bazald	lua			3 Filer ID (Ethics Commission Filers)
4 Date 05/15/2023 Campaign Contribution	<ul> <li>Full name of contributor</li> <li>Frank Mihalopoulos</li> <li>Contributor address;</li> <li>4645 N Central Exp</li> </ul>	City;	State; Zip Code	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)		<b>9</b> Employer (See Instruct	tions)
Date 05/15/2023 Campaign Contribution	Full name of contributor  Patricia Major  Contributor address; 5916 Jim Miller	City;	State; Zip Code	Amount of contribution (\$) 100.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 05/15/2023 Campaign Contribution	Full name of contributor  Steve Okon  Contributor address; 5844 Preston Haven	Citv:	State; Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 05/15/2023 Campaign Contribution	Full name of contributor Sole Strategies  Contributor address; 529 5th Street	out-of-state PAC	State: Zip Code or City, NV 89005	Amount of contribution (\$) 2600.00
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## 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

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

Credit Card Payment	The Instruction Guide explains how to e	complete this form.	Other (enter a category not	listed above)
<b>1</b> Total pages Schedule F1: 1 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Com	nmission Filers)
4 Date	5 Payee name		<u> </u>	
04/28/2023	Strategic Business Concepts, LLC			
6 Amount (\$) 433.00 Campaign Funds for Campaign Expenditures	7 Payee address; 2129 Great Southwest Pk Dayllas, TX 75051	City;	State; Z	ip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living exper	nse
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Offic	e held
Date	Payee name			
05/01/2023	Etoshia Williams			
Amount (\$) 604.00 Campaign Funds for Campaign Expenditures	Payee address; 3019 Bickers Dallas, TX 75212	City;	State; Z	ip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living exper	nse
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Offic	e held
Date	Payee name			
05/01/2023	Strategic Business Concepts, LLC			
Amount (\$) 433.00 Campaign Funds for Campaign Expenditures	Payee address; 2129 Great Southwest Pk Daylas, TX 75051	City;	State; Z	ip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living exper	nse
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Offic	ce held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

### 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 2 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/01/2023	Sharmaine Harper		
6 Amount (\$) 113.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3027 Easter Dallas, TX 75216	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	in, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/01/2023	Shenita Clevland		
Amount (\$) 100.00 Campaign Funds for	Payee address; 2641 Burger Dallas, TX 75215	City;	State; Zip Code
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	in, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/02/2023	Reginald Clayton		
Amount (\$) 180.00 Campaign Funds for Campaign Expenditures	Payee address; 3011 Park Row Suite 283Dallas, TX 75215	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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 NEE	EDED

## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
<b>1</b> Total pages Schedule F1: 3 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/03/2023	Charlotte Prear		
6 Amount (\$) 400.00  Campaign Funds for Campaign Expenditures	7 Payee address; 5812 Logancraft Dallas, TX 75227	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/04/2023	ActBlue		
Amount (\$) 112.00 Campaign Funds for	Payee address; P.O. Box 441146 Somerville, MA 02144	City;	State; Zip Code
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fees	Fees	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/04/2023	Extra Space		
Amount (\$) 118.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	5710 Military Pkwy Dallas, TX 75227		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Fees	Fees	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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

## 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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	Guier (einer a sateger	y
1 Total pages Schedule F1: 4 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
05/05/2023	Signage Systems			
6 Amount (\$) 1836.00 Campaign Funds for	<b>7</b> Payee address; 7900 Ferguson Dallas, TX 75228	City;	State;	Zip Code
Campaign Expenditures		1		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Printing Expense	Printing Expense		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(	Office held
Date	Payee name			
05/05/2023	Costco			
Amount (\$) 550.00	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	8055 Churchill Dallas, TX 75251			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Food/Beverage Exper	nse	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(	Office held
Date	Payee name			
05/05/2023	Trompo			
Amount (\$) 229.00	Payee address; 407 W 10th Street Dallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	To with street Bulks, 17175200			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Food/Beverage Exper	nse	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, 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	

### 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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	
1 Total pages Schedule F1: 5 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/08/2023	Matthew Kurzman		
6 Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures	7 Payee address; 6343 Parkdale Dallas, TX 75227	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/08/2023	Longhorn Ballroom		
Amount (\$) 667.00 Campaign Funds for	Payee address; 216 Corinth Dallas, TX 75207	City;	State; Zip Code
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fees	Fees	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/08/2023	Charlotte Prear		
Amount (\$) 200.00  Campaign Funds for Campaign Expenditures	Payee address; 5812 Logancraft Dallas, TX 75227	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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 NEE	DED

## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
<b>1</b> Total pages Schedule F1: 6 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	I	
05/08/2023	Reginald Clayton		
<b>6</b> Amount (\$) 1310.00	<b>7</b> Payee address; 3011 Park Row Suite 28 Dallas, TX 75215	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Contract Labor	Contract Labor	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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
Date	Payee name		
05/09/2023	ActBlue		
Amount (\$) 187.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 441146 Somerville, MA 02144		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Fees	Fees	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/09/2023	Ice Tastic Snowball		
Amount (\$) 600.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2818 Etta Dallas, TX 75227		
pangar Zarpentatures	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	Food/Beverage Exper	ise
OF EXPENDITURE	1 00 de Devenige Dapense	1 000 Develage Exper	
	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
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	oute. (etne. a salege.) Hethelea azoto,
<b>1</b> Total pages Schedule F1: 7 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/09/2023	Start the Party		
6 Amount (\$) 229.00 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 5730 Logancraft Dallas, TX 75227	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Food/Beverage Expe	nse
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/09/2023	Leo Hassan		
Amount (\$) 200.00 Campaign Funds for Campaign Expenditures	Payee address; 3011 Park Row Dallas, TX 75215	City;	State; Zip Code
1 0 1	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/11/2023	Shenita Clevland		
Amount (\$) 600.00	Payee address; 2641 Burger Dallas, TX 75215	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2041 Buigei Danas, 1A 73213		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
<b>1</b> Total pages Schedule F1: 8 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
05/15/2023	Carmel Carwash		
6 Amount (\$) 145.00 Campaign Funds for Campaign Expenditures	7 Payee address; 9115 Garland Dallas, TX 75218	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Fees	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/16/2023	BTG Strategies		
Amount (\$) 4000.00	Payee address; 1500 Pecos Dallas, TX 75204	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fees	Fees	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/16/2023	Nilson Henri		
Amount (\$) 500.00	Payee address; 138 N Hurst Burleson, TX 76028	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	136 N Huist Bullesoll, 1 X 70026		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, 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 NE	EDED

## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		,	
<b>1</b> Total pages Schedule F1: 9 of 11	<b>2</b> FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics	Commission Filers)	
4 Date	5 Payee name		l		
05/25/2023	Ice Tastic Snowball				
6 Amount (\$) 325.00 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 2818 Etta Dallas, TX 75227	City;	State;	Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Food/Beverage Expe	nse		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	(	Office held	
Date	Payee name				
06/02/2023	State Fair of Texas				
Amount (\$) 750.00 Campaign Funds for	Payee address; P.O. Box 150009 Dallas, TX 75315	City;	State;	Zip Code	
Campaign Expenditures		1			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Contributions/Donations Made By Candidate/Officeholder/Political Committee			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	C	Office held	
Date	Payee name				
06/05/2023	Reginald Clayton				
Amount (\$) 200.00  Campaign Funds for	Payee address; 3011 Park Row Suite 28 Dallas, TX 75215	City;	State;	Zip Code	
Campaign Expenditures					
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Contract Labor	Contract Labor			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	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					

## 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
<b>1</b> Total pages Schedule F1: 10 of 11	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/06/2023	Extra Space		
<b>6</b> Amount (\$) 118.00	<b>7</b> Payee address; 5710 Military Pkwy Dallas, TX 75227	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Fees	Fees	
EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/26/2023	Shenita Clevland		
Amount (\$) 100.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2641 Burger Dallas, TX 75215		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Contract Labor	Contract Labor	
EXPENDITURE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
06/27/2023	Chism Strategies		
Amount (\$)	Payee address;	City;	State; Zip Code
1344.00	800 Manship Jackson, MS 39202	•	·
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Fees	Fees	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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	S SCHEDULE AS NEE	EDED

### 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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Mr Adam Bazaldua		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
06/29/2023	Ferguson Road Initive			
6 Amount (\$) 562.00  Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 57041 Dallas, TX 75357	City;	State; Zip Code	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Contributions/Donations Made By Candidate/Officeholder/Political Committee		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
<b>9</b> 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	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, 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		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, 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 NEE	EDED	