

CA D D E / OFFICEHOLDER
CA G F A CE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers) 2 Total pages filed:

The C/OH Instruction Guide explains how to complete this form.

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS

FIRST

M

OFFICE USE ONLY

NICKNAME

LAST

SUFFIX

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT /

#;

CITY;

STATE;

ZIP CODE

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MRS / MR

FIRST

MI

Receipt #

Amount \$

NICKNAME

LAST

SUFFIX

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

9 REPORT TYPE

☐ 15th day ☐ naian



CA DD E/OFF CE OLDER
CA G F A CE EPO

FORM C/OH
COVER SHEET PG 2

[The following text is heavily redacted with black bars and is therefore illegible. It appears to be a series of lines or paragraphs of text.]

19 FILER

FILER ID (Ethics Commission Filer)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 520.4

SUBTOTAL
AMOUNT2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

4. SCHEDULE E: LOANS

\$

5. ☐ SCHEDULE F1: POLITICAL CONTRIBUTIONS MADE FROM POLITICAL CONTRIBUTIONS

8, 8

6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

10. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED
TO FILER

\$

Donor Last Name	Donor Address Line 1
Williams	6001 Forest Lane
Romero	PO Box 181
Caldwell	P O Box 601174
Cody	2035 Tartan Trail, Suite 320
Haley	7322 old mill run
Jackson	600 Six flags Drive, #435,
Coulberson	810 Cavalier Drive
	5023 Southpoint Dr,, 5023
Alfred	Southpoint Dr
Floyd	1925 POWDERHORN DR
Campbell	P O Box 8902
Kleinheinz	301 Commerce Street Suite 1900
Postell	2341 Blue Smoke Court N.
Flowers	6731 Trail Cliff Way
Calderon	4813 Kemble St.
Johnson	162 Afton rd

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME

Wallace Bridges

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

Shandra Colon

6 Contributor address;

City;

State; Zip Code

\$500.00

5015 Addison Circle #373 Addison, TX 75001

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

John Proctor

Contributor address;

City;

State; Zip Code

\$1,000.00

2020 101511 Dallas, Texas

Date

☐ out-of-state PAC (ID# _____)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-

Amount of contribution (\$)

Ernest

Contributor address;

City;

State; Zip Code

\$500.00

1300 L St NW Suite 200 Washington DC 20005

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Amount of contribution (\$)

\$3,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENSES
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rent/Expense	Transportation/Equipment & Related Expense
Consulting Expense	Fund/Travel/Expense	Printing Expense	Travel In District
Contributions/Donations Made By	Expense		Travel Out Of District

Credit Card Payment

The Instruction Guide explains how to complete this form.

3 Filer ID (Ethics Commission Filer)

4 Date 4-13-22 5 Payee name Font Black

6 Amount (\$) 732.00 7 Payee Font Black City Font Worth TX State TX Zip Code 75110

POLITICAL EXPENDITURES
FROM POLITICAL COMMITTEES

SCHEDULE F1

CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Made By
Candidate/Officer/holder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Legal Services
Expense

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

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

The Instruction Guide explains how to complete this form

1 Total pages: Schedule F1 2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date
4-2-22

5 name

6 Amount (\$)

7 Payee address;

State

Zip Code

687.39

1710 South Harwood

Dallas TX 75245

8
PURPOSE
OF
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

(b) Description

Door Hangers

(c) ☐ Check if travel outside of Texas. Complete Schedule 7

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officer/holder name

Office sought

Office held

Date

Payee name

4-28-22

R

BRE

Amount (\$)

address;

City:

State:

Zip Code

50.00

Ft Worth TX

9
PURPOSE
OF
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

(b) Description

Video editing

☐ Check if travel outside of Texas. Complete Schedule 7

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officer/holder name

Office sought

Office held

Date

Payee name

Amount (\$)

Payee address;

City:

Zip Code

State:

PURPOSE
OF
EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

(b) Description

Candidate / Officer/holder name

Office sought

Office held

POLITICAL PLEDGES DE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

ES FOR BOX 2(a)

Advertising Expense
Accountant's fee
Event Expense
Fees
Loan Repayment/Reimbursement
Office Expense
Polling Expense
Printing Expense
Labor
Expense
Insurance & Related Expense

The instruction Guide explains how to complete this form.

1. Total pages: 1
NAME

4. Date: 5

21-1-22

7. Office address:

Zip Code

6.33
Credit Card Payment

8

(b) Description
Copies
Filer ID (Ethics Commission filers)

PURPOSE
OF
EXPENDITURE

City:

State:

(c)

9. Candidate / Officeholder name: Office sought: Office held:

(a) Category (Use Categories listed at the top of schedule)

20.62
Expenditure to benefit CIOH

3051 Airport Rd

Fort Worth TX

PURPOSE
OF

name:

Copies

Payee address:

City:

State:

Zip Code

Description

PURPOSE
OF
EXPENDITURE

Date: (See Categories listed at the top of this

4-11-22

USPS

20.30

251 W LANCASTER AVE

Office sought: Fort Worth, TX, officeholder living expense

Office held

Complete ONLY if direct
expenditure to CIOH

Date:

PURPOSE

Payee name:

2

Amount (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES
FOR POLITICAL CONTRIBUTIONS

SCHEDULE F1

CATEGORIES FOR BOX 2(a)

Advertising Expense
Accounting
Consulting Expense
Fundraising Expense
General Expense
Interest Expense
Legal Expense
Office Expense
Polling Expense
Postage
Salaries
Travel In District
Travel Outside District
Transportation
Telephone
Miscellaneous
Equipment & Related Expense

1. Total Schedule F1 2. Filer ID (Ethics Commission ID)

4-11-22

NON RE

Credit Card Payment

\$11.52

(Committee)

The instruction guide explains how to complete this form.

3851 Airport Hwy

FORT WORTH TX

8
4 Date

(a) Category (See Categories listed at the top of this schedule)
5 Payee name

PURPOSE
OF
EXPENDITURE

envelopes, pens

☐ Check if travel outside of Texas. Complete Schedule T

☐ Check if Austin, TX, officeholder living expense

Office sought

Office held

Payee address

4-11-22

USPS

Amount (\$)

58.00

Payee address

251 W LAKECASTLE AVE

Ft. Worth TX

76102

Category (See Categories listed at the top of this schedule)

(b) Postage

PURPOSE
OF
EXPENDITURE

☐ Check if travel outside of Texas. Complete Schedule T

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to C/OH

Office held

Candidate / Officeholder name

4-11-22

USPS

expenditure to benefit C/OH

City

Date

251 W LAKECASTLE AVE

Category (See Categories listed at the top of this schedule)

City

State

Zip Code

PURPOSE
OF
EXPENDITURE

☐ Check if travel outside of Texas. Complete Schedule T

☐ Check if Austin, TX, officeholder living expense

POLITICAL EXPENDITURES FOR POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENSES FOR BOX 8(a)	EXPENSES FOR BOX 8(b)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Candidate's Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Legal Services
Loan Repayment/Reimbursement Office Overhead/Rental Expense Printing Expense Subsistence/Wages/Contract Labor	Solicitation Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers)

4 Date 5 Payee name 6 Amount (\$) 7 Payee address: City: State: Zip Code

8 (a) Category (See Categories listed at the top of this schedule) (b) Description
PURPOSE OF EXPENDITURE Promotion

☐ Check if used outside of Texas. Complete Schedule T ☐ Check if Austin TX officeholder. Enter expense

Expenditure to benefit C/OH

Date Payee name
4-25-22 chillis

City: State: Zip Code