

CA D DATE / OFFICE OLDER
CA G F NA CE REPORT

FORM C/OH
COVER SHEET PG 1

1 Filer ID (Ethics Commission Filers)

2 Total pages filed

11

MS / MRS / MR

FIRST

NICKNAME

LAST

SUFFIX

Date Received

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1637 S. Adams

11637 S. Adams

3 CANDIDATE /
OFFICEHOLDER
NAME

MI

OFFICE USE ONLY

10-21-2020

Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

MS / MRS / MR

FIRST

Felipe

LAST

Receipt #

Amount \$

Date Processed

Date Imaged

10-21-2020

5 CANDIDATE /
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 965-1253

STATE;

ZIP CODE

10-21-2020

6 CAMPAIGN
TREASURER
NAME

NICKNAME

Mr

MI

SUFFIX

10-21-2020

7 CAMPAIGN
TREASURER
ADDRESS

(Residence or Business)

CITY:

4929 College Ave
Fort Worth, TX 76104

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 716-7426

☐

9 REPORT TYPE

☒

January 15

☐

30th day before election

Runoff

ELECTION DATE

ELECTION TYPE

☐

Month Day Year

07 / 02 / 2019

Month Day Year

12 / 31 / 2019

15th day after campaign
treasurer appointment
(Officeholder Only)

CA D DATE / OFF CE OLDER
CAM G F NA CE REPO

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Ashley E. Par

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

535.80

500

2

Fave Daniels

Exec. Sec.

FORM C/OH
COVER SHEET PG 3

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS

SUBTOTAL

AMOUNT

115

\$ _____

4,871.93

\$ 3,500

\$

\$

10 RECEIPTS FOR PAYMENTS MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF YOUR

11 SCHEDULE F: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

⌘

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

5

2 FILER NAME

Ashley E Paz

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

Jason Brown

Lynn Norm

2112 Pembroke Dr. Fort Worth TX 76110

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

8/22/19

Contributor address;

City;

State; Zip Code

25.00

6500 Lago Vista Dr., Benbrook TX 76111

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form

1 Total pages Schedule A1

5

2 FILER NAME

Ashley E. Paz

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC

7 Amount of contribution (\$)

8/22/19

Tony Spangler

6 Contributor address;

City;

State; Zip Code

\$ 160.00

2717 Ryan Place Dr. Fort Worth TX 76110

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

\$ 50.00

Date

Full name of contributor

☐ out-of-state PAC (ID#:

) Amount of contribution (\$)

8/22/19

Marsha Franklin - Darby

Contributor address;

City;

State; Zip Code

2220 Park Place Ave Fort Worth TX

/ Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

) Amount of contribution (\$)

8/22/19

ed Terry Van Horn

Contributor address;

City;

State; Zip Code

\$ 50.00

2211 Weatherbee St. Fort Worth, TX 76110

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

5

2 FILER NAME

Ashley E. Paz

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

8/22/19

6 Contributor address;

City;

State; Zip Code

\$50.00

2851 Townsend Fort Worth TX 76110

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

8/22/19

Keith Annis

Contributor address;

City;

State; Zip Code

\$25.00

2530 Linscomb St. Fort Worth TX 7610

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

Amount of contribution (\$)

8/22/19

Richard Herring

Contributor address;

City;

State; Zip Code

\$100

☐ out-of-state PAC (ID#)

1128 Bonnie Brae, Fort Worth TX 76111

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

5

2 FILER NAME

Ashley E. Paz

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

9/19/19

Elizabeth Parmer

\$1000.00

6 Contributor address;

City;

State; Zip Code

309 W. 7th St. #900, Fort Worth, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Attor

f

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

11/11/19

Taunya Gates

\$250.00

Contributor address;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

☐ out-of-state PAC (ID#)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

2 FILER NAME

4 TOTAL OF UNITEMIZED LOANS

3 Filer ID (Ethics Commission Filers)

5 Date of loan

9

7 Name of lender

☐ out-of-state PAC

6 Is lender

Eric Paz

Scientist

State: Zip Code

POLITICAL EXPENDITURES ADE

Accounting/Banking
Consulting Expenses

Fees
Food/Beverage Expenses

Office Overhead/Rental Expense
Office Expenses

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

11/24/19 Wix.Com

6 Amount (\$) 7 Payee address; City; State; Zip Code

\$300

8 (b) Description

OF EXPENDITURE Advertising

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

11/1/19 Travis Palmer

Amount (\$) Payee address; City; State; Zip Code

4,500 3000 S. Hulen Fort Worth. TX 76109

Description

PURPOSE OF EXPENDITURE Consulting Expense Strateau Contract Payment

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

UN D CURRED OBL GAT ONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees

Loan Repayment/Reimbursement
Office/Out-of-State Expenses

Solicitation/Fundraising Expense

The Instruction Guide explains how to complete this form

1 Total pages Schedule F2: 2

3 Filer ID (Ethics Commission Filer)

4 TOTAL OF UNITEMIZED UNPAID INVOICED EXPENDITURES

5 Date

6 Payee name

7 Amount (\$)

8 Payee address:

City

State

9

\$ 3 500

5000 J.

Tx

9 TYPE OF EXPENDITURE

Political

Non-Political

10

(b) Description

PURPOSE

11 Complete ONLY if direct

Candidate / Officeholder