

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID

2 Total pages filed:

9

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Theresa

NICKNAME

LAST

SUFFIX

Daniel

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY;

ZIP CODE

2228 Springhill

Dallas, TX 75214

Change of Address

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Tre

NICKNAME

LAST

SUFFIX

Black

6 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1133 S. Madison Ave.

Dallas, Texas 75208

(Residence or Business)

7 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

8 REPORT
TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer
appointment (officeholder only)

July 15

8th day before election

Exceeded \$500 limit

Final Report (Attach C/OH-FR)

9 PERIOD
COVERED

Month Day Year

01/01/2020

THROUGH

Month Day Year

01/23/2020

10 ELECTION

ELECTION DATE

Month Day Year

03/03/2020

ELECTION TYPE

Primary

Runoff

Other

General

Special

11 OFFICE

OFFICE HELD (if any)

Dallas County Commissioner - District 1

12 OFFICE SOUGHT (if known)

Dallas County Commissioner - District 1

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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13 C / OH NAME Daniel, Theresa

14 Filer ID

15 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.

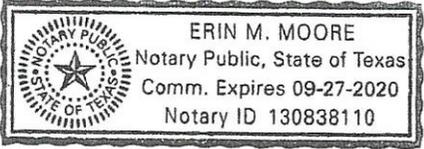
Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,975.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,995.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	43,003.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.



Theresa M. Daniel
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Theresa M. Daniel, this the 3rd day of February, 2020, to certify which, witness my hand and seal of office.

Erin M. Moore
Signature of officer administering

Erin M. Moore
Printed name of officer administering

Notary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME

Daniel, Theresa

19 Filer ID

20 SCHEDULE SUBTOTALS

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,725.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 250.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,995.87
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 1/3 Rpt: 4/9

2 FILER NAME

Daniel, Theresa

3 Filer ID

4 Date
01/14/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Ball, Jean

7 Amount of Contribution (\$) \$100.00

6 Contributor address; City; State; Zip Code
3615 Oak Creek Circle
Dallas, TX 75227

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)
Retired

Date
01/14/2020

Full name of contributor out-of-state PAC (ID#: _____)
Birdsong, James

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
7002 Fairdale Av
Dallas, TX 75227

Principal occupation / Job title (See Instructions)
None

Employer (See Instructions)
None

Date
01/14/2020

Full name of contributor out-of-state PAC (ID#: _____)
Cain, David

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
6307 Club Lake Court
Dallas, TX 75214

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self

Date
01/14/2020

Full name of contributor out-of-state PAC (ID#: _____)
Callahan, Rickey

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
8344 E RL Thornton Fwy #308
Dallas, TX 75228

Principal occupation / Job title (See Instructions)
Real Estate Broker

Employer (See Instructions)
Self

Date
01/21/2020

Full name of contributor out-of-state PAC (ID#: _____)
Cox, Rita

Amount of Contribution (\$) \$50.00

Contributor address; City; State; Zip Code
P. O. Box 595759
Dallas, TX 75359

Principal occupation / Job title (See Instructions)
Self

Employer (See Instructions)
Rita Cox & Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/3 Rpt: 5/9

2 FILER NAME

Daniel, Theresa

3 Filer ID

4 Date
01/08/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Haley, Robert

7 Amount of Contribution (\$) \$250.00

6 Contributor address; City; State; Zip Code
7144 Aberdeen Av
Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)
Professor

9 Employer (See Instructions)
UT Southwestern Medical Center

Date
01/09/2020

Full name of contributor out-of-state PAC (ID#: _____)
Kastl, Kristina

Amount of Contribution (\$) \$250.00

Contributor address; City; State; Zip Code
4144 N Central Expwy #1000
Dallas, TX 75204

Principal occupation / Job title (See Instructions)
Lawyer

Employer (See Instructions)
Kastl Law

Date
01/16/2020

Full name of contributor out-of-state PAC (ID#: _____)
McClinton Stonglin, Margo

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
2935 Mere Lane
Grand Prairie, TX 75054

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
CRM & Associates, LLC

Date
01/14/2020

Full name of contributor out-of-state PAC (ID#: _____)
Moore, Erin

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
324 Easton Rd
Dallas, TX 75218

Principal occupation / Job title (See Instructions)
Chief of Staff

Employer (See Instructions)
Dallas County

Date
01/14/2020

Full name of contributor out-of-state PAC (ID#: _____)
Rojas, Fernando & Barbara

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code
2423 Lagoon Dr
Mesquite, TX 75150

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/3 Rpt: 6/9

2 FILER NAME

Daniel, Theresa

3 Filer ID

4 Date
01/06/2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Shure, Judith

7 Amount of Contribution (\$)
\$500.00

6 Contributor address; City; State; Zip Code
4501 Pomona Rd
Dallas, TX 75209

8 Principal occupation / Job title (See Instructions)
None

9 Employer (See Instructions)
None

Date
01/15/2020

Full name of contributor out-of-state PAC (ID#: _____)
Smith, Suzanne

Amount of Contribution (\$)
\$50.00

Contributor address; City; State; Zip Code
3921 Hawthorne Av
Dallas, TX 75219

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Social Impact Architects

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/9
2 FILER NAME Daniel, Theresa		3 Filer ID
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 01/14/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raines, Carl	8 Amount of contribution (\$) 9 In-kind contribution description \$250.00 Food for event
7 Contributor address; City; State; Zip Code 1445 Waterside Dr Dallas, TX 75218		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self		11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

Check if travel outside of Texas. Complete Schedule T.

POLITICAL EXPENDITURES 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
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: Sch: 1/2 Rpt: 8/9	2 FILER NAME Daniel, Theresa	3 Filer ID
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4 Date 01/13/2020	5 Payee name Reilly Echols
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6 Amount (\$) \$862.57	7 Payee address; City; State; Zip Code 1710 S. Harwood Dallas, TX 75215
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/23/2020	Payee name Stripe
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Amount (\$) \$53.63	Payee address; City; State; Zip Code 510 Townsend Street San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/02/2020	Payee name The Order Desk
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Amount (\$) \$543.83	Payee address; City; State; Zip Code 9840 Monroe St 104 Dallas, TX 75220
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailhouse
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES 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
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: Sch: 2/2 Rpt: 9/9		2 FILER NAME Daniel, Theresa		3 Filer ID	
4 Date 01/13/2020		5 Payee name The Order Desk			
6 Amount (\$) \$535.84		7 Payee address; City; State; Zip Code 9840 Monroe St 104 Dallas, TX 75220			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailhouse	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	