

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed:  <div style="text-align: right; font-size: 1.2em;">33</div>												
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI <div style="text-align: center; font-size: 1.1em;">Theresa</div> <hr style="border-top: 1px dotted black;"/> NICKNAME                      LAST                      SUFFIX <div style="text-align: center; font-size: 1.1em;">Daniel</div>	<div style="text-align: center; font-weight: bold; font-size: 0.9em;">OFFICE USE ONLY</div> <hr/> Date Received  <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2019 JAN 15 PM 2:54</div> <hr/> Date Hand-delivered or Date Postmarked  Receipt #                      Amount \$  Date Processed  Date Imaged													
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <div style="text-align: center; font-size: 1.1em;">2228 Springhill Drive Dallas, TX 75228</div>														
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION <div style="text-align: center; font-size: 1.1em;">( 214 )                      457-4424</div>														
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI <div style="text-align: center; font-size: 1.1em;">Tre</div> <hr style="border-top: 1px dotted black;"/> NICKNAME                      LAST                      SUFFIX <div style="text-align: center; font-size: 1.1em;">Black</div>														
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <div style="text-align: center; font-size: 1.1em;">1133 S Madison Ave, Dallas, TX 75208</div>														
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION <div style="text-align: center; font-size: 1.1em;">( 214 )                      941-4885</div>														
<b>9</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)				
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)												
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)												
<b>10</b> PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month    Day    Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month    Day    Year</td> </tr> <tr> <td style="text-align: center; font-size: 1.1em;">06 / 30 / 2018</td> <td></td> <td style="text-align: center; font-size: 1.1em;">12 / 31 / 2018</td> </tr> </table>			Month    Day    Year	THROUGH	Month    Day    Year	06 / 30 / 2018		12 / 31 / 2018						
Month    Day    Year	THROUGH	Month    Day    Year													
06 / 30 / 2018		12 / 31 / 2018													
<b>11</b> ELECTION	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">ELECTION DATE</td> <td colspan="3" style="text-align: center;">ELECTION TYPE</td> </tr> <tr> <td style="text-align: center;">Month    Day    Year</td> <td><input checked="" type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center; font-size: 1.1em;">03 / 07 / 2020</td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>			ELECTION DATE	ELECTION TYPE			Month    Day    Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	03 / 07 / 2020	<input type="checkbox"/> General	<input type="checkbox"/> Special	
ELECTION DATE	ELECTION TYPE														
Month    Day    Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description												
03 / 07 / 2020	<input type="checkbox"/> General	<input type="checkbox"/> Special													
<b>12</b> OFFICE	OFFICE HELD (if any) <div style="font-size: 1.1em;">Dallas County Commissioner District 1</div>	<b>13</b> OFFICE SOUGHT (if known) <div style="font-size: 1.1em;">Dallas County Commissioner District 1</div>													

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME  
Daniel, Theresa

15 Filer ID (Ethics Commission Filers)

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

Additional Pages

17 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)	\$ 17,290.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,585.79
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 31,069.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 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 15<sup>th</sup> day of January, 20 19, to certify which, witness my hand and seal of office.

*Erin M. Moore*

\_\_\_\_\_  
Signature of officer administering oath

ERIN M. MOORE

\_\_\_\_\_  
Printed name of officer administering oath

Notary

\_\_\_\_\_  
Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

<b>19</b> FILER NAME <b>Daniel, Theresa</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 17,290.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 9,585.79
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE 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: 2 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/05/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jones, Ann

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

15.00

109 Juliette Fowler St., #A211, Dallas, TX 75214

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Gerber, Pam

Amount of contribution (\$)

Contributor address; City; State; Zip Code

100.00

4435 Holland Ave., Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
VanBuskirk, John

Amount of contribution (\$)

Contributor address; City; State; Zip Code

100.00

2450 Wildoak Dr., Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Brady, Joy

Amount of contribution (\$)

Contributor address; City; State; Zip Code

50.00

1414 Hiawatha Way, Garland, TX 75043

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 3 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/05/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Crumley, Pat

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
4726 Twinpost, Dallas, TX 75244

200.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Green, Rhonda

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
6646 E. Lovers Lane, #701, Dallas, TX 75214

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Carter, Gloria

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
1314 Guilford St., Garland, TX 75040

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jett, Craig

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
8517 San Fernando Way, Dallas, TX 75218

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4 of 24

2 FILER NAME

Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date

07/05/2018

5 Full name of contributor

White, James

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

12330 Creekspan Dr., Dallas, TX 75243

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/06/2018

Full name of contributor

Jacob, Tom & LeFave, Laurie

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6339 Kenwood Ave., Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/07/2018

Full name of contributor

Bryant, Gerald

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

8648 Cherry Hill Dr., Dallas, TX 75243

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/07/2018

Full name of contributor

Martin, Vikki

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

15.00

Contributor address; City; State; Zip Code

8230 Claremont Dr., Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 24
2 FILER NAME Daniel, Theresa		3 Filer ID (Ethics Commission Filers)
4 Date 07/07/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClurg, Laurie 6 Contributor address; City; State; Zip Code 8653 Redondo Dr., Dallas, TX 75218	7 Amount of contribution (\$)  50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats, Sam Contributor address; City; State; Zip Code 26 Ryddington Place, Dallas, TX 75230	Amount of contribution (\$)  250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tre Contributor address; City; State; Zip Code 751 Kessler Lake Dr., Dallas, TX 75208	Amount of contribution (\$)  1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauman, Bert Contributor address; City; State; Zip Code 1221 Stonewall Dr., Garland, TX 75043	Amount of contribution (\$)  200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 6 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/09/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Pomykal, Keith

7 Amount of contribution (\$)  
250.00

6 Contributor address; City; State; Zip Code  
P.O. Box 192723, Dallas, TX 75219

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/09/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Camin, Linda

Amount of contribution (\$)  
25.00

Contributor address; City; State; Zip Code  
16502 Falkirk Dr., Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/09/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Welch, Terry & Mary Claire

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
4 Ryddington Place, Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/09/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Johnson, Dr. Scherry

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
3500 Fairmount, #829, Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/09/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Palacios, Drs. Liz & Luis

7 Amount of contribution (\$)  
200.00

6 Contributor address; City; State; Zip Code  
6917 Meadowbriar Lane, Dallas, TX 75230

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/09/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Brodsky, Dr. Lotty

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
34 Masland Cr, Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/09/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Daniel, Michael

Amount of contribution (\$)  
1,000.00

Contributor address; City; State; Zip Code  
10215 Lake Gardens Dr., Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/10/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Hallmark, Terry

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
4300 MacArthur Ave., #260, Highland Park, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8 of 24

2 FILER NAME

Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date

07/10/2018

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Shamburger, Cristan

6 Contributor address;

City; State; Zip Code

3009 Washington St., Commerce, TX 75428

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/10/2018

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Gillespie, Hal

Contributor address;

City; State; Zip Code

5938 Vanderbilt Ave., Dallas, TX 75206

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/10/2018

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Lowy, Hon. Marty

Contributor address;

City; State; Zip Code

7803 Royal Lane, Dallas, TX 75230

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/10/2018

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Brooks, V.G.

Contributor address;

City; State; Zip Code

4201 Wingren, #108, Irving, TX 75062

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9 of 24
2 FILER NAME Daniel, Theresa		3 Filer ID (Ethics Commission Filers)
4 Date 07/10/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rojas, Barbara & Fernando 6 Contributor address; City; State; Zip Code 2423 Lagoon Dr., Mesquite, TX 75150	7 Amount of contribution (\$)  50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Vivienne Contributor address; City; State; Zip Code 6156 Berwyn Lane, Dallas, TX 75214	Amount of contribution (\$)  25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creuzot, Hon. John Contributor address; City; State; Zip Code 8185 San Leandro, Dallas, TX 75218	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad, Sean Contributor address; City; State; Zip Code 212 W Spring Valley Rd, Richardson, TX 75081	Amount of contribution (\$)  1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 24
2 FILER NAME Daniel, Theresa		3 Filer ID (Ethics Commission Filers)
4 Date 07/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Clifton 6 Contributor address; City; State; Zip Code 30 Meadowbrook Lane, Trophy Club, TX 75202	7 Amount of contribution (\$)  100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortez, Alfredo Contributor address; City; State; Zip Code 10621 Chesterton, Dallas, TX 75238	Amount of contribution (\$)  50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Linda Contributor address; City; State; Zip Code 5822 Clendenin Ave., Dallas, TX 75228	Amount of contribution (\$)  25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scudder, Kendall Contributor address; City; State; Zip Code 2158 Montalba Ave., Dallas, TX 75228	Amount of contribution (\$)  25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ball, Jean & Howell, Bill

7 Amount of contribution (\$)  
100.00

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

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Martinez, Margie

Amount of contribution (\$)  
25.00

Contributor address; City; State; Zip Code  
1724 N Galloway Ave., #708, Mesquite, TX 75149

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Kent, David

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
1717 Main St., #5400, Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Benson, Ken

Amount of contribution (\$)  
500.00

Contributor address; City; State; Zip Code  
1527 Waterside Ct, Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 12 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Boyle Jr., John

7 Amount of contribution (\$)  
100.00

6 Contributor address; City; State; Zip Code  
1718 Cripple Creek, Irving, TX 75061

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Boyle, John

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
1777 N. Record, #4209, Dallas, TX 75202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Brown, Diane & Jernigan, Glenn

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
403 Heard St., McKinney, TX 75069

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Payne, Lynette & Kevin

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
6106 Mimosa Lane, Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 13 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Griggs, David

7 Amount of contribution (\$)  
25.00

6 Contributor address; City; State; Zip Code  
13214 Glad Acres Dr., Farmers Branch, TX 75234

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Chase, Scott

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
1700 Pacific Ave., #3700, Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Matthews, Bill & Norma

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
1230 Abrams Rd., #172, Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Skemp, Hon. Doug & Lulu

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
511 N Akard St., #1503, Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 14 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Roberts, Karen

7 Amount of contribution (\$)  
20.00

6 Contributor address; City; State; Zip Code  
502 Cameron Ave., Dallas, TX 75223

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Hemphill, Robert

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
8350 N Central Expressway, #1111, Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Mulder, Hon. Nancy

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
6333 E Mockingbird Lane, PMB 843, Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Vaughan, Pat

Amount of contribution (\$)  
100.00

Contributor address; City; State; Zip Code  
5119 Horseshoe Trail, Dallas, TX 75209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 15 of 24

2 FILER NAME  
Daniel, Theresa 3 Filer ID (Ethics Commission Filers)

4 Date 07/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMichael, Jim	7 Amount of contribution (\$)  40.00
6 Contributor address; City; State; Zip Code 3124 Pin Oak, Farmers Branch, TX 75234		

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tafalla Jr., Jesse	Amount of contribution (\$)  25.00
Contributor address; City; State; Zip Code 4605 Ash Brook, Dallas, TX 75227		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tisdale, Linda	Amount of contribution (\$)  25.00
Contributor address; City; State; Zip Code 1532 El Campo, Dallas, TX 75218		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maggio, Marissa	Amount of contribution (\$)  25.00
Contributor address; City; State; Zip Code 4112 Whippoorwill Lane, Plano, TX 75093		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 24
2 FILER NAME Daniel, Theresa		3 Filer ID (Ethics Commission Filers)
4 Date 07/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnell, Gay	7 Amount of contribution (\$)  100.00
6 Contributor address; City; State; Zip Code 1316 Harvest Hill Rd., Dallas, TX 75244		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Erica	Amount of contribution (\$)  50.00
Contributor address; City; State; Zip Code 3328 Bellville Dr., Dallas, TX 75228		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Regina & Coggins, Paul	Amount of contribution (\$)  250.00
Contributor address; City; State; Zip Code 5230 Lobello, Dallas, TX 75229		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Linda	Amount of contribution (\$)  100.00
Contributor address; City; State; Zip Code P.O. Box 180343, Dallas, TX 75218		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 17 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Hull Thompson, Hon. Brenda

7 Amount of contribution (\$)  
100.00

6 Contributor address; City; State; Zip Code  
P.O. Box 224901, Dallas, TX 75222

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Spinola, Luis

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
4608 Windsor Ridge Dr., Irving, TX 75038

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Burns, Hon. Robert

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
1200 Main, #1013, Dallas, TX 75202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Freeman, George

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
1407 Main St., #1701, Dallas, TX 75202

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 18 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ladach, Paulette

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
3101 Long Day Dr., Austin, TX 78754

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
White, Sally

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
10251 Kilkenney, Dallas, TX 75228

40.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Farrell, Kristine

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
1030 Greenbrier Lane, Duncanville, TX 75137

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Menges Jr., Ken

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
1700 Pacific Ave., #4100, Dallas, TX 75201

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 19 of 24

2 FILER NAME

Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/11/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Sexton, Tim

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
990 Donegal Dr., Dallas, TX 75218

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Anderson, Diane

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
8627 Baumgarten Dr., Dallas, TX 75228

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jones, Stuart

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
5430 LBJ Freeway, Suite 1200, Dallas, TX 75240

100.00

Principal occupation / Job title (See Instructions)  
Finance & Investments

Employer (See Instructions)

Date  
07/11/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Rodgers, Christi

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
11024 Joaquin Dr., Dallas, TX 75228

35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 20 of 24

2 FILER NAME **Daniel, Theresa** 3 Filer ID (Ethics Commission Filers)

4 Date 07/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Weir, Dr. Dot</b>	7 Amount of contribution (\$)  50.00
	6 Contributor address; City; State; Zip Code <b>1317 Kings Hwy, Dallas, TX 75208</b>	

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

Date 07/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Maxwell, Bill &amp; Daleen</b>	Amount of contribution (\$)  50.00
	Contributor address; City; State; Zip Code <b>9942 Galway Dr., Dallas, TX 75218</b>	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 07/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Wills, Suzy &amp; Will</b>	Amount of contribution (\$)  50.00
	Contributor address; City; State; Zip Code <b>8412 Moorcroft Dr., Dallas, TX 75228</b>	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date 07/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Beshara, Mike &amp; Laura</b>	Amount of contribution (\$)  250.00
	Contributor address; City; State; Zip Code <b>3655 Ingleside Drive, Dallas, TX 75229</b>	

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1: 21 of 24

**2** FILER NAME  
Daniel, Theresa

**3** Filer ID (Ethics Commission Filers)

**4** Date  
07/16/2018

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Lai, Dr. Shil-li & Jo

**7** Amount of contribution (\$)

**6** Contributor address; City; State; Zip Code  
20129 Cassia Ct, Cerritos, CA 90703

100.00

**8** Principal occupation / Job title (See Instructions)

**9** Employer (See Instructions)

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Oldenburg, Barbara

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
4101 Whistler Dr., Plano, TX 75093

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Donovan, Carol

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
6509 Malcolm Dr., Dallas, TX 75214

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Gonzales, Gustavo

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
P.O. Box 192069, Dallas, TX 75219

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 22 of 24

2 FILER NAME

Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/16/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Helfand, March

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
7191 Kendalwood Dr., Dallas, TX 75240

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Boyle, John

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
4101 Wingren, #108, Irving, TX 75062

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Boyle & Lowry LLP

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Martinez, George

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
P.O. Box 341779, Austin, TX 78734

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/16/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Materka, Barbara

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
3621 Turtle Creek Blvd, #8K, Dallas, TX 75219

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>23 of 24</b>
2 FILER NAME <b>Daniel, Theresa</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>07/16/2018</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Thompson, Roslyn</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>1 Abbotsford Court, Dallas, TX 75225</b>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <b>07/16/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ross, Jeff</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>9840 Monroe Dr., Dallas, TX 75220</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>08/03/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Prothro, Caren</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>3929 Potomac Ave., Dallas, TX 75205</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <b>08/11/2018</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alexander, Jerry</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1201 Elm St., #2500, Dallas, TX 75270</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
07/03/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Linebarger Goggan Blair & Sampson LLP

7 Amount of contribution (\$)  
5,000.00

6 Contributor address; City; State; Zip Code  
2777 N. Stemmons Fwy, Suite 1000, Dallas, TX 75207

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Magadini, Patricia

Amount of contribution (\$)  
250.00

Contributor address; City; State; Zip Code  
4645 N. Central Expressway, #220, Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)  
Bernbaum Magadini Architects

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Guynes, Adrienne

Amount of contribution (\$)  
25.00

Contributor address; City; State; Zip Code  
6646 E Lovers Lane, #1004, Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/05/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Cooper, Robert & Shirley

Amount of contribution (\$)  
50.00

Contributor address; City; State; Zip Code  
4831 W. Lawther Dr., Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 24 of 24

2 FILER NAME  
Daniel, Theresa

3 Filer ID (Ethics Commission Filers)

4 Date  
08/29/2018

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Pappas, Mike

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
2323 Victory Ave., Dallas, TX 75219

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
09/01/2018

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Alfaro, Felicitas

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
8611 Forest Hills Blvd., Dallas, TX 75218

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; 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 (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# 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  
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: <b>1 of 6</b>	2 FILER NAME <b>Daniel, Theresa</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>07/05/2018</b>	5 Payee name <b>The Order Desk</b>
-----------------------------	---------------------------------------

6 Amount (\$) <b>720.16</b>	7 Payee address; City; State; Zip Code <b>2910 Canton St., Dallas, TX 75226</b>
--------------------------------	--

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Mail Preparation</b>
------------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>07/15/2018</b>	Payee name <b>Patti Fink</b>
---------------------------	---------------------------------

Amount (\$) <b>150.00</b>	Payee address; City; State; Zip Code <b>324 Easton Rd., Dallas, TX 75218</b>
------------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting 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 <b>Fee</b>
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>07/11/2018</b>	Payee name <b>Reilly Echols Printing Inc</b>
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Amount (\$) <b>1,182.09</b>	Payee address; City; State; Zip Code <b>P.O. Box 152358, Dallas, TX 75315</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising 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 <b>Printing</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS 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  
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: <b>2 of 6</b>	2 FILER NAME <b>Daniel, Theresa</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>08/04/2018</b>	5 Payee name <b>Michaels Store</b>	
6 Amount (\$) <b>300.00</b>	7 Payee address; City; State; Zip Code <b>5500 Greenville Ave., Suite 700, Dallas, TX 75206</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Reception Expense</b>

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/07/2018</b>	Payee name <b>Democracy Toolbox</b>		
Amount (\$) <b>1,000.00</b>	Payee address; City; State; Zip Code <b>405 Rice St., McKinney, TX 75069</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Campaign 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 <b>Fee</b>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/08/2018</b>	Payee name <b>Dallas County Democratic Party</b>		
Amount (\$) <b>200.00</b>	Payee address; City; State; Zip Code <b>4209 Parry Ave., Dallas, TX 75223</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/ Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE 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/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>3 of 6</b>	<b>2</b> FILER NAME <b>Daniel, Theresa</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>08/11/2018</b>	<b>5</b> Payee name <b>Michaels Store</b>
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<b>6</b> Amount (\$) <b>257.69</b>	<b>7</b> Payee address; City; State; Zip Code <b>5500 Greenville Ave., Suite 700, Dallas, TX 75206</b>
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		<b>Reception Expense</b>

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/12/2018</b>	Payee name <b>Dallas County Democratic Party</b>
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Amount (\$) <b>1,500.00</b>	Payee address; City; State; Zip Code <b>4209 Parry Ave., Dallas, TX 75223</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/ Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
		<b>Sponsorship</b>

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/14/2018</b>	Payee name <b>Cafe Momentum</b>
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Amount (\$) <b>2,500.00</b>	Payee address; City; State; Zip Code <b>1510 Pacific St., Dallas, TX 75201</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event 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
		<b>Reception Expense</b>

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE 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/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>4 of 6</b>	<b>2</b> FILER NAME <b>Daniel, Theresa</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>08/14/2018</b>	<b>5</b> Payee name <b>Dallas AFL-CIO</b>
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<b>6</b> Amount (\$) <b>210.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1408 N Washington, Dallas, TX 75204</b>
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>08/28/2018</b>	Payee name <b>Albertsons Grocery</b>
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Amount (\$) <b>140.85</b>	Payee address; City; State; Zip Code <b>320 Casa Linda Plaza, Dallas, TX 75218</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event 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 <b>Reception Expense</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/05/2018</b>	Payee name <b>Dallas Hispanic Bar Association</b>
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Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>2101 Ross Ave., Dallas, TX 75204</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE 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/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>5 of 6</b>	<b>2</b> FILER NAME <b>Daniel, Theresa</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>09/06/2018</b>	<b>5</b> Payee name <b>Bishop Dunne High School - 100 Dinner</b>
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<b>6</b> Amount (\$) <b>375.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>3900 Rugged Dr., Dallas, TX 75224</b>
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  <b>Sponsorship</b>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/06/2018</b>	Payee name <b>Reconciliation Outreach - Legacy of Hope</b>
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Amount (\$) <b>150.00</b>	Payee address; City; State; Zip Code <b>1421 N. Peak St., Dallas, TX 75204</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  <b>Sponsorship</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>09/06/2018</b>	Payee name <b>North Texas Crime Commission</b>
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Amount (\$) <b>150.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 601723, Dallas, TX 75360-1723</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  <b>Sponsorship</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE 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/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>6 of 6</b>	<b>2</b> FILER NAME <b>Daniel, Theresa</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>09/06/2018</b>	<b>5</b> Payee name <b>Lake Highlands/White Rock Democrats</b>
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<b>6</b> Amount (\$) <b>150.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>P.O. Box 180598 , Dallas, TX 75218-0598</b>
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/02/2018</b>	Payee name <b>Methodist Health System Foundation - Robert Fulsom Leadership Award</b>
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Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>1441 N. Beckley Ave., Dallas, TX 75203</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>10/02/2018</b>	Payee name <b>SE Dallas Chamber of Commerce</b>
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Amount (\$) <b>100.00</b>	Payee address; City; State; Zip Code <b>802 S. Buckner Blvd, Dallas, TX 75217</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Contributions/Donations Made By Candidate/Officeholder/Political Committee</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <b>Sponsorship</b>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**Miranda Maldonado**

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**From:** Venus Millican  
**Sent:** Tuesday, January 15, 2019 2:42 PM  
**To:** Miranda Maldonado  
**Subject:** FW: Confirmation

**From:** do-not-reply@county.org <do-not-reply@county.org>  
**Sent:** Tuesday, January 15, 2019 2:34 PM  
**To:** Venus Millican <Venus.Millican@dallascounty.org>  
**Subject:** Confirmation

Dear Ms. Venus Millican,

Thank you for your recent online submission. Here are confirmation details for your records.

**Order Number:** 192224  
**Order Date:** Jan 15, 2019 2:31 PM  
**Bill To:** Ms. Venus Millican  
**Order Total:** 0.00

Item	Price	Qty	Total
2019 Counties at the Capitol Legislative Day - Hon. John Warren <i>When:</i> Feb 5, 2019 - Feb 5, 2019 <i>Where:</i> Texas Association of Counties 1210 San Antonio Austin, TX 78701 United States  <i>Registration option:</i> Feb 5, 2019 - Register for Event	0.00	1	0.00
2019 Counties at the Capitol Legislative Day - Ms. Rhonda Pennington-Lamb <i>When:</i> Feb 5, 2019 - Feb 5, 2019 <i>Where:</i> Texas Association of Counties 1210 San Antonio Austin, TX 78701 United States  <i>Registration option:</i> Feb 5, 2019 - Register for Event	0.00	1	0.00
2019 Counties at the Capitol Legislative Day - Ms. Chanel Williams <i>When:</i> Feb 5, 2019 - Feb 5, 2019 <i>Where:</i> Texas Association of Counties 1210 San Antonio Austin, TX 78701 United States  <i>Registration option:</i> Feb 5, 2019 - Register for Event	0.00	1	0.00
	<b>Item Total</b>		<b>0.00</b>

<b>Item Grand Total</b>	0.00
<b>Transaction Grand Total</b>	0.00

You may review your registration and event information at any time on our website by logging into your [Member Portal](#).

Additional information will be emailed to you soon. If you have any questions, please contact Education Services at (800) 456-5974.

Texas Association of Counties

This email was sent to [venus.millican@dallascounty.org](mailto:venus.millican@dallascounty.org).