

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 24

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS. PAULA M.  
NICKNAME LAST SUFFIX  
ROSALES

OFFICE USE ONLY

Date Received

FILED  
2020 FEB 14 PM 2:19  
JOHN F. WARE  
COUNTY CLERK  
DALLAS COUNTY  
TEXAS

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
600 Commerce St.  
5th Floor  
Dallas, TX 75202

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 214 ) 653-7280

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Dr. Michael W. Waters  
NICKNAME LAST SUFFIX

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
2303 Holmes St., Dallas TX 75215

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 972 ) 754-7275

9 REPORT TYPE

Amended  
 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)

10 PERIOD  
COVERED

Month Day Year THROUGH Month Day Year  
07 / 01 / 2019 THROUGH 12 / 31 / 2019

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other Description  
11 / 06 / 2018  General  Special

12 OFFICE

OFFICE HELD (if any)  
Presiding Judge  
Dallas County Court at Law No. 4

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

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OFFICEHOLDER  
NAME

MS. PAULA M.  
NICKNAME LAST SUFFIX  
**ROSALES**

**OFFICE USE ONLY**

Date Received

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OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
**600 Commerce St.  
5th Floor  
Dallas, TX 75202**

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 214 ) 653-7280**

Date Hand-delivered or Date Postmarked

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
**Dr. Michael W. Waters**  
NICKNAME LAST SUFFIX

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
**2303 Holmes St., Dallas TX 75215**

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
**( 972 ) 754-7275**

9 REPORT TYPE

**Amended**  
 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)

10 PERIOD  
COVERED

Month Day Year Month Day Year  
**07 / 01 / 2019 THROUGH 12 / 31 / 2019**

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other  
**11 / 06 / 2018**  General  Special  
Description

12 OFFICE

OFFICE HELD (if any)  
**Presiding Judge  
Dallas County Court at Law No. 4**

13 OFFICE SOUGHT (if known)

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

14 JC/OH NAME

ROSALES, PAULA

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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

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, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 7,607.93

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

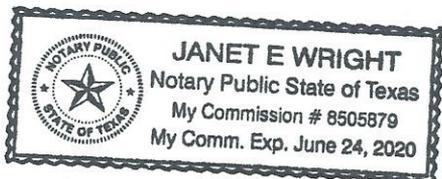
\$ 61,565.17

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

*Paula Rosales*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the 14<sup>th</sup> day of February 2020, to certify which, witness my hand and seal of office.

*Janet E Wright*      Janet E Wright      Notary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

19 FILER NAME <b>ROSALES, PAULA</b>	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 0
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ 0
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 0
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,607.93
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 20,000.00
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 2,014.08

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: **1**

2 FILER NAME

**ROSALES, PAULA**

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

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

7 Amount of contribution (\$) **0**

6 Contributor address; City; State; Zip Code

8 Contributor's principal occupation

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

Full name of contributor

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **1**

2 FILER NAME **ROSALES, PAULA**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ **0**

5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)      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)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)      Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)      Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)      Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

# PLEGGED CONTRIBUTIONS (JUDICIAL)

## SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J): **1**

2 FILER NAME  
**ROSALES, PAULA**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$ **0**

5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of Pledge \$	9 In-kind contribution description
7 Pledgor address; City; State; Zip Code			
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

10 Pledgor's principal occupation	11 Pledgor's job title
12 Pledgor's employer/law firm	13 Law firm of pledgor's spouse (if any)
14 If pledgor is a child, law firm of parent(s) (if any)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
Pledgor address; City; State; Zip Code			
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

Pledgor's principal occupation	Pledgor's job title
Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
If pledgor is a child, law firm of parent(s) (if any)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Pledge \$	In-kind contribution description
Pledgor address; City; State; Zip Code			
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

Pledgor's principal occupation	Pledgor's job title
Pledgor's employer/law firm	Law firm of pledgor's spouse (if any)
If pledgor is a child, law firm of parent(s) (if any)	

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

# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):  
1

2 FILER NAME  
ROSALES, PAULA

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan      7 Name of lender       out-of-state PAC (ID#: \_\_\_\_\_)

9 Loan Amount (\$)

6 Is lender a financial Institution?  
Y    N

8 Lender address;      City;      State;      Zip Code

10 Interest rate

11 Maturity date

12 Lender's Principal Occupation      13 Lender's Job Title

14 Lender's Employer/Law Firm      15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral  
 none

18  Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION      20 Name of guarantor      22 Amount Guaranteed (\$)

21 Guarantor address;      City;      State;      Zip Code

not applicable

23 Guarantor's Principal Occupation      24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm      26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If lender 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  | 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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>5</b>		2 FILER NAME <b>ROSALES, PAULA</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>07/01/19</b>		5 Payee name <b>Courtney Arnick</b>			
6 Amount (\$) <b>350.00</b>		7 Payee address; <b>Carnick28@gmail.com</b>			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Consulting Expense/Contract Labor</b>		(b) Description <b>Q&amp;A Summer Law Interns Videos, filming editing, and production for Court website</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>07/03/19</b>		Payee name <b>Tina Sohne</b>			
Amount (\$)		Payee address; <b>3671 Crowberry Way</b>			
		City; <b>Euleuss</b>		State; Zip Code <b>TX 76040</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>		Description <b>Q&amp;A Summer Law Interns videos coaching</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <b>07/12/19</b>		Payee name <b>Target</b>			
Amount (\$) <b>50.00</b>		Payee address; <b>6464 E Northwest Highway #212, Dallas, TX 74214</b>			
		City; <b>Dallas, TX</b>		State; Zip Code <b>74214</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Gift/Awards Expense</b>		Description <b>Gift card donation for George Allen Clerk/ Coordinator seminar</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED \*See attached spreadsheets\*\*

# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(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)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: <b>1</b>	<b>2</b> FILER NAME <b>ROSALES, PAULA</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ <b>0</b>
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<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address;	City;	State;	Zip Code
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

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

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

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

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**

# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F3: **1**

**2** FILER NAME

ROSALES, PAULA

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

**4** Date

07/01/19

**5** Name of person from whom investment is purchased

BBVA USA

**6** Address of person from whom investment is purchased; City; State; Zip Code

701 South 32nd Street, Birmingham AL 35233-3515

**7** Description of investment

CD - 13 MO FIXED TD

**8** Amount of investment (\$)

20,000

Date

Name of person from whom investment is purchased

Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

### EXPENDITURE CATEGORIES FOR BOX 10(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)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: <b>1</b>	<b>2</b> FILER NAME <b>ROSALES, PAULA</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ <b>0</b>
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<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address;	City;	State;	Zip Code
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
------------------------------	------------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

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

TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
---------------------	------------------------------------	--

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

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 PERSONAL FUNDS

# SCHEDULE G

## 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.

<b>1</b> Total pages Schedule G: <b>1</b>	<b>2</b> FILER NAME <b>ROSALES, PAULA</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$) <b>0</b>  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code
---	---

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

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

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

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

Date	Payee name
------	------------

Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
---	--------------------------------------

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

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**

# PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

# SCHEDULE H

## 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.

<b>1</b> Total pages Schedule H: <b>1</b>	<b>2</b> FILER NAME <b>ROSALES, PAULA</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date	<b>5</b> Business name
---------------	------------------------

<b>6</b> Amount (\$) <b>0</b>	<b>7</b> Business address; City; State; Zip Code
----------------------------------	--

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

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

Date	Business name
------	---------------

Amount (\$)	Business address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: <b>1</b>	<b>2</b> FILER NAME <b>ROSALES, PAULA</b>	<b>3</b> Filer ID (Ethics Commission Filers)
--	--	--

<b>4</b> Date	<b>5</b> Payee name
---------------	---------------------

<b>6</b> Amount (\$) <b>0</b>	<b>7</b> Payee address; City; State; Zip Code
----------------------------------	---

<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories.)	<b>(b)</b> Description (See instructions regarding type of information required.)

Date	Payee name
------	------------

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

<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

Date	Payee name
------	------------

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

<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

Date	Payee name
------	------------

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

<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K: **1**

2 FILER NAME **ROSALES, PAULA**

3 Filer ID (Ethics Commission Filers)

4 Date 12/19/19	5 Name of person from whom amount is received <b>DALLAS COUNTY</b> ..... 6 Address of person from whom amount is received; City; State; Zip Code <b>411 Elm St., Dallas, TX 75202</b>	8 Amount (\$) <b>270.00</b>
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>State Bar of Texas dues refund</b>		

Date 09/12/19	Name of person from whom amount is received <b>First Administrative Judicial Region of Texas</b> ..... Address of person from whom amount is received; City; State; Zip Code <b>2100 Bloomdale Rd., McKinney, TX 75071</b>	Amount (\$) <b>1,390.98</b>
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Annual Judicial Education Conference reimbursement</b>		

Date 12/31/19	Name of person from whom amount is received <b>BBVA USA</b> ..... Address of person from whom amount is received; City; State; Zip Code <b>701 South 32nd St., Birmingham AL 35233-3515</b>	Amount (\$) <b>353.10</b>
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <b>Interest on a CD</b>		

Date	Name of person from whom amount is received ..... Address of person from whom amount is received; City; State; Zip Code	Amount (\$)
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer		

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

# OUTSTANDING LOANS

# SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

1

2 FILER NAME

ROSALES, PAULA

3 Filer ID (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

N/A

5 Lender address;

City;

State;

Zip Code

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address;

City;

State;

Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City;

State;

Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City;

State;

Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City;

State;

Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City;

State;

Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City;

State;

Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City;

State;

Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# ASSETS VALUED AT \$900 OR MORE

# SCHEDULE M

The Instruction Guide explains how to complete this form.

1 Total pages Schedule M:

1

2 FILER NAME

ROSALES, PAULA

3 Filer ID (Ethics Commission Filers)

4 Description of Asset

N/A

Description of Asset

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:

1

2 FILER NAME

ROSALES, PAULA

3 Filer ID (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

- Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC     Schedule B-SS

6 Dates of travel

7 Name of person(s) traveling

N/A

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC     Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A2     Schedule B     Schedule B(J)     Schedule C2     Schedule D     Schedule F1  
 Schedule F2     Schedule F4     Schedule G     Schedule H     Schedule COH-UC     Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.  
.. Complete only if "Report Type" on page 1 is marked "Final Report" ..

1 C/OH NAME

N/A

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

.. Complete A & B below *only* if you are not an officeholder. ..

**A. CAMPAIGN FUNDS**

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

5 OFFICEHOLDER

.. Complete this section *only* if you are an officeholder ..

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS – SCHEDULE F1 (Cont.): July 1, 2019-December 31, 2019  
 FILER NAME: ROSALES, PAULA

DATE	PAYEE	PAY AMOUNT	PURPOSE OF EXPENDITURE	DESCRIPTION
07/12/19	Costco 8055 Churchill Way Dallas, TX 75251	\$11.99	Food/beverages	Jury room refreshments
07/15/19	Texas Center for the Judiciary 1210 San Antonio St. Austin, TX 78701	\$275	Registration fee	2019 Annual Judicial Education Conference
07/15/19	BBVA 1134 N. Buckner Dallas, TX 75218	\$3	Fee	Banking paper statement
07/16/19	Tom Irvin for House 104 Campaign/ActBlue.com	\$100	Contribution made by officeholder	Campaign contribution
07/16/19	AppleiTunes.com	\$8.57	Advertising	Officeholder website maintenance
07/19/19	Mudhen 900 S. Hardwood Dallas, TX 75215	\$76.03	Food/beverages	Bailiff and judicial summer intern meeting
07/22/19	Jack Boles Parking 2101 Ross Ave. Dallas, TX 7201	\$4.00	Parking Fee	Attending Pro Bono Consumer Law CLE
07/22/19	Belo Mansion Luncheon 2101 Ross Ave. Dallas, TX 7201	\$52.85	Food/beverages	CLE lunch with interns

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

07/26/19	Campisi's Restaurant 1520 Elm St, Dallas, TX 75201	\$37		Food/beverages	Lunch with staff and JP judge to discuss officeholder issues
07/28/19	Aldi 5828 Abrams Rd Dallas, TX 75214	\$25			
07/29/19	D Magazine PO Box 8548, Big Sandy, TX 75755	\$28		Office overhead	Court staff breakroom/jury room baskets, coasters
08/05/19	Central Market 5750 E Lovers Ln. Dallas, TX 75206	\$12.66		Office overhead	Jury room magazine 2 years subscription
08/07/19	Sixth Floor Museum Parking 411 Elm St Dallas, TX 75202	\$10		Food/beverages	Meeting with judicial summer intern
08/08/19	Bullion Restaurant 400 S Record St Dallas, TX 75202	\$150.64		Fee	Visit with DA Civil Division
08/15/19	BVVA 1134 N. Buckner Dallas, TX 75218	\$3		Food/beverages	Farewell lunch with Judicial Summer Interns
08/20/19	AppleiTunes.com	\$8.57		Fee	July paper statement fee
08/26/19	Amazon.com	\$8.09		Advertising	Office holder website maintenance
08/26/19	Amazon.com	\$15.16		Office Overhead	Court staff/intern breakroom cleaning supplies
08/28/19	American Bar Association 321 North Clark Street	\$35		Office Overhead	Court staff/intern breakroom cleaning supplies
				Fee	ABA Judicial Section membership

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

	Chicago, IL 60654				
08/29/19	American Bar Association 321 North Clark Street Chicago, IL 60654	\$95			
08/29/19	State Bar of Texas 1414 Colorado St. Austin, TX 78701	\$270	Fee	ABA membership	
09/03/19	Greenspot Market 702 N Buckner Blvd. Dallas, TX 75218	\$16.45	Fee	State Bar Annual Dues	
09/03/19	Enterprise-Rent-A-Car 11411 E Northwest Hwy, Ste 233 Dallas, TX 75218	\$323.71	Food/beverages	Lunch annual judicial conference traveling day	
09/03/19	Shell Oil 5607 ER L Thornton Frw, Dallas TX 75223	\$25	Transportation	2019 Annual Judicial Education Conference	
09/03/19	JW Marriott San Antonio Hill Country 23808 Resort Pkwy, San Antonio, TX 78261	\$41.14	Transportation	2019 Annual Judicial Education Conference	
09/04/19	Meadow Neighborhood Restaurant 555 West Bitters Rd San Antonio, TX 78216	\$43.33	Food/beverages	Dinner 2019 Annual Judicial Education Conference	
09/05/19	JW Marriott San Antonio Hill Country 23808 Resort Pkwy, San Antonio, TX 78261	\$47.85	Food/beverages	Dinner 2019 Annual Judicial Education Conference	

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

09/06/19	JW Marriott San Antonio Hill Country 23808 Resort Pkwy, San Antonio, TX 78261	\$25.66	Food/beverage	Lunch 2019 Annual Judicial Education Conference
09/06/19	JW Marriott San Antonio Hill Country 23808 Resort Pkwy, San Antonio, TX 78261	\$661.98		2019 Annual Judicial Education Conference
09/16/19	Hypnotic Donuts 9007 Garland Rd., Dallas TX 75218	\$22.65	Travel	Lodging
09/16/19	Murphy Robes 1000 N Market Champaign, IL 61820	\$460.98	Food/beverage	Juror donuts
09/16/19	BBVA 1134 N. Buckner Dallas, TX 75218	\$3	Office overhead	Judicial Robe purchase
09/16/19	Target 6464 E NW Hwy Dallas, TX 75214	\$54.11	Fee	August paper statement
09/17/19	AppleiTunes.com	\$8.57	Food/beverage	Jury room snacks
09/17/19	Cindi's NY Deli 306 S Houston St Dallas, TX 75202	\$23.98	Advertising	Office holder website maintenance
09/19/19	GodDaddy.com	\$202.10	Food/beverage	Meeting to discuss officeholder issues
09/23/19	Bullion Restaurant 400 S Record St	\$28.82	Advertising	County Court at Law #4 website domain name purchase
09/23/19			Food/beverage	Meeting with constituents

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

	Dallas, TX 75202				
09/23/19	WestElm.com	\$377.35			Court chambers and jury room office supplies, lamps and other furnishings
09/25/19	Courtney Arnick via Venmo	\$350	Office overhead		Final payment-Courtroom Q&A Summer Law Interns Videos editing and production
09/27/19	Etsy.com	\$395	Contract Labor		
10/07/19	Courtney Arnick	\$30	Office overhead		Office supplies, decorations, other furnishings
10/07/19	<a href="http://www.UTZMarket.com">www.UTZMarket.com</a>	\$399	Transportation/Contract Labor		Parking Reimbursement - video shoot and meetings at George Allen courthouse
10/07/19	Ellen's Restaurant 1709 N Record St Dallas, TX 75202	\$56.82	Food/Beverage		Court staff breakroom filtered water station
10/15/19	Marshall's 11255 Garland Rd Dallas, TX 75218	\$81.12	Food/beverage		Staff meeting
10/15/19	Trader Joe's 7939 Walnut Hill Dallas, TX 75230	\$28.06	Office Overhead		Holiday decorations
10/15/19	BBVA 1134 N. Buckner Dallas, TX 75218	\$3	Office Overhead		Holiday decorations
10/16/19	AppleiTunes.com	\$8.57	Fee		September paper statement
10/17/19	Trader Joe's 7939 Walnut Hill	\$14.43	Advertising		Officeholder website maintenance
			Office Overhead		Holiday decorations

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

	Dallas, TX 75230				
10/24/19	Office Depot 5111 Greenville Ave Dallas, TX 75206	\$55	Advertising		
11/04/19	GrooveCreative 17230 Marianne Cir Dallas, TX 75252	\$950		Letter to constituents	
11/05/19	WestElm.com	\$250.06	Consulting/Contract Labor	County Court at Law 4 Website development – 50% down fee	
11/12/19	Tony Grimes Photography PO Box 166176 Irving, TX 75016	\$250	Office Overhead	Tree and plant pots	
11/12/19	SamsClub 12000 McCree Rd Dallas, TX 75238	\$30.98	Contract Labor	Judicial Portrait sitting fee	
11/15/19	BBVA 1134 N. Buckner Dallas, TX 75218	\$3	Food/beverage	Jury Room Coffee and fixings	
11/20/19	AppleiTunes.com	\$8.57	Fee	October paper statement	
11/18/19	BBVA ATM 1134 N. Buckner Dallas, TX 75218	\$100	Advertising	Office holder website maintenance	
12/09/19	Central Market	\$56.93	Office overhead	Fresh holiday trees/decorations	
12/09/19	Wal-Mart	\$125.14	Office Overhead	Holiday decorations	
12/10/19	Marshall's 11255 Garland Rd. #500 Dallas, TX 75218	\$65.96	Office Overhead/Gifts	Holiday decorations and court staff gifts	
			Office Overhead/Gifts	Holiday decorations and court staff gifts	

MONETARY POLITICAL CONTRIBUTIONS-SCHEDULE A(J) 1 (CONT.)  
 FILER NAME: ROSALES, PAULA

12/13/19	Hypnotic Donuts 9007 Garland Rd., Dallas TX 75218	\$15.16	Food/beverage	Jury donuts
12/13/19	Sam's Club 12000 McCree Rd Dallas, TX 75238	\$14.58	Food/beverage	Jury room snacks
12/16/19	BBVA 1134 N. Buckner Dallas, TX 75218	\$3	Food/beverage	Jury room snacks
12/16/19	AppleiTunes.com	\$8.57	Fee	November Paper statement
12/18/19	WilliamSonoma.com	\$129.85	Advertising	Officeholder website maintenance
12/19/20	Garden Café 5310 Junius St Dallas, TX 75214	\$72.12	Office Overhead	Breakroom electric kettle
12/27/19	Costco 8055 Churchill Way Dallas, TX 75251	\$28.77	Food/beverage	Court Staff Holiday Luncheon
12/27/19	Costco 8055 Churchill Way Dallas, TX 75251	\$38	Food/beverage	Jury room snacks
12/27/19	Costco 8055 Churchill Way Dallas, TX 75251	\$38	Gift	DISD judicial intern gift