#### FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 14 00017073 POLITICAL PARTY Dallas County Democratic Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 07/15/2025 X County: Dallas POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS 1414 N Washington Avenue Date Processed DALLAS, TX 75204 Date Imaged POLITICAL PARTY TITLE **FIRST NICKNAME** LAST **SUFFIX** MΙ **CHAIR** Kardal Coleman **CHAIR MAILING** ADDRESS / PO BOX; STATE: ZIP CODE APT / SUITE #; CITY; **ADDRESS** TX CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **ADDRESS** 1414 N Washington Ave (Residence or Business) Dallas, TX 75204 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (214) 821-8331 11 REPORT TYPE January 15 8th day before primary election 50th day before general election X July 15 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 01/01/2025 06/30/2025

## FORM PTY-CORP POLITICAL PARTY REPORT: **TOTALS AND AFFIDAVIT COVER SHEET PG 2** 14 Filer ID 13 POLITICAL PARTY NAME (Ethics Commission Filers) 00017073 Dallas County Democratic Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 12,708.68 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 51,477.15 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 25.529.85 A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions. 16 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. The Honorable Kardal Coleman Signature of Political Party Chair AFFIX NOTARY STAMP / SEAL

Signature of officer administering oath

Sworn to and subscribed before me, by the said

Printed name of officer administering oath

\_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Title of officer administering oath

#### FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 3 of 14 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Dallas County Democratic Party (P) 00017073 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR X \$ 12,708.68 **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 51,477.15 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

#### SCHEDULE C1

$\vdash$			_	
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/3 Rpt: 4/14
2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Dallas Coun	ty Democratic Party (P)		00017073
4	Date	5 Corporation / Labor Organization name	7	Amount of contribution (\$)
	03/27/2025	Babb Family Association		\$20.20
		6 Corporation / Labor Organization address; City; State; Zip Code		
		Corporation / Labor Organization address, City, State, 21p Code		
		Dallas, TX 75229		
	Date	Corporation / Labor Organization name		Amount of contribution (\$)
	04/27/2025	Babb Family Association		\$20.20
		Corporation / Labor Organization address; City; State; Zip Code		
L		Dallas, TX 75229		
Γ	Date	Corporation / Labor Organization name		Amount of contribution (\$)
	05/27/2025	Babb Family Association		\$20.20
		Corporation / Labor Organization address; City; State; Zip Code		
		Dallas, TX 75229		
L			<u> </u>	
	Date	Corporation / Labor Organization name		Amount of contribution (\$)
	06/27/2025	Babb Family Association		\$20.20
		Corporation / Labor Organization address; City; State; Zip Code		
		Dallas, TX 75229		
	Date	Corporation / Labor Organization name		Amount of contribution (\$)
	01/27/2025	Babb Family Association		\$20.20
		Corporation / Labor Organization address; City; State; Zip Code		
		Dallas, TX 75229		
F	Date	Corporation / Labor Organization name	<del></del>	Amount of contribution (\$)
	02/27/2025	Babb Family Association		\$20.20
	OLILITEOLO	-		<b>\$20.20</b>
		Corporation / Labor Organization address; City; State; Zip Code		
		Dallas, TX 75229		
$\models$	Dota		<u> </u>	Amount of contribution (ft)
1	Date	Corporation / Labor Organization name		Amount of contribution (\$)
	01/26/2025	GoldenRuleRunners.com		\$10.00
		Corporation / Labor Organization address; City; State; Zip Code		
		Dallas, TX 75228		
$\vdash$			<u> </u>	

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

## SCHEDULE C1

The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 2/3 Rpt: 5/14
FILER NAME		3 Filer ID (Ethics Commission Filers)
Dallas Cour	ty Democratic Party (P)	00017073
Date 02/26/2025	Corporation / Labor Organization name     GoldenRuleRunners.com     Corporation / Labor Organization address; City; State; Zip Code	7 Amount of contribution (\$) \$10.00
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
03/26/2025	GoldenRuleRunners.com	\$10.00
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
03/26/2025	GoldenRuleRunners.com	\$9.16
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
04/26/2025	GoldenRuleRunners.com	\$9.16
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
04/26/2025	GoldenRuleRunners.com	\$10.00
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
05/26/2025	GoldenRuleRunners.com	\$10.00
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	
Date	Corporation / Labor Organization name	Amount of contribution (\$)
05/26/2025	GoldenRuleRunners.com	\$9.16
	Corporation / Labor Organization address; City; State; Zip Code	
	Dallas, TX 75228	

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

The In	nstruction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 3/3 Rpt: 6/14
2 FILER N	NAME	3 Filer ID (Ethics Commission Filers)
Dallas	County Democratic Party (P)	00017073
<b>4</b> Date 06/26/2	5 Corporation / Labor Organization name GoldenRuleRunners.com  6 Corporation / Labor Organization address; City; State; Zip Code	7 Amount of contribution (\$) \$10.00
	Dallas, TX 75228	
Date 04/23/2	Corporation / Labor Organization name  Ted B. Lyon & Associates P.C.  Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) \$2,000.00
Doto	Mesquite, TX 75150	Amount of contribution (#)
Date 03/28/2	Corporation / Labor Organization name  Texas Majority  Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) \$5,000.00
	Houston, TX 77266	
Date 03/26/2	Corporation / Labor Organization name  Texas Majority PAC  Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) \$5,000.00
	Houston, TX 77266	
Date 06/19/2	Corporation / Labor Organization name  The Hughes Group Real Estate Services LLC  Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) \$250.00
	Desoto, TX 75115	
Date 03/17/2	Corporation / Labor Organization name United Steelworkers District 13  Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) \$250.00
	Baytown, TX 77521	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

imbursement Solicitation/Fundraising Expense
tal Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expe Legal Services	Salaries/V	Vages	/Contract Labor		OTHER (enter a	a category not listed above)	
		The Instruction Guide	explains how to co	mple	ete this form.				
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission File	rs)
Sch: 1/8 Rpt: 7/14	Dallas Cour	ty Democratic Par	ty (P)				00017073		
4 Date	5 Payee name								
03/26/2025	l	ational Bank of Te	(as						
6 Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	de					
\$15.00	2703 Oak L	awn Avenue							
X Expenditure from corporate funds	Dallas, TX 7	5219							
8 PURPOSE	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b)	Description				
OF EXPENDITURE	Fees				Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
EXI ENDITORE									
					Bank Fee				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offic	ceholder name	Office sou	ght			Office h	eld	
Date	Payee name								
03/28/2025	American N	ational Bank of Te	kas						
Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
\$15.00	1 1	awn Avenue	, ,						
Ψ10.00	2700 Oak E	awii 7 Wende							
X Expenditure from corporate funds	Dallas, TX 7	5219							
PURPOSE	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b)	Description				
OF EXPENDITURE	Fees				Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
EXI ENDITORE									
					Bank Fee				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offic H	ceholder name	Office sou	ght			Office h	eld	
Date	Payee name								
05/02/2025	Armadilla Si	rategies							
Amount (\$)	Payee addres		State; Zip Co	nde					
\$81.19	1 1	r St Apt 1317	State, Zip Ct	,,,,					
Φ01.19	ZI75 Tucke	3t Apt 1317							
X Expenditure from corporate funds	Dallas, TX 7	5214							
PURPOSE	(a) Category (Se	e Categories listed at the to	p of this schedule)	(b)	Description				
OF	I	nead/Rental Expen			Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
EXPENDITURE		·			_				
					Website Assi	sta	nce		
Complete ONLY if direct	Candidate/Offic	ceholder name	Office sou	ght			Office h	eld	
expenditure to benefit C/O	Н								

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 8/14	Dallas County Democratic Party (P) 00017073
4 Date	5 Payee name
06/10/2025	Armadilla Strategies
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$81.19	2175 Tucker St Apt 1317
X Expenditure from corporate funds	Dallas, TX 75214
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Website Assistance
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/14/2025	Canon Financial Services, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$334.63	14904 Collection Center Dr
X Expenditure from corporate funds	Chicago, IL 60693
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Copier Lease
	Sopie. 20000
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
05/08/2025	Canon Financial Services, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$213.42	14904 Collection Center Dr
,	
X Expenditure from corporate funds	Chicago, IL 60693
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Copier Lease
	Copiei Lease
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a contemporant listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/8 Rpt: 9/14	Dallas County Democratic Party (P) 00017073
4 Date	5 Payee name
06/18/2025	Canon Financial Services, Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$213.42	14904 Collection Center Dr
X Expenditure from	
— corporate failes	Chicago, IL 60693
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Copier Lease
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/08/2025	Communication Workers of America
Amount (\$)	Payee address; City; State; Zip Code
\$6,000.00	1408 N Washington Ave
X Expenditure from corporate funds	Dallas, TX 75204
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Rent
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/03/2025	Communication Workers of America
Amount (\$)	Payee address; City; State; Zip Code
\$6,000.00	1408 N Washington Ave
. ,	
X Expenditure from corporate funds	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Rent
	INGIIL
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 4/8 Rpt: 10/14	Dallas County Democratic Party (P)  00017073
4 Date	5 Payee name
03/03/2025	Communication Workers of America
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,000.00	1408 N Washington Ave
X Expenditure from corporate funds	Dallas, TX 75204
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Port
	Rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/03/2025	Communication Workers of America
Amount (\$)	Payee address; City; State; Zip Code
\$6,000.00	1408 N Washington Ave
X Expenditure from corporate funds	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
_/	Dt
	Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to beliefit 6/01	<u> </u>
Date	Payee name
05/08/2025	Communication Workers of America
Amount (\$)	Payee address; City; State; Zip Code
\$6,000.00	1408 N Washington Ave
, , , , , , , , ,	<b>3</b>
X Expenditure from corporate funds	Dallas, TX 75204
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Rent
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment						
4. Tatalarana 0.1. 1.1. Tr	· · · · · · · · · · · · · · · · · · ·					
1 Total pages Schedule F1:						
Sch: 5/8 Rpt: 11/14	Dallas County Democratic Party (P) 00017073					
4 Date	5 Payee name					
06/04/2025	Communication Workers of America					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$6,000.00	1408 N Washington Ave					
Ψ0,000.00	1400 N Washington / Ne					
X Expenditure from						
corporate funds	Dallas, TX 75204					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Office Overhead/Rental Expense					
_/	Doub.					
	Rent					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	H .					
Date	Payee name					
01/29/2025	Mueller, Pamela					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,000.00	5928 Marquita Ave					
Expenditure from						
corporate funds	Dallas, TX 75206					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE						
	Bookkeeping Fees					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	H					
Date	Payee name					
02/28/2025	Mueller, Pamela					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,000.00	5928 Marquita Ave					
Expenditure from						
X corporate funds	Dallas, TX 75206					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE						
	Bookkeeping Fees					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	Н					

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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)

Credit Card Payment	The Instruction Guide explains how to c	omple	ete this form.					
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
Sch: 6/8 Rpt: 12/14	Dallas County Democratic Party (P)		00017073					
4 Date	5 Payee name							
03/27/2025	Mueller, Pamela							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$2,000.00	5928 Marquita Ave							
X Expenditure from corporate funds	Dallas, TX 75206							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.					
			Bookkeeping Fees					
			200.m.oopg . 000					
9 Complete ONLY if direct	Candidate/Officeholder name Office so	<u>I</u> ught	Office held					
expenditure to benefit C/OI		9						
Date	Payee name							
04/30/2025	Mueller, Pamela							
Amount (\$)	Payee address; City; State; Zip C	ode						
\$2,000.00	5928 Marquita Ave	ouc						
Ψ2,000.00	3320 Wardalia / We							
X Expenditure from corporate funds	Dallas, TX 75206							
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.					
			Bookkeeping Fees					
			20005   0.00					
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office held					
expenditure to benefit C/OI	4							
Date	Payee name							
05/28/2025	Mueller, Pamela							
Amount (\$)	Payee address; City; State; Zip C	ode						
\$2,000.00	5928 Marquita Ave							
, ,								
X Expenditure from corporate funds	Dallas, TX 75206							
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
OF	Accounting/Banking	`´	Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE								
			Bookkeeping Fees					
Operation Children	Overall data (Office health are		0#:1.11					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held					

### 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)

Credit Card Layment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission	on Filers)
Sch: 7/8 Rpt: 13/14	Dallas County Democratic Party (P)		00017073	
4 Date	5 Payee name			
06/27/2025	Mueller, Pamela			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$2,000.00	5928 Marquita Ave			
- "				
X Expenditure from corporate funds	Dallas, TX 75206			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Accounting/Banking	Check if tr	avel outside of Texas. Complete Schedule T.	
		Bookkeep	oina Fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held	
expenditure to benefit C/OI		9	211120 11012	
Date	Davida marria			
05/29/2025	Payee name Ognyanov, Martin			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$1,200.00	770 Fairway Dr Apt 2628			
X Expenditure from corporate funds	Coppell, TX 75019			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	<u> </u>	
OF	Consulting Expense		ravel outside of Texas. Complete Schedule T.	
EXPENDITURE		_		
		Contract I	₋abor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held	
experientare to benefit 6/61				
Date	Payee name			
04/30/2025	Ognyanov, Martin			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$1,200.00	770 Fairway Dr Apt 2628			
X Expenditure from corporate funds	Coppell, TX 75019			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	 I	
OF	Consulting Expense		ravel outside of Texas. Complete Schedule T.	
EXPENDITURE		_		
		Contract I	_abor	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held	
experience to beliefit 6/01				

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Dallas County Democratic Party (P) 00017073	
Stewart Organization	
7 Payee address; City; State; Zip Code	
PO Box 166708	
Irving TX 75016	
1	_
· · · · · · · · · · · · · · · · · · ·	
Office Overflead/Refital Expense	
Copier Maintenance	
Candidate/Officeholder name Office sought Office held	
	Dallas County Democratic Party (P)  5 Payee name Stewart Organization  7 Payee address; City; State; Zip Code PO Box 166708  Irving, TX 75016  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name  Office sought  Odditate/Officeholder name Office sought  Odditate/Officeholder name Office held