

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

| | | | |
|--|--|--|----------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00070874 | 2 Total pages filed: 17 |
| 3 COMMITTEE NAME For Our Community | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 06/05/2015 2015 JUN 5 PM 3:38 RECEIVED CITY SECRETARY DALLAS, TEXAS | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE#; CITY; STATE; ZIP CODE P.O. Box 191251 Dallas, TX 75219-1251 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Mr. Albert NICKNAME LAST SUFFIX Black | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE#; CITY; STATE; ZIP CODE 751 Kessler Lake Dr. Dallas, TX 75208 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE#; CITY; STATE; ZIP CODE P.O. Box 191251 Dallas, TX 75219-1251 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (214) 945-2319 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input checked="" type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 04/30/2015 06/03/2015 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 06/13/2015 | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

**GENERAL PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

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|---|---|---|--------------|
| 12 COMMITTEE NAME For Our Community | | 13 Filer ID (Ethics Commission Filers) 00070874 | |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported Casey Thomas Dallas City Council District 3 B. Opposed | |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported B. Opposed | |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | | |
| | 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 50,000.00 |
| | EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 95,727.23 | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 26,524.30 | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 | |

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.

 Mr. Albert Black
 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE **FORM GPAC
ADDENDUM**
Page 3 of 17

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|---|---|
| 12 COMMITTEE NAME For Our Community | 13 Filer ID (Ethics Commission Filers) 00070874 |
|---|---|

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|---|---|---|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported Erik Wilson Dallas City Council District 8 B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported |
| | | B. Opposed |

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| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported Tiffinni Young Dallas City Council District 7 B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported |
| | | B. Opposed |

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| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported Rick Callahan Dallas City Council District 5 B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported |
| | | B. Opposed |

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SUBTOTALS - GPAC **FORM GPAC**
COVER SHEET PG 3
4 of 17

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|---|---|
| 17 COMMITTEE NAME For Our Community | 18 Filer ID (Ethics Commission Filers) 00070874 |
|---|---|

| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
|--|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 50,000.00 |
| 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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 95,727.23 |
| 11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 14. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS **SCHEDULE A1**

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/17 |
| 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 |
| 4 Date 06/02/2015 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale, Lawrence 6 Contributor address; City; State; Zip Code 2100 Ross Avenue Suite 1870 Dallas, TX 75201 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Dale Operating Company |
| Date 05/29/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill Jr., Al Contributor address; City; State; Zip Code 47 Highland Park Village Suite 200 Dallas, TX 75205 | Amount of Contribution (\$) \$25,000.00 |
| Principal occupation / Job title (See Instructions) Investments | | Employer (See Instructions) A G Hill Partners LLC |
| Date 05/20/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karol, Tom Contributor address; City; State; Zip Code 5370 Meaders Lane Dallas, TX 75229 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Cornerstone Automation Systems |
| Date 04/30/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowling, Robert Contributor address; City; State; Zip Code 4001 Maple Avenue Suite 600 Dallas, TX 75219 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) TRT Holdings |
| Date 05/28/2015 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson Jr., Jere Contributor address; City; State; Zip Code 3609 Centenary Ave Dallas, TX 75225 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Ambit Energy |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1: Sch: 1/12 Rpt: 6/17 | | 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 | |
| 4 Date 05/14/2015 | | 5 Payee name Allyn Media | | | |
| 6 Amount (\$) \$161.90 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Fees | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Courier Fees | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council District 3 | |
| Date 05/14/2015 | | Payee name (see previous) | | | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description <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 Wilson, Erik | | Office sought Dallas City Council District 8 | |
| Date 05/14/2015 | | Payee name Allyn Media | | | |
| Amount (\$) \$3,750.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 Phones | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council District 3 | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

| | | |
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| 1 Total pages Schedule F1: Sch: 2/12 Rpt: 7/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
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| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

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|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|---------------------------------|---|--|

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|--|---|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
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|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

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|--|--------------------------------------|
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code |
|--|--------------------------------------|

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

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Young, Tiffinni | Office sought Dallas City Council District 7 | Office held |
|--|--|---|-------------|

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| Date 05/14/2015 | Payee name Allyn Media |
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| Amount (\$) \$17,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 |
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|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Phones |
|------------------------|---|---|

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|--|--|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Thomas, Casey | Office sought Dallas City Council District 3 | Office held |
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|------|------------|
| Date | Payee name |
|------|------------|

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

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
|------------------------|--|-----------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/12 Rpt: 8/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
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| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
|---|---|

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

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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
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|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

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|--|--------------------------------------|
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code |
|--|--------------------------------------|

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

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Young, Tiffinni | Office sought Dallas City Council District 7 | Office held |
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|--------------------|---------------------------|
| Date 05/26/2015 | Payee name Allyn Media |
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| Amount (\$) \$15,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 |
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|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Digital |
|-------------------------------|--|---|

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|---|--|---|---------------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Thomas, Casey | Office sought Dallas City Council District 3 | Office held None |
|---|--|---|---------------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 4/12 Rpt: 9/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
| 4 Date | 5 Payee name (see previous) | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Wilson, Erik | Office sought Dallas City Council District 8 |
| Date | Payee name (see previous) | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Young, Tiffinni | Office sought Dallas City Council District 7 |
| Date 05/26/2015 | Payee name Allyn Media | |
| Amount (\$) \$41.80 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Courier Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Thomas, Casey | Office sought Dallas City Council District 3 |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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.

| | | | | | |
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| 1 Total pages Schedule F1: Sch: 5/12 Rpt: 10/17 | | 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 | |
| 4 Date | | 5 Payee name (see previous) | | | |
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description <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 Wilson, Erik | | Office sought 8 Office held | |
| Date 06/03/2015 | | Payee name Allyn Media | | | |
| Amount (\$) \$11,500.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 Consulting | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council District 3 Office held | |
| Date | | Payee name (see previous) | | | |
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) | | (b) Description <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 Wilson, Erik | | Office sought Dallas City Council District 8 Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 6/12 Rpt: 11/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
|---|--|--|

| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
|---|---|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Young, Tiffinni | Office sought Dallas City Council District 7 | Office held |
|--|--|---|-------------|

| | |
|--------------------|---------------------------|
| Date 06/03/2015 | Payee name Allyn Media |
|--------------------|---------------------------|

| | |
|--|--|
| Amount (\$) \$8,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 |
|--|--|

| | | |
|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Radio |
|-------------------------------|--|---|

| | | | |
|---|---|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
|---|---|---|-------------|

| | |
|--------------------|---------------------------|
| Date 06/03/2015 | Payee name Allyn Media |
|--------------------|---------------------------|

| | |
|--|--|
| Amount (\$) \$2,450.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3838 Oak Lawn Ave Ste 400 Dallas, TX 75219 |
|--|--|

| | | |
|-------------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) 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 Phones |
|-------------------------------|--|--|

| | | | |
|---|---|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
|---|---|---|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: Sch: 7/12 Rpt: 12/17 | | 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 | |
| 4 Date 05/20/2015 | | 5 Payee name Community Trust Bank | | | |
| 6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code 3838 Oak Lawn Avenue Suite 100 Dallas, TX 75219 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 05/13/2015 | | Payee name Gober Hilgers | | | |
| Amount (\$) \$1,670.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 1005 Congress Avenue Suite 350 Austin, TX 78701 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Legal Services | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P2015 Legal Fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | |
| Date 05/08/2015 | | Payee name JAB Productions | | | |
| Amount (\$) \$2,200.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 5921 Shady Crest Tr Dallas, TX 75219 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council District 8 | |
| | | | | Office held None | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/12 Rpt: 13/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
|---|--|--|

| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
|---|---|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Wilson, Erik | Office sought Dallas City Council District 8 | Office held None |
|--|---|---|---------------------|

| | |
|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

| | |
|--|--------------------------------------|
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code |
|--|--------------------------------------|

| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Young, Tiffinni | Office sought Dallas City Council District 7 | Office held None |
|---|--|---|---------------------|

| | |
|--------------------|-------------------------------|
| Date 05/13/2015 | Payee name JAB Productions |
|--------------------|-------------------------------|

| | |
|---|---|
| Amount (\$) \$13,750.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5921 Shady Crest Tr Dallas, TX 75219 |
|---|---|

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

| | | | |
|---|--|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Thomas, Casey | Office sought Dallas City Council District 3 | Office held |
|---|--|---|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 9/12 Rpt: 14/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
|---|--|--|

| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
|---|---|

| | | |
|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
|--|---|---|-------------|

| | |
|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

| | |
|--|--------------------------------------|
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code |
|--|--------------------------------------|

| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Young, Tiffinni | Office sought Dallas City Council District 7 | Office held |
|--|--|---|-------------|

| | |
|--------------------|-------------------------------|
| Date 05/26/2015 | Payee name JAB Productions |
|--------------------|-------------------------------|

| | |
|--|---|
| Amount (\$) \$7,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5921 Shady Crest Tr Dallas, TX 75219 |
|--|---|

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

| | | | |
|--|--|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Thomas, Casey | Office sought Dallas City Council District 3 | Office held |
|--|--|---|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 10/12 Rpt: 15/17 | 2 FILER NAME For Our Community | 3 Filer ID (Ethics Commission Filers) 00070874 |
|--|--|--|

| | |
|---------------|---------------------------------------|
| 4 Date | 5 Payee name (see previous) |
|---------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code |
|---|---|

| | | |
|---------------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
|--|---|---|-------------|

| | |
|------|------------------------------|
| Date | Payee name (see previous) |
|------|------------------------------|

| | |
|--|--------------------------------------|
| Amount (\$) <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code |
|--|--------------------------------------|

| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) | (b) Description <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 Young, Tiffinni | Office sought Dallas City Council District 7 | Office held |
|---|--|---|-------------|

| | |
|--------------------|-------------------------------|
| Date 06/02/2015 | Payee name JAB Productions |
|--------------------|-------------------------------|

| | |
|--|---|
| Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5921 Shady Crest Tr Dallas, TX 75219 |
|--|---|

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

| | | | |
|---|---|---|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Wilson, Erik | Office sought Dallas City Council District 8 | Office held |
|---|---|---|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: Sch: 11/12 Rpt: 16/17 | | 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 | |
| 4 Date 05/08/2015 | | 5 Payee name Steele, Barbara | | | |
| 6 Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code 1924 Lanark Avenue Dallas, TX 75203 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Young, Tiffinni | | Office sought Dallas City Council District 7 | |
| Office held None | | | | | |
| Date 06/02/2015 | | Payee name Steele, Barbara | | | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 1924 Lanark Avenue Dallas, TX 75203 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvassing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council District 3 | |
| Office held None | | | | | |
| Date 04/30/2015 | | Payee name U.S. Postmaster | | | |
| Amount (\$) \$928.18 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 401 Dallas Fort Worth Turnpike Dallas, TX 75260 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 Postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Wilson, Erik | | Office sought Dallas City Council District 8 | |
| Office held None | | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: Sch: 12/12 Rpt: 17/17 | | 2 FILER NAME For Our Community | | 3 Filer ID (Ethics Commission Filers) 00070874 | |
| 4 Date 06/03/2015 | | 5 Payee name U.S. Postmaster | | | |
| 6 Amount (\$) \$985.15 <input type="checkbox"/> Expenditure from corporate funds | | 7 Payee address; City; State; Zip Code 401 Dallas Fort Worth Turnpike Dallas, TX 75260 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 Postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Wilson, Erik | | Office sought Dallas City Council District 8 | |
| Date 04/30/2015 | | Payee name US Postmaster | | | |
| Amount (\$) \$1,497.62 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 401 Dallas Fort Worth Turnpike Dallas, TX 75260 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 Postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Thomas, Casey | | Office sought Dallas City Council Dist 3 | |
| Date 04/30/2015 | | Payee name Valentine Direct | | | |
| Amount (\$) \$277.58 <input type="checkbox"/> Expenditure from corporate funds | | Payee address; City; State; Zip Code 2344 Farrington St Dallas, TX 75207 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) 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 P2015 Postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name Callahan, Rick | | Office sought Dallas City Council District 5 | |
| | | | | Office held Dallas City Council District 5 | |

POLITICAL COMMITTEE

FORM DAILY-E PAC

DAILY PRE-ELECTION REPORT OF DIRECT EXPENDITURES

| | | | | | |
|--|--|--|-----------------|---|--|
| 1 Filer ID (Ethics Commission Filers) 00070874 | | 2 Total pages filed: 1 of 2 | | OFFICE USE ONLY | |
| 3 COMMITTEE NAME For Our Community | | | | Date Received ELECTRONICALLY FILED 06/05/2015 | |
| 4 CAMPAIGN TREASURER NAME | | MS/MRS/MR Mr. | FIRST Albert | MI | Date Hand-delivered or Date Postmarked |
| | | NICKNAME | LAST Black | SUFFIX | Receipt # |
| 5 CAMPAIGN TREASURER MAILING ADDRESS | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE | | Date Processed | |
| | | P.O. Box 191251 | | Date Imaged | |
| | | Dallas, TX 75219-1251 | | | |

RECEIVED
 2015 JUN -5 PM 3:38
 CITY SECRETARY
 DALLAS, TEXAS

