

CA DD E/O CE OLDER
CA G F NA CE EPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 6

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

OFFICE USE ONLY

Mrs
NICKNAME

Ashley
LAST

E

SUFFIX

Date Received

10-21-2020

4 CANDIDATE /

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

OFFICEHOLDER
MAILING
ADDRESS

☐ Change of Address

2000 Horley Ave
Fort Worth, TX 76110

Receipt #

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Hand-delivered or Date Postmarked

(817) 215-1000

TREASURER
NAME

NICKNAME

LAST

SUFFIX

Date Processed

10-21-2020

Date Imaged

10-21-2020

7 CAMPAIGN
TREASURER
ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE

ZIP CODE

4929 College Ave, Ste 419

Fort Worth, TX 76104

CA E/OFF C OL E
CA G F A CERE O T

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Ashley E Paz

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS RECEIVED OR POLITICAL EXPENDITURES MADE BY THE CANDIDATE

POLITICAL

SUPPORT THE CANDIDATE / OFFICEHOLDER THESE EXPENDITURES MAY HAVE BEEN MADE THROUGH THE CANDIDATE

NOT

COMMITTEE(S)

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS	SUBTOTAL
	\$ —

22

NAME OF SCHEDULE	AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5000
5. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 149.70
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ —
4. ☒ SCHEDULE E: LOANS	—
☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	—
6. ☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 8,000
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ —
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ —
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ —
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ —
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ —
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ —

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

2 FILER NAME

Ashley E Paz

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

4/1/2017

7 Name of lender

Erie Paz

☐ out-of-state PAC

9 Loan Amount (\$)

\$5000.00

6 Is lender a financial institution?

Y (N)

8 Lender address;

City;

State;

Zip Code

2000 Hurley Ave

Ft Worth TX 76110

10 Interest rate

X

11 Maturity date

n/a

14 Description of Collateral

☒ none

15

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

16 ORGANIZATION

17 Name of guarantor

Novartis

INFORMATION

18 Guarantor address;

City;

State;

Zip Code

☒ not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

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			Transportation/Equipment & Related Expense
Consulting Expense			Travel In District
Contributions/Donations Made By			Travel Out Of District
Candidate/Officeholder/Political Committee			Other (enter a category not listed above)
Credit Card Payment			

Education Learning Project
Gift/Awards/Memorials Expense

Printing Expense
Salary/Memo/Contract Labor

50

(a) Category (See Categories listed at the top of this schedule)

Contribution / Donation
made by officeholder

made to HELP.

(c) ☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

The Instruction Guide explains how to complete this form

Category (See Categories listed at the top of this schedule)

Website Advertising

4 Date

02/03/19

5 Payee name

Health

6 Amount (\$)

7 Payee address

8 City

9 State

10 Zip Code

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID (Ethics Commission Filer)

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$

5 Date

7 Amount (\$) 8 Payee address; City;

3000 S. Helen, Fort Worth, TX 76109

9 TYPE OF EXPENDITURE Political Non-Political

10 PURPOSE OF EXPENDITURE

11. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought
Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above)

Date

Payee name
Ashley E Paz

Amount (\$)

Payee address;

State; Zip Code

6 Payee name

Parmer Consulting

TYPE OF

State; Zip Code



(a) Category (See Categories listed at the top of this schedule)

on

ce from Strategy

PURPOSE OF EXPENDITURE

Candidate / Officeholder name

Office sought