

CAND DATE / OFF CEHOLDER
CA PA GN FINA CE REPORT

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS /

FIRST

MI

OFFICE USE ONLY

NICKNAME

LAST

SUFFIX

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT /

#;

CITY;

STATE;

ZIP CODE

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date

Date Postmarked

(682) 554-2304

6 CAMPAIGN
TREASURER
NAME

/ MRS / MR

M

Receipt #

Amount \$

NICKNAME

SUFFIX

Date Processed

Date Imaged

1/17/2023

APR 12 2023 10:00 AM RECEIVED

CITY:

ZIP CODE

TREASURER

CANDIDATE/OFFICEHOLDER
CAGFA REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Wallace Bridges

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL

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

COMMITTEE TYPE COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE(S)

COMMITTEE CAMPAIGN TREASURER NAME

KNOWLEDGE OF CANDIDATE, CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE

☐ Additional Pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

\$ 1500.00

\$ 944.40

1454.70

OF SUCH EXPENDITURES.

17 CONTRIBUTION
TOTALS

TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$

Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Wallace, Bridges

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1500.00
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE C: LOANS	\$
5.	SCHEDULE D: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
6.	SCHEDULE E1: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE E2: UNPAID INCURRED OBLIGATIONS	\$
8.	SCHEDULE F: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
9.	SCHEDULE G: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
12.	SCHEDULE J: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$

POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

DO NOT include this page in the

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense
Accounting/Bookkeeping Food Office Overhead/Rental Expense Transportation Equipment & Related Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

See how to complete this form.

1 Total pages Schedule F1

3 Filer ID (Ethics Commission Filers)

4 Date

5 Payee name

6 Amount (\$)

7 Payee address;

City;

State:

Zip Code

8

(b) Description

PURPOSE

OF
EXPENDITURE

9 Complete ONLY if direct

Candidate / Officeholder name

Office sought

Office held

The Instruction Guide

2 FILER NAME

PURPOSE

Amount (\$)

Payee address;

City;

State

Zip Code

OF
EXPENDITURE

Description

Complete ONLY if direct

Candidate / Officeholder name

Office sought

Office held

expenditure to benefit C/OH

Date

Payee name

PURPOSE

Amount (\$)

Payee address;

City;

State

Zip Code

OF
EXPENDITURE

Description

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Date	Amount	Description
13-Jul	\$9.04	Black Coffee
15-Jul	\$100.00	Deborah People
15-Jul	\$50.00	Deborah People
18-Jul	\$20.25	Honk parking
18-Jul	\$44.11	Dallas Conv
15-Jul	\$25.12	Luby
18-Jul	\$7.33	Black Coffee
19-Jul	\$18.40	Worthington parking
20-Jul	\$15.28	Benitos Resturantes
22-Jul	\$28.26	Cierra Bridges
15-Sep	\$20.00	McDonald

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

1 Total pages Schedule A1

2 3 Filers ID (Ethics Commission Filers)

4 Date out-of-state PAC (I

LINE 6 ang.

6 Contributor address;

State; Zip Code

71 100

7 Amount of contribution (\$)

out-of-state PAC (ID#:

111.11. 2 1.

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

City;

Date

Full name of contributor

Amount of contribution (\$)

Contributor address;

State; Zip Code

out-of-state PAC (ID#:

Employer (See Instructions)

100 Throckmorton St 500

out-of-state PAC (ID#: