CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD CITY SECRETARY FT. WORTH, TX

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Suide explains how	v to complete this form.	1 Filer ID (Ethics Commission Filers) N/A	2 Total pages file 31	ed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	_{FIRST} Jason	MI	OFFICE	USE ONLY
NAME	NICKNAME	Ballmann	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	5204 Lovell A Fort Worth, T	Ave	CITY; STATE: ZIP CODE	CSO RI APR 25 '2	EC'D 5 pm2:58
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 562.884.2360	EXTENSION .	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST Isabelle	MI	Receipt #	Amount \$
NAME	NICKNAME	LAST	SUFFIX	Date Processed Date Imaged	
		Young		3	
7 CAMPAIGN TREASURER ADDRESS	3704 Astoria	(NO PO BOX PLEASE); APT / SU	uite #; city: Arlington	STATE: TX 760	ZIP CODE
(Residence or Business)	3704 ASIOTE	a Di.	Annigon	17.700	13
8 CAMPAIGN TREASURER	AREA CODE	PHONE NUMBER	EXTENSION		
PHONE	()	817.213.6286			
9 REPORT TYPE	January 15	30th day before el	election Runoff	15th day afte treasurer ap (Officeholder	pointment
	July 15	8th day before elec	ection Exceeded Modified Reporting Limit	Final Report	(Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year	Month	Day Year	
	03	/25 /2025	тнгоидн 04	/ 23 / 202	25
11 ELECTION	ELECTION DA	ATE Year Primary	ELECTION TYPE Runoff Other	, , , , , , , , , , , , , , , , , , , ,	
	05 / 03 /		Description		,
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known City Councilmemb	1-8	Fort Worth, T
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITURES	ACCEPTED OR POLITICAL EXPENDITURES M S MAY HAVE BEEN MADE WITHOUT THE CANI RED TO REPORT THIS INFORMATION ONLY IF T	IDIDATE'S OR OFFICEHOLD	DER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREA	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS		
		GO TO	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Jason Ballmann	16 Filer ID (Ethics Commission Filers) N/A
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTF PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF)	\$8,711.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$7,153.67
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF OF REPORTING PERIOD	\$2,130.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOA LAST DAY OF THE REPORTING PERIOD	ANS AS OF THE \$
(1) Affidavis	Please complete either option MARK DAYLE REYES otary Public, State of Texas omm. Expires 02-14-2028 Notary ID 132360247	ure of Candidate or Officeholder
_1	before me by	this the 24 day of Apri),
20 23, to certify	Mark Dayle Reyes	Wary Public
Signature of officer administe	ering oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declarati	OR on	
My name is	, and my date of	of birth is
My address is		
Executed in	(street) (city) County, State of, on the day o	(state) (zip code) (country) of, 20 (month) (year)
	Signature	of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	20 Filer ID (Ethics Co	mmission Filers)			
	Jason Ballmann	N/A				
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$8,011.75			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTI	\$700.00				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS					
4.	4. SCHEDULE E: LOANS					
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLI	TICAL CONTRIBUTIONS	\$			
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
9,	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSON	IAL FUNDS	\$			
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTION	S TO A BUSINESS OF C/OH	\$			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITIC	CAL CONTRIBUTIONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CON TO FILER	TRIBUTIONS RETURNED	\$			

SCHEDULE A1

Th	e Instruction Guide explains how to complete th	ils form.	1 Total pages Schedule A1:
2 FILER NAME Jason Ballm			3 Filer ID (Ethics Commission Filers N/A
4 Date 3/25/2025	5 Full name of contributor ☐ out-of-state P/	PAC (ID#:	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; 6471 Greenway Road Fort Worth, T	State; Zip Code	
8 Principal occ Educator	cupation / Job title (See Instructions)	9 Employer (See Instru TCC	uctions)
Date 03/26/2025	Full name of contributor	AC (ID#:	Arnount of contribution (\$)
	1809 Sagebrush Trail Euless, TX 76	State; Zip Code	
Principal occu Manager	upation / Job title (See Instructions)	Employer (See Instru Alcon	uctions)
Date 3/26/2025	Full name of contributor	AC (ID#:	Amount of contribution (\$)
	Contributor address; City; 8500 Tangleridge Dr Fort Worth, TX	State; Zip Code	
Principal occu Not Employe	upation / Job title (See Instructions)	Employer (See Instru Not Employed	uctions)
Date 3/27/2025	Full name of contributor	State; Zip Code	Amount of contribution (\$)
Principal occu Front desk	upation / Job title (See Instructions)	Employer (See Instru	

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

The	e Instruction Guide explains how	to complete thi	s form.	1 Total pages Schedule A1: 2 of 17
2 FILER NAME Jason Ballma				3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/28/2025	5 Full name of contributor out-of-state PAC (ID#:) Sandra Soria		7 Amount of contribution (\$) 20.00	
	6 Contributor address; 3607 W Biddison St For	City;	State; Zip Code	
8 Principal occ Analyst	upation / Job title (See Instructions))	9 Employer (See Instru THR	ctions)
Date 03/28/2025	Full name of contributor Lavonne Cockrell Contributor address; 6016 Westridge Ln 406	City;	State; Zip Code	Amount of contribution (\$) 50.00
Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instru Not Employed	ctions)
Date 03/28/2025	Full name of contributor Shannon Wilmes	out-of-state PA	C (ID#:)	Amount of contribution (\$) 25.00
	Contributor address; 903 Wentwood Dr Allen	City;	State; Zip Code	
Principal occu	 upation / Job title (See Instructions)		Employer (See Instru	ictions)
Date 03/29/2025	Full name of contributor Natalie Weimer	out-of-state PA	C (ID#:	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
	6412 Inca Rd Fort Wort	11, 170 10110		

Th:	e Instruction Guide explains how t	to complete thi	is form.	1 Total pages Schedule A1: 3 of 17
2 FILER NAME Jason Ballm				3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/29/2025	5 Full name of contributor		7 Amount of contribution (\$) 100.00	
	6 Contributor address; 4505 Wilson Court Lake	City; Worth, TX 7	State; Zip Code 76135	
8 Principal occ Admin	upation / Job title (See Instructions)		9 Employer (See Instru Windstream	tctions)
Date 03/30/2025	Full name of contributor Judy Freeman	out-of-state PA	AC (ID#:)	Amount of contribution (\$)
	Contributor address: 937 Sherman Evanston, I	City; IL 60202	State; Zip Code	
Principal occu EHS	! upation / Job title (See Instructions)		Employer (See Instru- JudyLFreeman	l ctions)
Date 03/30/2025	Full name of contributor Sabrina Ball	out-of-state PA	SC (ID#:)	Amount of contribution (\$) 500.00
	Contributor address; 1326 Mistletoe Dr Fort W	City; orth, TX 76	State; Zip Code	
Principal occu Not Employe	ipation / Job title (See Instructions)		Employer (See Instru- Not Employed	ctions)
Date 03/30/2025	Full name of contributor Susan Douglas Roberts Contributor address;	out-of-state PA	C (ID#:) State; Zip Code	Amount of contribution (\$) 200.00
	1		09	
	3821 Winslow Dr Fort Wo	ortn, 13 761	00	

SCHEDULE A1

The	Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1:
2 FILER NAME			4 of 17 3 Filer ID (Ethics Commission Filers
Jason Ballma			N/A
4 Date 03/30/2025	5 Full name of contributor out-of-state P/	AC (ID#:	7 Amount of contribution (\$) 175.00
	6 Contributor address; City; 1035 Maltese Ln. San Antonio, TX 7	State; Zip Code '8260	
8 Principal occu Musician	 upation / Job title (See Instructions)	9 Employer (See Instru Temple Beth-el Sa	
Date 03/30/2025	Full name of contributor	AC (ID#:	Amount of contribution (\$) 25.00
	5204 Lovell Ave Fort Worth, TX 761	07	
Principal occu Field Organiz	 pation / Job title (See Instructions) Z C I	Employer (See Instru TDP	uctions)
Date 3/31/2025	Full name of contributor	AC (ID#:	Amount of contribution (\$) 500.00
	Contributor address; City; 6755 Ridgmar Blvd Apt 331 Fort Wo	State; Zip Code	
Principal occu Not Employe	upation / Job title (See Instructions)	Employer (See Instr Not Employed	uctions)
Date 03/31/2025	Full name of contributor	AC (ID#:	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
	3908 Kenley St Fort Worth, TX 7610	07	

Revised 1/1/2025

SCHEDULE A1

The	e Instruction Guide explains how to	o complete thi	s form.	1 Total pages Schedule A1: 5 of 17
2 FILER NAME Jason Ballm				3 Filer ID (Ethics Commission Filers
4 Date 04/01/2025	5 Full name of contributor Philip Ballmann	out-of-state PA	AC (ID#:	7 Amount of contribution (\$) 30.00
	6 Contributor address;	City;	State; Zip Code	• •
	2201 Creekview Dr 1336	Waco, TX	76711	
8 Principal occ Not Employe	upation / Job title (See Instructions)		9 Employer (See Instru Not Employed	uctions)
Date 04/01/2025	Full name of contributor John Dycus	out-of-state PA	C (ID#:	Amount of contribution (\$) 50.00
	Contributor address;	City;	State; Zip Code	•
	3607 Shady Park Dr 7610	13		
Principal occu Not Employe	ipation / Job title (See Instructions)		Employer (See Instru Not Employed	uctions)
Date 04/01/2025	Full name of contributor Ashley Barg	out-of-state PA	C (ID#:	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
	3220 River Lodge S Trail	Apt 927 Fo	rt Worth, TX	
Principal occu Not Employe	ipation / Job title (See Instructions)		Employer (See Instru Not Employed	uctions)
Date 04/02/2025	Full name of contributor Candice Morrow	out-of-state PA	C (ID#:	Amount of contribution (\$)
	* * * * * * * * * * * * * * * * * * * *	City;	State; Zip Code	
	Contributor address;	7,		
	Contributor address; 3868 Brandon Park Dr Ga	•	75044	

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The	e Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1:
			6 of 17
2 FILER NAME Jason Ballma			3 Filer ID (Ethics Commission Filers) N/A
4 Date 04/05/2025	5 Full name of contributor	9 PAC (ID#:)	7 Amount of contribution (\$) 5.00
	6 Contributor address; City;	State; Zip Code	
	39 Lucas Lane Fort Worth, TX 761	134	
8 Principal occi Not Employe	upation / Job title (See Instructions)	9 Employer (See Instru Not Employed	ctions)
Date 04/05/2025	Full name of contributor	PAC (ID#:)	Amount of contribution (\$) 60.75
	Contributor address; City;	State; Zip Code	
	3009 Hillcrest Dr Los Angeles, CA	90016	
Principal occu Staff	pation / Job title (See Instructions)	Employer (See Instru	ctions)
Date 04/06/2025	Full name of contributor out-of-state	e PAC (ID#:)	Amount of contribution (\$) 1,500.00
	Contributor address; City; PO Box 100008 Fort Worth, TX 76	State; Zip Code	
Principal occu Real estate	upation / Job title (See Instructions)	Employer (See Instru	ctions)
Date 04/06/2025	Full name of contributor out-of-state Hillary Biediger Contributor address; City;	e PAC (ID#:	Amount of contribution (\$) 25.00
	236 Casa Blanca Ave Fort Worth,	•	
	,	Employer (See Instru	actions)
Principal occi	upation / Job title (See Instructions)		

The	Instruction Guide explains how to comp	lete this form. 1 Total pages Schedule A1: 7 of 17
2 FILER NAME Jason Ballma		3 Filer ID (Ethics Commission Filers N/A
4 Date 04/06/2025	5 Full name of contributor 🔲 out-o	7 Amount of contribution (\$) 100.00
	6 Contributor address; City 4236 Oak Park Ct Fort Worth,	· ,
8 Principal occi Not Employe	upation / Job title (See Instructions)	9 Employer (See Instructions) Not Employed
Date 04/06/2025	Full name of contributor	-state PAC (ID#:) Amount of contribution (\$) 50.00
	Contributor address; City	; State; Zip Code
	4720 Boulder Run Fort Worth,	ΓX 76109
Principal occu _awyer	pation / Job title (See Instructions)	Employer (See Instructions) Self
Date 04/06/2025	Full name of contributor 🔲 out-o	-state PAC (ID#:) Amount of contribution (\$) 250.00
	Contributor address; City PO Box 471518 Fort Worth, TX	
Principal occu Surgeon	pation / Job title (See Instructions)	Employer (See Instructions) Acclaim Multispecialty Group
Date 04/06/2025	Full name of contributor out-o	-state PAC (ID#:) Amount of contribution (\$) 75.00
	Contributor address; City;	State; Zip Code
	1809 Sagebrush Trail Euless, 1	X 76040
A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	pation / Job title (See Instructions)	· Employer (See Instructions)
Principal occu Vianager		Alcon

	nstruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 8 of 17
2 FILER NAME ason Ballmar	าท		3 Filer ID (Ethics Commission Filers) N/A
04/06/2025	5 Full name of contributor out-of-state Anthony Rojas 6 Contributor address; City; 429 College Ave 124 Fort Worth,	State; Zip Code	7 Amount of contribution (\$) 25.00
3 Principal occup	ation / Job title (See Instructions)	9 Employer (See Instru Fort Worth City	uctions)
Date 04/06/2025	Full name of contributor	state; Zip Code	Amount of contribution (\$)
Principal occupa	ation / Job title (See Instructions)	Employer (See Instru Not Employed	uctions)
Date 04/07/2025	Full name of contributor	te PAC (ID#:	Amount of contribution (\$) 100.00
	Contributor address; City; 2212 Mistletoe Boulevard Fort Wo	State; Zip Code	
Principal occupa Not Employed	ation / Job title (See Instructions)	Employer (See Instr Not Employed	uctions)
Date 04/07/2025	Full name of contributor □ out-of-sta Susan Keith Contributor address; City; 5801 Singletree Ct Fort Worth, T>	State; Zip Code	Amount of contribution (\$) 50.00
	ation / Job title (See Instructions)	Employer (See Instr Keith Law Firm Po	

SCHEDULE A1

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

Th	e Instruction Guide explains how to com	plete this form.	1 Total pages Schedule A1: 9 of 17
2 FILER NAME Jason Ballm			3 Filer ID (Ethics Commission Filers) N/A
4 Date 04/07/2025	5 Full name of contributor		7 Amount of contribution (\$) 5.00
	6 Contributor address; City 2707 Columbus Grand Prairie,		
8 Principal occ Not Employe	eupation / Job title (See Instructions)	9 Employer (See In Not Employed	Instructions)
Date 04/07/2025	Pierre Nguyen	of-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City 11804 Oakwood Drive Austin,	•	
	pation / Job title (See Instructions) gram Manager	Employer (See In American Red (•
Date 04/07/2025	Bonnie Madeley Contributor address; City	•	Amount of contribution (\$)
Principal occu Not Employe	100 Steele Street Apt #613 De Ipation / Job title (See Instructions)	Enver, CO 80206 Employer (See In Not Employed	estructions)
Date 04/08/2025		of-state PAC (ID#:	Amount of contribution (\$)
	Contributor address; City, 352 Hillcrest Blvd Eagle Pass,	,	
	Principal occupation / Job title (See Instructions) Attorney		structions)

	sted information is not applicable, DO NOT ir	ciude uns page in the	TOPOTO
The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: 10 of 17
2 FILER NAME Jason Ballma			3 Filer ID (Ethics Commission Filers) N/A
5 Full name of contributor out-of-state Allison Fitzgerald 6 Contributor address; City; 4213 Shady Creek Dr Fort Worth, 1		State; Zip Code	7 Amount of contribution (\$) 100.00
8 Principal occi Not Employe	upation / Job title (See Instructions)	9 Employer (See Instru Not Employed	ctions)
Date 04/08/2025	Full name of contributor	C (ID#:) State; Zip Code	Amount of contribution (\$) 100.00
Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instru Not Employed	ctions)
Date 04/08/2025	Full name of contributor	C (ID#:)	Amount of contribution (\$) 50.00
	Contributor address; City; 901 Grange Hall Dr Apt 1301 Euless	State; Zip Code	
Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instru Not Employed	ctions)
Date 04/09/2025	Full name of contributor	.C (ID#:) State; Zip Code	Amount of contribution (\$) 25.00
	Principal occupation / Job title (See Instructions) Political Consultant		ctions) Strategies

Jason Ballmann 4 Date 04/10/2025 5 Full name of contributor out-of-state PAC (ID# 20.00 Mark Metcalf 6 Contributor address; City: State: Zip Code 5012 Cockrell Ave Fort Worth, TX 76133 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Texas Christian University Date 04/10/2025 Full name of contributor out-of-state PAC (ID# 10.00 Principal occupation / Job title (See Instructions) Self Out-of-state PAC (ID# 10.00 Date Other Out-of-state PAC (ID# 10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Out-of-state PAC (ID# 10.00 Amount of contribution (\$) Out-of-state PAC (ID# 10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Out-of-state PAC (ID# 10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Out-of-state PAC (ID# 10.00 Out-o	The	e Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1: 11 of 17
Mark Metcalf 20,00				3 Filer ID (Ethics Commission Filers N/A
8 Principal occupation / Job title (See Instructions) Teacher Date 04/10/2025 Date Date 7700 Meadowbrook Drive Fort Worth, TX 76112 Principal occupation / Job title (See Instructions) Wine Merchant Date 04/10/2025 Pull name of contributor out-of-state PAC (ID#			PAC (ID#:	
Texas Christian University Date Date D4/10/2025 Full name of contributor			•	
Dale Bronstein Contributor address; City; State; Zip Code 7700 Meadowbrook Drive Fort Worth, TX 76112 Principal occupation / Job title (See Instructions) Wine Merchant Date 04/10/2025 Full name of contributor Kelly Smith Contributor address; City; State; Zip Code 6508 Genoa Rd. Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Restauranteur Date 04/10/2025 Full name of contributor Contributor address; City; State; Zip Code 6508 Genoa Rd. Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Tommy's Hamburgers Amount of contribution (\$) Contributor address; City; State; Zip Code 6424 Inca Rd Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions) 150.00		upation / Job title (See Instructions)	1	'
Principal occupation / Job title (See Instructions) Wine Merchant O4/10/2025 Full name of contributor out-of-state PAC (ID#:			PAC (ID#:	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Wine Merchant Date			•	•
Kelly Smith Contributor address; City; State; Zip Code		pation / Job title (See Instructions)	Employer (See Instru	uctions)
Principal occupation / Job title (See Instructions) Restauranteur Full name of contributor Eric Johnson Contributor address; City; State; Zip Code 6424 Inca Rd Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) 150.00 Employer (See Instructions)		Naccount 1	PAC (ID#:	
Principal occupation / Job title (See Instructions) Tommy's Hamburgers Tommy's Hamburgers Tommy's Hamburgers Amount of contribution (\$) Amount of contribution (\$) Amount of contribution (\$) State; Zip Code 6424 Inca Rd Fort Worth, TX 76116 Employer (See Instructions)				
O4/10/2025 Eric Johnson Contributor address; City; State; Zip Code 6424 Inca Rd Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions)			1 ' ' '	•
6424 Inca Rd Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions)		out of state t	PAC (ID#:	
			·	
				uctions)
		ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE AS	NEEDED

The	Instruction Guide explains how	v to complete this	s form.	1 Total pages Schedule A1:
				12 of 17
2 FILER NAME Jason Ballma				3 Filer ID (Ethics Commission Filers) N/A
4 Date 04/10/2025	5 Full name of contributor Mary Scales	out-of-state PA	C (ID#:)	7 Amount of contribution (\$) 100.00
	6 Contributor address; 6304 Locke Ave Fort W	city; <mark>/orth, TX 761</mark>	State; Zip Code	
8 Principal occi Social worke	 upation / Job title (See Instructions 		9 Employer (See Instru Alevcare Hospice	ctions)
Date 04/10/2025	Full name of contributor Kirk Pinto	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address; 1301 Juneau Ct Fort W	city; orth. TX 7611	State; Zip Code	
Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instru Cook Children's	ctions)
Date 04/10/2025	Full name of contributor Harriet Livingston	out-of-state PA	C (ID#:)	Amount of contribution (\$) 50.00
	Contributor address; 1805 Sevilla Road Fort	City; Worth, TX 76	State; Zip Code	
Principal occu Not Employe	 pation / Job title (See Instructions) ed)	Employer (See Instru Not Employed	ctions)
Date 04/10/2025	Full name of contributor Charles Gallupi	out-of-state PA	C (ID#:)	Amount of contribution (\$) 25.00
	Contributor address; 1501 Saxony Rd Fort V	City;	State; Zip Code	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instru Not Employed	ctions)	
	ATTACH ADD		OF THIS SCHEDULE AS	

Haley Ballenger 6 Contributor address; 10804 Whitestone 8 Principal occupation / Job title (See Instru- Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instru- Not Employed Pate Date Date Date Date Date Date Date D	City; Ranch Rd Benbuctions) or out-of-state ters City; ast Fort Worth, T	9 Employer (See Ins Fort Worth Comn PAC (ID#:	Amount of contribution (\$) 10.00
Haley Ballenger 6 Contributor address; 10804 Whitestone 8 Principal occupation / Job title (See Instru- Founder Full name of contributor Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instrue) Not Employed Full name of contributor Brody Mulligan Contributor address; Principal occupation / Job title (See Instrue) Consultant Date Full name of contributor Brody Mulligan Contributor address;	City; Ranch Rd Benbuctions) or	State; Zip Code rook, TX 76116 9 Employer (See Ins Fort Worth Comn PAC (ID#: State; Zip Code TX 76116 Employer (See Inst Not Employed	atructions) munity Collaborative Amount of contribution (\$) 10.00
10804 Whitestone 8 Principal occupation / Job title (See Instru Founder Pate 04/11/2025 Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instru Not Employed Pate 04/11/2025 Brody Mulligan Contributor address; Principal occupation / Job title (See Instruction of Contributor address) Principal occupation / Job title (See Instruction of Contributor address) Principal occupation / Job title (See Instruction of Consultant of Contributor address)	Ranch Rd Benbuctions) or out-of-state ters City; ast Fort Worth, T	9 Employer (See Ins Fort Worth Comm PAC (ID#:	Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See Instru Founder Date 04/11/2025 Full name of contributo Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instrue) Not Employed Date 04/11/2025 Full name of contributo Brody Mulligan Contributor address; Principal occupation / Job title (See Instrue) Consultant Date Full name of contributor	citions) Or Out-of-state Oers City; ast Fort Worth, Totions)	9 Employer (See Ins Fort Worth Comn PAC (ID#:	Amount of contribution (\$) 10.00
Founder Date O4/11/2025 Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instruction of Contributor address) Principal occupation / Job title (See Instruction of Contributor address) Principal occupation / Job title (See Instruction of Contributor address) Principal occupation / Job title (See Instruction of Consultant of Contributor address) Principal occupation / Job title (See Instruction of Consultant of Contributor address)	ers City; ast Fort Worth, T	Fort Worth Comments PAC (ID#: State; Zip Code X 76116 Employer (See Inst. Not Employed	Amount of contribution (\$) 10.00
Catherine Summ Contributor address; 1804 Ems Road Ea Principal occupation / Job title (See Instruction Principal occupation Principal Occupation Principal occupation Principal occupation Principal occupation / Job title (See Instruction Principal occupation Principal occupation / Job title (See Instruction Principal occupation / Job title (See Instruction Principal occupation / Job title (See Instruction Principal occupation Principal	ers City; ast Fort Worth, T	State; Zip Code X 76116 Employer (See Inst Not Employed	10.00
Principal occupation / Job title (See Instruction Not Employed Date Full name of contributor Brody Mulligan Contributor address; Principal occupation / Job title (See Instruction Consultant Date Full name of contributor Date Principal occupation Date Pri	ast Fort Worth, T	Employer (See Inst Not Employed	tructions)
Principal occupation / Job title (See Instruction Principal occupation / Job title	ctions)	Employer (See Inst Not Employed	tructions)
Date 04/11/2025 Full name of contributo Brody Mulligan Contributor address; Principal occupation / Job title (See Instruction Sultant) Date Full name of contributor	,	Not Employed	tructions)
O4/11/2025 Brody Mulligan Contributor address; Principal occupation / Job title (See Instructions of Consultant) Date Full name of contributor	out-of-state	PAC (ID#:	
Principal occupation / Job title (See Instru Consultant Date Full name of contributo			Amount of contribution (\$)
Consultant Date Full name of contributo	City;	State; Zip Code	
	ctions)	Employer (See Inst	tructions)
04/11/2025 Robert Franklin	or out-of-state f	PAC (ID#:	Amount of contribution (\$) 500.00
Contributor address;	City;	State; Zip Code	•••
4932 Roanoke St F	ort Worth, TX 76	3116	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Inst	tructions)

SCHEDULE A1

	10		14 of 17
	ason Ballmann		3 Filer ID (Ethics Commission Filers)
	5 Full name of contributor out-of-state_PAC (ID#:) Carter Bristol		7 Amount of contribution (\$) 100.00
	6 Contributor address; City; 3201 River Lodge Trl S Apt 1138 I	State; Zip Code Fort Worth, TX 76116	
8 Principal occupa	ation / Job title (See Instructions)	9 Employer (See Instru American Medical	·
Date 04/12/2025	Orlando Chapa	e PAC (ID#:) Slate; Zip Code	Amount of contribution (\$) 100.00
1	Contributor address; City; 11721 Wind Creek Ct Aledo, TX 7	, ,	
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instru Cook Children's	ctions)
Date 04/13/2025	Full name of contributor	e PAC (ID#:)	Amount of contribution (\$) 50.00
	Contributor address; City; 535 Classen Dr Dallas, TX 75218	State; Zip Code	
Principal occupa	ation / Job title (See Instructions)	Employer (See Instru Carrollton-Farmers	
Date 04/13/2025	Full name of contributor out-of-state	e PAC (ID#:)	Amount of contribution (\$) 100.00
3	Contributor address; City; 3908 Kenley St Fort Worth, TX 76	State; Zip Code	
Principal occupa	Principal occupation / Job title (See Instructions) Not Employed		ctions)

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Jason Ballmann A Date 04/13/2025 5 Full name of contributor	Th:	e Instruction Guide explains how t	to complete th	nis form.	1 Total pages Schedule A1: 15 of 17
David Griggs 6 Contributor address; City: State: Zip Code 13214 Glad Acres Dr. Dallas, TX 75234 8 Principal occupation / Job title (See Instructions) Attorney Date J4/14/2025 Principal occupation / Job title (See Instructions) Date J4/14/2025 Full name of contributor contributor contributor defense see Herring Contributor address: City: State: Zip Code 14/14/2025 Full name of contributor contributor contributor defense see Herring Contributor address: City: State: Zip Code 14/14/2025 Full name of contributor contributor contributor defense see Herring Contributor address: City: State: Zip Code 14/14/2025 Full name of contributor contributor contributor contributor defense see Herring Contributor address: City: State: Zip Code 14/14/2025 Full name of contributor contributor contributor contributor contributor contributor defense see Herring Contributor address: City: State: Zip Code 14/14/2025 Full name of contributor c					3 Filer ID (Ethics Commission Filers) N/A
13214 Glad Acres Dr. Dallas, TX 75234 8 Principal occupation / Job title (See Instructions) Law Office of Wendel Withrow		The state in the s			
Attorney Semployer (See Instructions) Semployer (See Inst		6 Contributor address;	City;	State; Zip Code	
Attorney Law Office of Wendel Withrow Pate 14/14/2025 Full name of contributor out-of-state PAC (ID#:		13214 Glad Acres Dr. Da	ıllas, TX 75	5234	
Rachel Carrisalez Contributor address; City; State; Zip Code 4629 Bonnell Ave Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Reese Herring Contributor address; City; State; Zip Code 6367 Newport Court Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) COTA Pale Full name of contributor Contributor address; City; State; Zip Code 6367 Newport Court Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) COTA Pale Full name of contributor Jonah Murray Contributor address; City; State; Zip Code 3941 Kirby Dr Apt 833 Fort Worth, TX 76155 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)		upation / Job title (See Instructions)		1 - 1	•
A629 Bonnell Ave Fort Worth, TX 76107 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed			out-of-state P	'AC (ID#:	
Principal occupation / Job title (See Instructions) Not Employed Pull name of contributor Reese Herring Contributor address; City; State; Zip Code 6367 Newport Court Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) COTA Pull name of contributor Jonah Murray Contributor address; City; State; Zip Code 3941 Kirby Dr Apt 833 Fort Worth, TX 76155 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)		Contributor address;	City;	State; Zip Code	
Not Employed Date Date Pull name of contributor Out-of-state PAC (ID#:		4629 Bonnell Ave Fort W	orth, TX 76	5107	
Reese Herring Contributor address; City; State; Zip Code 6367 Newport Court Fort Worth, TX 76116 Principal occupation / Job title (See Instructions) Employer (See Instructions) Encompass Date 04/14/2025 Full name of contributor Jonah Murray Contributor address; City; State; Zip Code 3941 Kirby Dr Apt 833 Fort Worth, TX 76155 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)		,			uctions)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date 04/14/2025		out-of-state P	Amount of contribution	
Date 04/14/2025 Full name of contributor out-of-state PAC (ID#:			•	•	
Jonah Murray Contributor address; City; State; Zip Code 3941 Kirby Dr Apt 833 Fort Worth, TX 76155 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Lupation / Job title (See Instructions)		1 ' ' '	L uctions)
3941 Kirby Dr Apt 833 Fort Worth, TX 76155 Principal occupation / Job title (See Instructions) Employer (See Instructions)			out-of-state P.	AC (ID#:	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address;	City;	State; Zip Code	
		3941 Kirby Dr Apt 833 Fo	rt Worth, T	X 76155	
					· ·

SCHEDULE A1

04/15/2025	ີງ Full name of contributor out-of-state PAG		3 Filer ID (Ethics Commission Filers
04/15/2025	Full name of contributor out-of-state PAG	- UD //	
6	Michael Campbell Contributor address; City; 241 Blue Valley Ct Fort Worth, TX 7	State; Zip Code	7 Amount of contribution (\$) 150.00
8 Principal occupati _aw enforceme	ion / Job title (See Instructions) nt	Employer (See Instruction Tarrant County	tions)
• • •	Full name of contributor	State; Zip Code	Amount of contribution (\$) 100.00
Principal occupation Executive Direc	on / Job title (See Instructions) ctor	Employer (See Instruction Nonprofit	ctions)
	Full name of contributor	State; Zip Code	Amount of contribution (\$) 250.00
Principal occupation Nonprofit	on / Job title (See Instructions)	Employer (See Instruc Tarrant County You	
	Full name of contributor out-of-state PAG Christy Rippin Contributor address; City; 728 Turner May Dr. Fort Worth, TX	State; Zip Code	Amount of contribution (\$) 5.00
Principal occupation	ion / Job title (See Instructions)	Employer (See Instruc	ctions)

Revised 1/1/2025

The	e Instruction Guide explains ho	w to complete t	this form.	1 Total pages Schedule A1: 17 of 17
2 FILER NAME		****		3 Filer ID (Ethics Commission Filers)
Jason Ballm	ann			N/A
4 Date 04/22/2025	5 Full name of contributor David Foster	out-of-state	PAC (ID#:)	7 Amount of contribution (\$) 100.00
	6 Contributor address;	City;	State; Zip Code	
	3908 Kenley St Fort Wo	orth, TX 761	07	
8 Principal occ Not Employe	cupation / Job title (See Instructions ed	;)	9 Employer (See Instruction Not Employed	L ctions)
Date 04/22/2025	Full name of contributor Amber Davis	out-of-state i	PAC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
	4541 Nautilus Cr #306 I	Fort Worth,	TX 76106	
Principal occu	 upation / Job title (See Instructions)		Employer (See Instruc	ctions)
Trainer			CES	
Date	Full name of contributor	out-of-state f	PAC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	 upation / Job title (See Instructions))	Employer (See Instruc	ctions)
Date	Full name of contributor	out-of-state f	PAC (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occu	upation / Job title (See Instructions))	Employer (See Instruc	ctions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

Th	ne Instruction Guide explains how to complete this forn	n.	1 Total pages Sched	ule A2:	
² FILER NAME Jason Balln			3 Filer ID (Ethics Co	mmission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 700.00		
5 Date	6 Full name of contributor)	8 Amount of Contribution \$	9 In-kind contribution description	
03/28/2025	7 Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth, TX 76107		200.00	Event food / beverage de of Texas. Complete Schedule T.	
10 Principal occ Not Employ	rupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe Not Empl	oyed	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 03/28/2025	Full name of contributor	Zip Code	Amount of Contribution \$	In-kind contribution description Event food / beverage	
	2512 Independence Road Colleyville, TX	76034	Check if travel outside of Texas. Complete Schedule		
Principal occ Not Employ	rupation / Job title (FOR NON-JUDICIAL) (See Instructions)		er (FOR NON-JUDICIA Employed	AL)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	ıtor's job title (FOR JU	DICIAL)(See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	ATTACH ADDITIONAL CODIES OF T	HIS SCHEDI	II E AS NEEDED		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting Backing Considing Expense Contributions/Considers Made By

Evert Expense Fees Fore: Boverage Expenses GM/Managetalhikamentala Evenana Loan Repayment/Removasement Office Overhead/Pental Expense Poling Expense

Scholation/Functioning Expense Transportation Equipment & Related Expense Travelin Casasct

Crank Card Payment Crank Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to c	Wagers Contract Labor (Crear (uniter a category not falled above)
1 Tatal pages Schedule F1: 1 of 10	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/26/2025	5 Payee name Fedex Office	
5 Amount (S) 2.86	7 Payee address; 6020 Camp Bowie Blvd Fort Worth, 7	City; State; Zip Code TX 76111
8 PURPOSE OF EXPENDITURE	(a) Calegory (See Categories dated at the top of this schedule) Printing expense	(b) Description Letter to community member
9 Complete ONLY if direct expenditure to benefit C/OH	(C) Check if travel cutside of Texas. Complete Schedule ? Candidate / Office helder name H	Check if Austin. T.X. officeholder hing expense Office saught Office held
0ate 03/27/2025	Payee name Squarespace	
Amount (\$) 38.38	Payee address; 225 Varick Street New York, NY 1001	
PURPOSE OF EXPENDITURE	Category (See Categories librard at the top of this schedule) Advertising expense	Website hosting
	Check if bavel outside of Tease. Complete Schedule 1.	Check if Austin, TX, officeholder living expense
Complete <u>GALY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name I	Office sought Office held
Oate	Payee name.	
03/28/2025	Isabelle Young	
Amount (\$) 500.00	Payee address; 3704 Astoria Dr Arlington, TX 76013	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Contract payment to Isabelle Young
	Check Hinavel outside of Texas. Complete Schedule T	Check d Auslin, TX. officetoider living expense
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office held
THE REPORT OF THE SECRET AND AND ADDRESS AS A SECRET	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advantising Expense Accounting Barking Consisting Expense ControllomatConstons Made By CandidatasCiticatoskerPolitical Committee

Event Expense Fees FoodBewerspe Expense GM/Awards/Memoriels Expense Lead Services Loan Repayment Forms ascord. Office Overhead Rental Expense Poling Expense Frailing Expense Selectation/Fundraising Expense
Transportation Ecolom ent & Rehited Expense
Travel in District
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Constitutions/Distributions Made & Constitution/Distribution-Constitution Distribution of Constitution of Cons		Vagya sa Char éraséri Labaur	Travel Ces CMD istrict Cities (enter a category not indeed above)
1 Total pages Schedule F1: 2 of 10	2 FILER NAME Jason Ballmann		3 Filer ID (Estics Commission Filers) NA
4 Oale 03/28/2025	5 Payee name Squarespace		
6 Amount (S) 51.17	7 Payee address; 225 Varick St New York, NY 10014	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category [See Categories state of the log of this schedule] Advertising expense	(h) Description Email service	
	(c) Check if travel outside of Toxas. Complete Schedule T	Chack if Aunti	n, TX, zikimbaldar biring unparasa
9 Complete ONLY if direct expanditure to benefit (2)Of	Candidate / C/fficeholder name	Office sought	Ciffice held
O 166	Payee same	marana-wa-wanikaanikanikanikanikanikoo olaasia- ola-karakeelikasia Missika ahkii da 2000.	, Aura general and the Control of
03/31/2025	Fort Liquor		
Amount (\$) 100.62	Payee address; 1001 W Magnolia Ave Fort Worth, TX	City; < 76104	State; Zip Code
PURPOSE OF EXPENDITURE	Calegory (See Categories Bissed at the top of this schedule) Food / beverage expense	Description Private event	
	Check if travel cidade of Tease. Curpitate Schnelule T.	[] Check it Aust	n, TX, officelysister being expenses
Complete <u>CNLY</u> if direct expensions to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
D sage	Fayee name	enter formatiquité appara de principal proposation de la constitution de la constitution de la constitution de La constitution de la constitucion	 The composition of the composition of
03/31/2025	FedEx		
Amount (3)	Payeo address;	Clty;	Siste; Zp Code
.77	6020 Camp Bowie Blvd Fort Worth, 1	ΓX 76116	
ydd yw hollolog y faw y gann gongon yng y en ag gym y gy en acur "Ym man and arniddio dailddio mhollodio ffiliaeth o'r ddiollodio ffiliaeth y ddiollodio ffiliae	Cabegory (See Categories lated at the top of this achadule)	Description	manuring that is some all no international plantable are set to see a state of the moderation of the state of
PUR POSE OF EXPENDITURE	Printing expense	Letter to com	nmunity organizer
	Check it was cutable of Texas. Complete Schedulo T	Chart I Austr	n, TX offentalder foldy aspaires
Complète <u>QNLY</u> if direct expenditure le banefil C/Ol	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting Barding Consulting Expense Contributions/Conducts Made By Contributions/Contributions/Contributions/Contributions/Contributions/Contributions/Contributions/Contributions/Contributions/Contr

Event Expense Fees Fund Beverage Expense Shiftwards Mornariat Expense I send Sendoes Loan Repayment/Hombersement Office Overhead/Rental Expense Poling Expense Printing Expense Salarian/Wepes/Curinet/Lisbur Solicitation/Fundrassing Expensis
Transportation Equipment & Related Expensis
Travel In District
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Carchides/Officetrodus/Pobles Cred Card Payment	d Committee Legal Services Salaman's The Instruction Guida explains how to s	VegesCarinaciLabor complete this form	Citian (writer a calegory molitalist attown)			
1 Total pages Schedule F1: 3 of 10		reconstant and the second seco	3 Filer ID (Etres Commission Fiers)			
4 Date 04/01/2025	5 Payee name Google Voice					
6 Amount (3) 25.94	7 Payee address: 1600 Amphitheatre Pkwy Mountain V	Payee address: City; State; Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Calegory (See Congodina Saled at the top of this echanism) Office overhead expense	(b) Description Phone service	riken kalimaniakishinda kinari ishimak ishab oku mak urumpi ada kina ma biradinah mada ar saraman rasida ara a I			
and with the company of the company	(C) Check if uswer winside of Texas. Complain Schedule 7.	Description of August	ı, TX, officeroider being aspense			
9 Complete ONLY if direct expanditure to behalf CiCi-	Casididate / Officeholder name	Office sought	Office held			
Design	Payee name					
04/03/2025	The UPS Store					
Amount (3) 29.53	Payee address; 2300 W 7th St Ste 108 Fort Worth, T.	City: X 76107	State; Zip Cods			
PURPOSE OF EXPENDITURE Category 18 to Categories Release to top of this schooling Description Printing expense Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of this schooling Printing of the categories Release to top of the categories Printing of the categories Pri			nce report			
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Diffig	Раусе патра					
04/07/2025	Ascension Coffee					
Amount (3) 61.87	Payee address; 1751 River Run Suite #151 Fort Wort	city.	Sisio; Zip Cade			
en e	Category (See Categories lated at the top of this schedule)	Description	14 i Marie de un hair de de marie de marie de marie de la companio del la companio del la companio de la companio del la comp			
PURPOSE OF EXPENDITURE	Food / Beverage expense	Meeting with	community organizer			
	Check Historie weekde of Texas. Correlate Schoolste?	Chack (Austin	, FX officetaldur being supernus			
Complete <u>ONLY</u> of direct expenditure to benefit CrOH	Candidate / Officeholder name	Office sought	Office beld			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Experise

Con Repayment Femiliarsement

Solicitation/Fundrationg Experies

Accounting Bayering Consulting Bayerine Contributions/Consistent Media B Candidate/Officerholder/Potess Cradit Cord Payment	Fucdifiereinign Expense Pol y Gifrikwards Memorials Expense Prin d Committee Legal Sexitors Sal	ce Overhead Renia Expense ing Expanse ing Expanse inter Wispas Contract Libra in la computate this form	Fransportston Egopanent & Related Expense Travel In Estate Travel Cun CE District Other (enter a category notifiated shows)
1 Total pages Schedule F1: 4 of 10	2 FILER NAME Jason Ballmann	is to complied this purity.	3 Filer (D (Ethics Commission Filers)
4 Date 04/08/2025	5 Payee name The UPS Store		Si de la constanta de la const
6 Amount (5) 10.00	7 Payee address; 2830 S Hulen St Fort Worth, TX 7	сну; 76107	State; Zip Code
ä PURPOSE OF EXPENDITURE	(a) Callegory [See Calegories 4 sted at the top of this extest Legal services	voj (b) Oescription Notary public	
	(Check Finavel outside of Texas Complete Schedul	by T Christian of Assa	iai, IX, elliculturidar kairg maparesa
9 Complete QNLY if direct axpanditure to benefit C/Oi	Candidate / Officeholder nanve H	Office sought	Office held
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04/10/2025	Printed Union		
Amount (3) 2,377.73	Payee address; 8800 Chancellory Row Iriving, TX	Gily: (75247	State; Zip Cods
PURPOSE OF EXPENDITURE	Calegory (See Categories little in the top of this schools Advertising expense	Signage	
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energia en resperienta de la compania de la compan La compania de la co La compania de la co	Payse name	Agentingsambattation of the state of the sta	engen der seine der der der der der der der der der de
04/11/2025	Fort Worth Weekly		
Amount (3) 1,200.00	Payse address: 3311 Hamilton Ave Fort Worth, Ta	City; X 76107	Signing; Zip Code
AND A STATE OF THE	Category (See Categories Ested at the top of this schedu	le) Description	
PURPOSE OF EXPENDITURE	Advertising expense	Advertorial	
	Concentrative suitable of Toxas. Complete Behaded	le T [] Chash if Assi	is. TX sCautabler tainy asparas
Complete <u>QNLY</u> if direct expenditure to benefit C/OI	: Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense AccountingBanking Consiling Expense ContributionsConsiders Made By ConsideraConsiders Made Committee

Event Expense Face FaceBeverage Expense GM/AssectsMemodats Expense Lacet Secution Loan Repayment Formbonsement Office Overhead Floritin Expense Politing Expense Printing Expense Salamat/WagnasCortract Labor Solicitation Fundamening Expense
Transportation Expense
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1 Total pages Schedule F1: 5 of 10			3 Files ID (Effect Commission Fiers)			
4 Date 04/11/2025	5 Payes name The UPS Store					
5 Amount (8) 10.00	7 Payree address; 2830 S Hulen St Fort Worth, TX 761	Glty; 07	State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories Stied at the top of this schedule) Legal Services	(b) Description Notary Public	kus sakuini kanasaanni kuki kulima ilia asoo uutut sannayn ya mananasan makiini muu ku sakui kustansa ma saku sak			
tion (1994 - 1994 April 1994 - 1994 April 1994 - 1994 April 1994 A	10) Check of transiel outside of Toxas Correlate Semedule 1	[] Cress il Austi	n, i'X, officialists being aspares			
9 Complete QNLY if direct expenditure to benefit C/Of	Candidate / Officeholder name	Office sought	Office held			
The second second contraction of the second	Payan name		Marie Militaria de Caracteria			
04/11/2025	Jake Davis					
Ameunt (\$) 500.00	Payee address; 5204 Lovell Ave Fort Worth, TX 7610	Cily;	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (Sea Categories Initial at the top of this achievable) Consulting expense	Description Contract paym	nent to Jake Davis			
	Chrack of Insured customers of Yearns, Corresponder Statement I.	[Check it Austr	n TX, afferiride fring sectors			
Complete <u>CRLY</u> if direct expensions to benefit C/OH	Candidate / Officeholder name i	Office sought	Office held			
	Payer name	Special confedence continued and detailed that a property and the continued and a continued by a				
04/14/2025	Sushi Kitchen					
Amount (3) 95.12	Payee address; 5301 Airport Blvd #100 Austin, TX 78	City:	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories Isled at the top of this schedule) Travel out of district					
	Check if travel consideral Texas, Complete Schedule T	[] Charle d Austin	, tx affectable forg expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held			
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting Barking

Evert Expense

Loan Repayment Remousement Office Gyerhead Rental Expanse

Solicitation/Fundrationg Experies Transportation Expigenent's Related Expense

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04/14/2025	Summer Moon							
6 Amount (5)	7 Payee address;		City;	State;	Žip Code			
20.03	11005 Burnet Rd St	e 112 Austin, T	X 78758					
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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4 Date 04/15/2025	5 Payee name Staples	E.			
5 Amount (S) 58.63	7 Payee address: 1660 S University Dr Fort Worth	сну; n, TX 76107	State; Zip Code		
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EXPENDITURE CATEGORIES FOR BOX 8(a)

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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EXPENDITURE GATEGORIES FOR BOX 8(a)

Advertising Expense

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Loan Repayment Removasement

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4 Cate 04/03/2025	5 Payee name Isabelle Young					
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