1	TE / OFFICEHOLDER N FINANCE REPORT	FORM C/OH COVER SHEET PG 1
The C/OH Instruction (	Guide explains how to complete this form.  1 Filer ID (Etnics Commission Filers)	2 Total pages filed:
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR FIRST MI	OFFICE USE ONLY
NAME	Dr. Llewellyn A. SUFFIX	Date Received
	Blackburn Sr.	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE; ZIP CODE 2130 LANASK AVE. Dallas, TX. 75203	A Tourist Control of the Control of
Change of Address	AREA CODE PHONE NUMBER EXTENSION	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 232-6380	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS MRS : MR FIRST MI	Receipt # Amount \$
NAME	Dr. Llewellyn A	Date Processed
	Blackburn Sr.	Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE): APT SUITE #: CITY; STATE;  2130 LANATK ANE. Dallas, TX. 7520	ZIP CODE
(Residence or Business)		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 232-6380	
9 REPORT TYPE	January 15 30th day before election Runoff	15th day after campaign
	July 15 Sth day before election Exceeded \$500 limit	treasurer appointment (Officeholder Only)  Final Report (Altach C/OH - FR)
10 PERIOD COVERED	Month Day Year Month OI / 16 / 2017 THROUGH	Day Year 15 / 2017
11 ELECTION	ELECTION DATE ELECTION TYPE	
	Month Day Year Primary Runoff Other Description General Special	
12 OFFICE		
IZ OFFICE	OFFICE HELD (If any)  13 OFFICE SOUGHT (II Known)	
	GO TO PAGE 2	

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Llewell	yN A. Blackburn	15 Filer ID (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	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 KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE COMMITTEE NAME		
	SPECIFIC	COMMITTEE ADDRESS	
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMI	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  \$		
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS. SITEMIZED	\$ —
	4. TOTAL	\$534,99	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST PORTING PERIOD	F DAY \$
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	*4000.00
18 AFFIDAVIT	PAULA C. REEDER ly Notary ID # 1192471	true and correct and includes all inf under Title 15, Election Code	perjury, that the accompanying report is formation required to be reported by me
AFFIX NOTARY STAME	Expires April 8, 2020	Signature of Can	MacHondidate or Officeholder
		by the said Llewellyn A. Blackbur	M this the 14th
day of Duly	167	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			

# SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

	COVERS	SHEET PG 3
19	Dr. Llewellyn A. Blackburn 20 Filer ID (Ethics Co	mmission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3:	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$534,99
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
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	\$
		6
		ŭ.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense P By Gift/Awards/Memorials Expense P	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1	Dr. Llewellyn A.	Blackburn	3 Filer ID (Ethics Commission Filers)
4 Date 2/8/2017	5 Payee name		
6 Amount (\$) #42, <u>64</u>	7 Payee address; City; State: Zip 0	Sode	
8 PURPOSE OF EXPENDITURE	(a) Calegory (See Categories listed at the top of this sched	Check if travel ou	ulside of Texas Complete Schedule T. n. TX, afficeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought	Office held
3/8/2017	Payee name Constant Contact	L	
Amount (\$) #42,64	Payee address: City; State: Zip C	Dode	
PURPOSE OF EXPENDITURE	Category (See Calegories listed at the top of this scheo	Check if travel out:	side of Texas. Complete Schedule T TX., officeholder ilving expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
3/27/2D17	Payee name Concord Church	)	
Amount (\$) #75, 22	Payee address; City: Slate: Zip C 6808 Pastor Bailey		TX. 75237
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this school  Advertising Expense	Check if travel outs	side of Texas. Complete Schedule T. TX. officeholder fiving expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE F1

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Adveitising Expense Accounting Bariking Consulting Expense Contributions/Donatrons Made Candidate-Officendider Politi Credit Cald Payment	Food Beverage Excense Poling E  Sy Gifb Awards Memoriais Expense Printing E	Expense Wages-Contract Labor	Solicitation Flundraising Expense Transportation Equipment & Rollitod Expense Fraive (In District Fraive Out Of Oistrict Other rentor a transpory not listed gloove)
1 Tota pages Schedule F			3 Filer ID (Etnics Commission Filers)
3/27/2017	5 Payee name Concord Church		<u> </u>
# 75, °=	7 Payee address: City: State: Zip Code 6808 Pastor Bailey D	or. Dallas	, TX. 75237
8 PURPOSE OF EXPENDITURE	(a) Category   See Categories listed at the too of this schedule  Advertising Expense		ulside of Texas Complete Schedule T n. T.X. officeholder living experise
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name भ	Office sought	Office neld
Date 4/10/2017	Payee name Constant Contact		
Amount (\$)  \$42.64	Payee address: City: State: Zip Code		
PURPOSE OF EXPENDITURE	Category Isaa Categor as listed at the tools this schedule!  Advertising Expense		is de of foxas. Complete Schedule T F.K. officebalder living levoense
Complete ONLY if direct expenditure to benefit C.O.	Candidate : Officeholder name H	Office sought	Office held
Date 4/27/2017	Dr. Keisha Lankford	<del>1</del>	
#50,00	Payee address: City State Zip Code		
PURPOSE OF EXPENDITURE	Category See Categor es and at the root of the empound.  Contribution / Donation  Cedar Hill ISD CAMPAIGN		Signature Company Schools
Complete CNLY if direct supenditure to benefit C.C.F.	Caragate Officendor name	Office solid in	Office have
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEF	DED
r ris ordinated by Texas Birl			Resided 9.8.201

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advisit sing Expense Adup, ting Banking Consulting Expense Control Lans Donations Made S Candidate Officenciae Politics Credificate Payment	Fees O Food Beverage Expense Pe By Slift Awards Memoria's Expense Pi	oan Ropayment/Pelmor rement thoe Overhead, Renta: Expense olang Expense inting Expense arades Wages Contract Labo Ow to complete this form.	Sellicitation Fundraising Expense Franspirtation Equipment & Related Expense Traivel in Dismot Traivel Out Ot Dish list Other renter in category not listed above?	
1 foral pages Scredule FI	Dr. Llewellyn A.	Blackburn	3 Filer ID (Ethics Commission Filers	
5/8/2017	5 Payee name			
#42.64	7 Payee address. City: State: Zip C	ode		
8 PURPOSE OF EXPENDITURE	(a) Category Sec Categories stad at the most this acted  Advertising Expens	Comp. two	uside of Texas, Complete Scriste, a F * Tix in 3ft haho, dar in anglandensk	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidale Officeholder name	Office sought	Office held	
Date 6/8/2017	Payee name Constant Contac	c+		
Amount (\$) #47,64	Payee address: City State: Zip C	ode		
PURPOSE OF EXPENDITURE	Category Stadageres lead the record to when Advertising Expens		f Julist Taxas Compute Schamuly T TX - other tildat i ung sambasa	
Complete ONLY if direct expenditure to benefit COH	Candidate Officenolder name	Office sought	Office held	
6/30/2017	Payee name  Dallas County E	lections		
#73.82	Payee address City State Zip Co	ode		
PURPOSE OF EXPENDITURE	Polling Expense (voter history)	2800 100 100 100	Park and a market of the second secon	
uan bless QNLr if airect elichnait ve to bellehr 0.0H	Carollore Off enalum name	Office at apre	Of stein aid	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

a .e. (8) 1º

## SCHEDULE F1

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Advertising Expanse About this Banking Consuming Expanses Controutions Danations Vade 9 Candidate Office local	Fees Office Offi	payment.Reimbilisenskir vernead Rental Ekpense Expense Expense Wages Contract Labo	So lotation Filind using Expulse Panapoitatio (Eq. Inment & Related Expors Fraye In Os. of Trayel Old Of District Omer Intolia baregory for lated above)
Gred * Card Payment	The Instruction Guide explains how to		on en anter a laregory not later/ above)
1 Foral pages Schedure F1	Dr. Llewellyn A. Bla	ackburn	3 Filler ID Ethics Commission Filers
4 Date 7/10/2017	Dr. Llewellyn A. Bla 5 Payer name Constant Contact		
6 Amount (S) #47.97	7 Payee address City: State: Zip Code		
8	(a) Category See Categories isless three too of this so lade a	: (b) Description	
PURPOSE			outside of Texas, Contriete Schoolule I
OF EXPENDITURE	Advertising Expense		n TA of sell, der ling expense
9 Complete ONLY if direct expenditure to benefit C.O.	Candidate Officeholder name	Office sough	Office held
Date	Payee name	and have the	
Amount (\$)	Payee address Gity State: Zip Code		
PURPOSE OF EXPENDITURE	Category See Chegory है एक्ट मार्टिस एक दिए सम्बद्धान्त्र है ।		dside differna Combiata Scheir (§ 1 n. 7K. 28 gandidar — og akbaris
Complete ONLY if direct expenditure to benefit C OH	Candidate Officenolder name	Office sought	Office held
Date	Payee name		
Amount (\$	Payee address. City State Zip Code		
	Category Sacration and the Company	Description	
PURPOSE OF EXPENDITURE			Steel and seems to recover
Putinate is QNL circla lacci expondin religio pel etri (2.1) Hi	Candibate (Officencias) and	De se viceta	3#k≥> = 44;
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED.
= 100 0.10 500 5	Pines In Washing Const.		

# APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

## FORM CTA PG<sub>1</sub>

See	1 Total pages filed:		
2 CANDIDATE	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
NAME	Dr. Llewellyn A.	Acet, #	
	Blackbur Sn	Date Received	
3 CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE; ZIP CODE		
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER EXTENSION	Date Hand-delivered or Postmarked	
	(214) 232-6380	Date Processed	
5 OFFICE HELD (if any)	Trustee, Dallas ISD	Dete Imaged	
6 OFFICE SOUGHT (if known)			
7 CAMPAIGN TREASURER NAME	Dr. Llewelly, A. Blackburg	LAST SUFFIX	
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)  STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY; STATE: ZIP CODE  APT / SUITE #: CITY; STATE: ZIP CODE			
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION $(3/4) 333 - 6380$		
10 CANDIDATE SIGNATURE	I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.		
I am aware of my responsibility to file timely reports as required by title 15 of the Election Code.			
	I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.		
	Henrelly A Black	7 - / 7 - / 7 Date Signed	
GO TO PAGE 2			