CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR Mi OFFICE USE ONLY OFFICEHOLDER Llewell ym Dr. NAME Date Received SUFFIX Blackburn, 4 CANDIDATE/ ADDRESS / PO BOX: APT / SUITE # CITY: OFFICEHOLDER 2130 LANARK AVE. Dallas, TX. 15203 MAILING ADDRESS Change of Address CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION OFFICEHOLDER Date Hand delivered or Date Postmarked (214) 232-6380 PHONE MS / MRS / MR 6 CAMPAIGN MI Receipt # Amount 5 TREASURER Hollis MR. NAME Date Processed SUFFIX Brashear Date Imaged STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CAMPAIGN STATE ZIP CODE TREASURER 1424 W. Red Bird LANE Dallas, TX. 75232 ADDRESS (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION **TREASURER** (214) 376-3484 PHONE 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 Bth day before election Exceeded \$500 limit Final Report (Attach C/OH - FR) 10 PERIOD Month COVERED /16/2016 07 01/15/2017 THROUGH 11 ELECTION ELECTION DATE **ELECTION TYPE** Primary Runoff Day Year Olher Description Special General 12 OFFICE OFFICE HELD (il any) 13 OFFICE SOUGHT (If known)

Forms provided by Texas Ethics Commission

GO TO PAGE 2

Revised 9/8/2015

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BOARD SERVICES
DALLAS ISD

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

44 0/0// 114//					
14 C/OH NAME	. Llewel	YN A. Blackburn, Sr. 15 FM	er 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 SEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION CHILY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	☐ GENERAL	* (c)			
	SPECIFIC	COMMITTEE ADDRESS	7.		
		COMMITTEE CAMPAIGN TREASURER NAME	- Vi		
Additional Pages					
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$500.00				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$				
	4. TOTAL POLITICAL EXPENDITURES \$3/5,84				
CONTRIBUTION BALANCE	5, TOTAL P OF REPO	\$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$400.00				
18 AFFIDAVIT					
Gina Lorraine Lopez Notary Public, State of Texas Expires: 12/04/2018 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. Signature of Candidate or Officeholder					
AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscribed before me, by the said LEW BLACKBURN, this the 17TH day of 1ANUARY, 2017, to certify which, witness my hand and seal of office.					
Sima Japiz GINA LOPEZ NOTARY PUBLIC					
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

Dr. Llewellyn A. Blackburn, Sr. 20 Filer ID (Ethics Commission Filers)					
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT				
1. SCHEDULE A1. MONETARY POLITICAL CONTRIBUTIONS	\$500.00				
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$				
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	s —				
4. SCHEDULE E: LOANS	\$				
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3/5,84				
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	s —				
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OR	H S				
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	s				
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$				
	_';				

MONE	TARY POLITICAL CONTR	SCHEDULE A1		
	instruction Guide explains how to complete this	1 Total pages Schedule A1 Of		
2 FILER NAME	Dr. Newellyn A. Blackbu	3 Filer ID (Ethics Commission Filers)		
	Darren L. James 6 Contributor address, City: State 1505 Sequoin Grove Ln. Lewisville, TX. 75067 spation / Job title (See Instructions)	9 Employer (See Instruct	7 Amount of contribution (\$) #500.00	
Date	Full name of contributor aut of state PAG Contributor address; City; State	C (IDe:	Amount of contribution (\$)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor	; Zip Code	Amount of contribution (\$)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	Full name of contributor	; Zip Code	Amount of contribution (\$)	
Principal occup	eation / Job title (See Instructions)	ons)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder Politic Credit Card Payment	20 Committee Legal Services The Instruction Guide explains	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Other (enter a c			
1 Total pages Schedule Fi	Dr. Llewellyn A. Blackburn, Sr. 3 Filer ID (Ethics Commission Filors)				
4 Date /7/2016	5 Payee name Constant Contact				
8 Amount (\$) #42,64	7 Payee address; City; State; Zip	Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Advertising Expen.	Check II travel publice of Texas, Corpo			
9 Complete ONLY # direct expenditure to benefit C/O	Candidata / Officeholder name H	Office sought	Office hold		
9/1/2016	Payee name CONSTANT CONTACT				
Amount (\$) #42.64	Payee address; City; State: Zip	Code	×		
PURPOSE OF EXPENDITURE	Category (See Categories Dated at the top of interchedule) Advertising Expense Description Check if Austin, TX, officeholder living expense				
Complate ONLY If direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held		
9/30/2016 Progressive Missionary Baptist Church					
Amount (s) Payae address; City: State: Zip Code #160.00 3727 N. Westmoreland Dallas, TX. 75241					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this echo Advertising Expense	Check if Auslin, TX, officeholder the			
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
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1 Total pages Schedule Ft:	2 FILER N				2 Eller ID (Eller Benjata eller
2 of 3	Dr	Llewellyn A.	Black	burn, Sr.	3 Filer ID (Ethics Commission Filers)
4 Date 10/7/2016	5 Payee na	istant Conta	2+		
6 Amount (\$)	7 Payee ac	dress; City; State; 2	ip Code		Water
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OF EXPENDITURE Advertising Expense Check II Austin, TX, officeholder living expense					
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EX	PENDITURE CATE	GORIES F	OR BOX 8(a)	
Advertising Expense Accounting Banking Consulting Expense Constitutions/Donations Made By Candidate/Officeholder/Politica	ly Gift/Awar of Committee Legal Ser	versge Expense rds/Memorials Expense	Office Overhing Experience Printing Experience Salaries/Wa	oense iges/Contract Labor	Solicitation/Fundraising Exponse Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a calegory not listed above)
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3 of 3	Dr. Liewellyn A. I	Blackburn, Sr.			3 Filer ID (Ethics Commission Filers)
4 Date /9/2017	5 Payee name	nt Conta	iet	7,000	7
6 Amount (S)	7 Payes address.	City, State; 2		W	
#42.64			•		2
8	(a) Category (See cate	gories listed at the top of this s	schedula)	(b) Description	3115
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Date	Payee name			- 70	
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					