

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE 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 / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Edwin
Flores

OFFICE USE ONLY

Date Received

JAN 15 PM 4: 58

RECEIVED
BOARD SERVICES
DALLAS ISD

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

Change of Address

14951 N. Dallas Pkwy Ste 400
Dallas, TX 75254

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214)

866

0001

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Ron
Steinhart

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

25 Robledo Dallas, TX 75230

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

()

9 REPORT TYPE

- January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
- July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year

Month Day Year

7 / 15 / 20

THROUGH

1 / 15 / 21

11 ELECTION

ELECTION DATE

ELECTION TYPE

Month Day Year

- Primary Runoff Other Description
- General Special

12 OFFICE

OFFICE HELD (if any)

Dallas ISD
Trustee

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

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

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 30,000.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

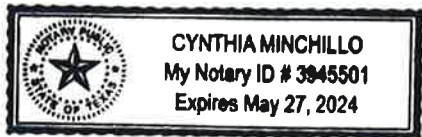
\$ 673.93

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 30,673.93

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Edwin S. Flores

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edwin S. Flores, this the 15th day of Jan., 2021, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Cynthia Minchillo

Printed name of officer administering oath

Notary Texa

Title of officer administering oath

LOANS

SCHEDULE E

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: |
| 2 FILER NAME <i>Edum Flores</i> | | 3 Filer ID (Ethics Commission Filers) |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Edum Flores</i> | 9 Loan Amount (\$) <i>30,000</i> |
| 6 Is lender a financial institution? Y N | 8 Lender address; City; State; Zip Code <i>14951 N. Dallas Pkwy Ste 400 Dallas, TX 75254</i> | 10 Interest rate <i>0</i> |
| | | 11 Maturity date <i>N/A</i> |
| 12 Principal occupation / Job title (See Instructions) <i>Attorney</i> | | 13 Employer (See Instructions) <i>Chalkey Flores</i> |
| 14 Description of Collateral <input type="checkbox"/> none <i>N/A</i> | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal Occupation (See Instructions) | | 21 Employer (See Instructions) |
| Date of loan | Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | Loan Amount (\$) |
| Is lender a financial institution? Y N | Lender address; City; State; Zip Code | Interest rate |
| | | Maturity date |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Description of Collateral <input type="checkbox"/> none | | Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| GUARANTOR INFORMATION <input type="checkbox"/> not applicable | Name of guarantor | Amount Guaranteed (\$) |
| | Guarantor address; City; State; Zip Code | |
| Principal Occupation (See Instructions) | | Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.