# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide e.	xplains how to complete this form.	1 Filer ID (Ethics Comm	ission Filers)	2 Total pages fi	led:
3 COMMITTEE NAME	· ·			OFFICE	USE ONLY
Dallas ISD B	oand Campaign			Date Received	5
T OOMMINITEE	DDRESS / PO BOX; APT / SUITE #;  3232 We Kinney  Dallas, TX 752	CITY; STATE;	ZIP CODE	Date Hand-delivered	or Date Postmarked
TREASURER NAME	S/MRS/MR FIRST RON ICKNAME LAST	nt	MI SUFFIX	Receipt #  Date Processed  Date Imaged	Amount \$
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	TREET ADDRESS (NO PO BOX PLEASE);  3232 MCKIA  Dallas, TX		STATE;	ZIP GODE	
7 CAMPAIGN TREASURER MAILING ADDRESS  Change of Address	Same as a bove				
8 CAMPAIGN	REA CODE PHONE NUMBER	83	SION		
9 REPORT TYPE	January 15 July 15	30th day before election 8th day before election Flunoff		Exceeded \$500 fimit Dissolution (Attach PA 10th day after campai	(C-DR) ign treasurer termination
10 PERIOD COVERED	Month Day Year	5 ТНЯОИДН		Month Day	Year H/ Zo 15
	. 2 5 /	Primary Runoff Seneral Special	Clection type Other Description		
GO TO PAGE 2					

## SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

#### FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME Dallas ISD Bund Campaign				) (Ethics Commission Filers)
Dallas ISD 150	nd Campaign	,		
14 COMMITTEE PURPOSE		CANDIDATE - OFFICEHOLDER NAME		
(Attach lists on plain paper to complete this report if necessary.)	CANDIDATE			
SUPPORT (Candidate of Measure)	OFFICEHOLDER	OFFICE SOUGH ( (candidate) * OFFICE HELD (office	holder)	
OPPOSE (Candidate of Measure)		n		
400407		BALLOTIDENTIFICATION IN ELECTION DATE  MONTH Day Year  11 3 2015		
ASSIST (Officeholder)	L DIEASURE	DESCRIPTION DELICS ISD Bond		
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$50			\$ 50
	2. TOTAL POLITICAL CONTRIBUTIONS [OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS]		\$ 62,600	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0-	
	4. TOTAL POLITICAL EXPENDITURES		\$ 15,000	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$47.600			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			
Notary My (	IIFER FRAWLEY Public, State of Texas commission Expires farch 31, 2018	I swear, or affirm, under penalty of report is true and correct and inclube reported by me under Title 15.1	ides all int Election C	ormation required to ode.
AFF KNOTARY STAMP SEA		Ronald & Skinh	and 1	nis the 2
day of Octobo	- 1 16	o certify which, witness my hand and se	al of office $\int_{-\infty}^{\infty}$	00
Signatury of other chains	stering oath Printed	JUNISER TOWN	Ty of all	(floer administering oath
Former povided by Texas Ethics	Z Commission	www.ethics.state.tx.us		Revised 9/8/2015

### SUBTOTALS - SPAC

### FORM SPAC COVER SHEET PG 3

17	Dallas ISD Bond Campaign	18 Filer ID (Ethics Con	nmission Filers)
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	1113 = 34101	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 61,450
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LAR	BOR ORGANIZATION	\$ [100
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORGANIZATION	ORATION OR LABOR	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR	RORGANIZATION	\$
7,	SCHEDULE E: LOANS		\$
8.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CON	TRIBUTIONS	\$ 15,000
9,	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL C	ONTRIBUTIONS	\$
11,	SCHEDULE F4: EXPENDITURES MADE BY CREDIT GARD		\$
12.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A I	BUSINESS OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CON	NTRIBUTIONS	\$
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	IS RETURNED	\$

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dallas ISD Bond Campaign 4 Dale 5 Full name of contributor Dallas Citizens Council 9/15/2015 6 Contributor address; City: State: Zip Code 901 Main St., # 6212, Dallas, TX 75202 7 Amount of contribution (\$) \$40,000 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of contribution (\$) Contributor address; City; State; Zip Code \$ 500 9609 Moss Haven Dr. Dallas, TX 75231 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Dut-of-state PAC (ID#:\_\_\_\_ 9/15/2015 Contributor address; City; State: Zip Code 3963 Maple Ave., # 290, Dalles, TX 75219 \$7500-Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) \$ 500 -350 N. St. Paul # 100, Dalles, TX 75201 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONET	ARY POLITICAL CONTRI	BUTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME Dallas	5D Bond Campaign		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	(ID#:)	7 Amount of contribution (\$)
9/18/2015	Anne Motsenbocker  6 Contributor address; City: State 7158 Brian Gre Dr., Dallas,	Zip Code TX 75254	4500-
8 Principal occu	pation / Job title (See Instructions)	9 Émployer (See Instruct	ions)
Date	Full name of contributor Box Financial Garp. PA	(10#.12FE4MS_)	Amount of contribution (\$)
9/21/2015	Contributor address; City: State Po Box 24128 OKlahuma City, OK 73124	; Zip Code	4 250 -
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor   out-of-state PAC Dallas Regional Chamber	{ID#: }	Amount of contribution (\$)
9/21/2015 Contributor address; City: State: Zip Code 500 N. A.Kand, #2600, Dalles, TX 75201			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)			
Date	Full name of contributor Out-of-state PAC		Amount of contribution (\$)
9/21/2015	Contributor address; City: State	Zip Code Irving, TX 75038	4 200
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES O		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1				
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:			
Dullas ISD Bund Campaign	3 Filer ID (Ethics Commission Filers)			
4 Dale  5 Full name of contributor   out-of-state PAC (IDF)  Dale Petroskey  6 Contributor address: City; State; Zip Code  5445 Caruth Haven Ln. #826, Dallas, TX 75225	7 Amount of contribution (\$)			
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ctions)			
Dale  Full name of contributor   out-ot-state PAC (ID#: )  Ren Steinhart  9   21   2015   Contributor address; City; State; Zip Code  25 Robledo Dr., Dallas, TX 75230	Amount of contribution (\$)			
Principal occupation / Job title (See Instructions) Employer (See Instruc	ctions)			
Date Full name of contributor out-of-state PAC (ID# ) Shin Takahashi  9/21/2015 Contributor address; City; State; Zip Code  7750 N. MarcArthur Blvd., Irving, TX 75063	Amount of contribution (\$)			
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date  Full name of contributor  Carol Reed  Carol Reed  Contributor address;  Contributor address;  Contributor address;  Contributor address;  Contributor address;  Contributor address;  City; State; Zip Code  Contributor address;  Contributor address;  Contributor address;  Contributor address;  Contributor address;  City; State; Zip Code  Contributor address;  Contributor address;  City; State; Zip Code	Amount of contribution (\$)			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)	Letions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additiona				

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule Ata The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dallas ISD Bund Campaign 5 Full name of contributor 7 Amount of contribution (\$) Tom Watson 4 Z50 6 Contributor address; Parkun, Pity; State; Zip Code 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of contribution (\$) Date City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (\$) Date Full name of contributor ut of state PAC (ID#: City; State; Zip Code Contributor address; Employer (See Instructions) Principal occupation / Job (itle (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

#### SCHEDULE C1

	The Instruction Guide explains how to complete this form.	1 Total pages Schedule C1		
2 FILERNAI	ISD Bud Campaign	3 Filer ID (Ethics Con	mmission Filers)	
4 Date	5 Corporation / Labor Organization name	7 Amount of contrib	oution (\$)	
9]18 soiz -	Stuffelbach, Inc. 6 Corporation/Labor Organization address; City; State: Zip Code 2525 McKinnum St., #800 Delles, TX 75201	-60  #		
Date	Corporation/Labor Organization name tazel's Hodshot, Inc	Amount of contrib	oution (\$)	
9/23/2015	Corporation/Labor Organization address; City, State; Zip Code  Zoog Mc Kenzie Dr. #117  Cerrollaun, TX 7500.	- 0001 tt		
Date	Corporation / Labor Organization name	Amount of contrib	ution (\$)	
•	Corporation / Labor Organization address; City; State; Zip Code			
Date	Corporation / Labor Organization name	Amount of contrib	ution (\$)	
	Corporation / Labor Organization address: City; State; Zip Code	_		
Date	Corporation / Labor Organization name	Amount of contribu	ution (\$)	
	Corporation / Labor Organization address; City; Slate; Zip Code		٠	

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Candidate/Officeholder/Politica Gredit Card Payment		Wages/Contract Labor Other (enter a category not listed above)	
Great Card Fayment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Dallay ISD Bond Campaign	3 Filer ID (Ethics Commission Filers)	
4 Date 9 22 2015	The Reeds Public Relat	ins Corporation	
6 Amount (\$)	7 Payee address; City: State: Zip Code 3232 McKiney Ave., #855 Dellas, TX 75204	1	
8 PURPOSE OF EXPENDITURE	(a) Category (See Calegories listed at the top of this schedule)  Consulting Expense	(b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held	
Date	Рауее пате		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin. TX, officeholder living 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 NEEDED			