

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: 44	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS <input checked="" type="checkbox"/> MR	FIRST Paul	MI D	
	NICKNAME	LAST Metzger	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; 1914 W. oak ST Denton TX 76201		STATE; ZIP CODE TX 76201	
	AREA CODE (646)	PHONE NUMBER 436 7847	EXTENSION	
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS <input checked="" type="checkbox"/> MR	FIRST Michael	MI J	
	NICKNAME Mike	LAST Weaver	SUFFIX	
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); 515 Ranchwood Dr		CITY; STATE; ZIP CODE Denton TX 76247	
	AREA CODE (940)	PHONE NUMBER 391 9614	EXTENSION	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
	Month Day Year 10 / 25 / 2020	THROUGH	Month Day Year 11 / 25 / 2020	
8 CAMPAIGN TREASURER PHONE	ELECTION DATE Month Day Year 12 / 08 / 2020		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
	12 OFFICE OFFICE HELD (if any) Denton City Council Place 6		13 OFFICE SOUGHT (if known) Denton City Council Place 6	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	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.			
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		
		COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

OFFICE USE ONLY

Date Received
RECEIVED

NOV 30 2020

City Manager's / City Secretary's Office

Date Hand-delivered or Date Postmarked

Receipt #	Amount \$
Date Processed	
Date Imaged	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ \emptyset
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9148
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ \emptyset
	4. TOTAL POLITICAL EXPENDITURES	\$ 19782.69
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8 8583.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,250

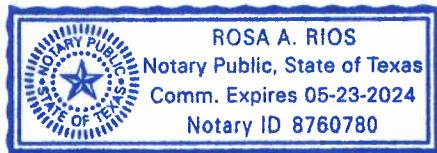
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Handwritten Signature]

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Saul Melguz* this the 30th day of November, 2020, to certify which, witness my hand and seal of office.

Rosa A. Rios Rosa A. Rios Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Paul D. Meltzer</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9148
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 15000
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 19218.16
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 564.53
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME
Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date
10/26
2020

5 Full name of contributor out-of-state PAC (ID#: _____)
Howard E. Watt

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
3512 Remington St Denton TX
76210

\$36

CK

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)
Clay Thurmond

Amount of contribution (\$)

Contributor address; City; State; Zip Code
1524 Snyder St Denton TX
76209

\$50

CC

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)
Nick Stevens

Amount of contribution (\$)

Contributor address; City; State; Zip Code
417 Amarillo St Denton TX
76201

\$100

CC

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)
John Hoenig

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2715 Nottingham Dr Denton TX
76209

\$25

CC

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/4
2020

5 Full name of contributor

Amy Taylor

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50

6 Contributor address;

2026 Sauls Ln

City;

Denton

State;

Tx

Zip Code

76209

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/4
2020

Full name of contributor

FARA-FRANCIS-EUSEA

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50

Contributor address;

1601 Meadow Oak Dr

City;

Denton

State;

Tx

Zip Code

76209

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor

Suzanne Rumohr

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$75

Contributor address;

1700 Crescent

City;

Denton

State;

Tx

Zip Code

76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor

Anne Sullivan

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$200

Contributor address;

2225 Pembroke Pl

City;

Denton

State;

Tx

Zip Code

76205

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

38

4 Date

11/4
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Traci THOMPSON

6 Contributor address; City; State; Zip Code

1721 Carlton Denton TX 76201

7 Amount of contribution (\$)

\$20

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Melissa Carr

Contributor address; City; State; Zip Code

3508 Pheasant Hollow Denton TX
76207

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Kenneth Gold

Contributor address; City; State; Zip Code

2512 Natchez Trace Denton TX
76210

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Sandy Swan

Contributor address; City; State; Zip Code

1413 Cambridge Ln Denton TX
76209

Amount of contribution (\$)

\$150

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

30

4 Date

11/4
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Wanda S. Needleman

6 Contributor address; City; State; Zip Code

1910 Emerson Ln Denton TX 76209

7 Amount of contribution (\$)

\$100

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Larry Beck

Contributor address; City; State; Zip Code

2301 Paxton Way Denton TX 76209

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Rick and Kelli Whisenant Whisenant Hunt

Contributor address; City; State; Zip Code

3306 Belmont St Denton TX 76210

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Diana Elrod

Contributor address; City; State; Zip Code

1018 Kings Row Denton TX 76209

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

30

4 Date

11/4
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Katy Whittington

6 Contributor address; City; State; Zip Code
429 Gabe Ct Denton TX 76207

7 Amount of contribution (\$)

\$20

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/4
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Suzanne Enck

Contributor address; City; State; Zip Code
916 Tallahassee Dr Denton TX 76208

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Gabrielle Fass-Glasgow

Contributor address; City; State; Zip Code
326 Peach St Apt K Denton TX 76209

Amount of contribution (\$)

\$10

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Phyllis Wolper

Contributor address; City; State; Zip Code
1012 Bull Run Denton TX 76209

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

~~30~~

4 Date

11/4
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Sharon Kremer

6 Contributor address; City; State; Zip Code

3574 Pine Trail Denton TX 76208

7 Amount of contribution (\$)

\$100

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Monique Gulyas

Contributor address; City; State; Zip Code

2910 Croydon St Denton TX 76209

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Cathy Snyder

Contributor address; City; State; Zip Code

2005 Pembroke Al Denton TX 76205

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/4
2020

Full name of contributor out-of-state PAC (ID#: _____)

Cheryl Monroe

Contributor address; City; State; Zip Code

2408 Fowler Dr Denton TX 76209

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

~~38~~

4 Date

11/4
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Alison Maguire

6 Contributor address; City; State; Zip Code

2208 Miranda Pl Denton TX 76210

7 Amount of contribution (\$)

\$25

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Susan Seaborn

Contributor address; City; State; Zip Code

900 Ridgcrest Cir Denton TX 76205

Amount of contribution (\$)

\$200

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Brandi Price

Contributor address; City; State; Zip Code

2524 W. oak st Apt 245 Denton TX 76201

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

shaharzade Ebramiki

Contributor address; City; State; Zip Code

1014 Alice St Denton TX 76201

Amount of contribution (\$)

\$10

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

30

4 Date

11/5
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Barbara Hokamp

6 Contributor address; City; State; Zip Code

2316 Crestwood Pl Denton TX
76201

7 Amount of contribution (\$)

\$50

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/5
2020

Full name of contributor out-of-state PAC (ID#: _____)

Rebecca Mason

Contributor address; City; State; Zip Code

2021 Bowling Green St Denton TX
76201

Amount of contribution (\$)

\$25

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor out-of-state PAC (ID#: _____)

Pat Cheek

Contributor address; City; State; Zip Code

1220 Tulane Dr Denton TX 76201

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor out-of-state PAC (ID#: _____)

Elizabeth Dierdorf

Contributor address; City; State; Zip Code

300 W. Ryan Rd Denton TX 76210

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/5
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Betty Wright

6 Contributor address; City; State; Zip Code

2009 Jasmine St Denton TX
76205

7 Amount of contribution (\$)

\$50

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Carol Wickstrom

Contributor address; City; State; Zip Code

804 Smokerise Cir Denton TX
76205

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Linda Wallace

Contributor address; City; State; Zip Code

1200 Ridgecrest Cir Denton TX
76205

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Carol Rowley

Contributor address; City; State; Zip Code

3012 Pennsylvania Ct Denton TX
76205

Amount of contribution (\$)

\$20

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/5
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Cheryl Ellis

6 Contributor address;

City;

State;

Zip Code

1729 Emery

Denton TX
76201

7 Amount of contribution (\$)

\$20

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/5
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Anson Kelly

Contributor address;

City;

State;

Zip Code

2200 Great Bear Ln

Denton TX
76210

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/6
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Celia Williamson

Contributor address;

City;

State;

Zip Code

8001 Zackery Rd

Denton TX
76227

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/6
2020

Full name of contributor

out-of-state PAC (ID#: _____)

James Owen

Contributor address;

City;

State;

Zip Code

2007 Teasley Ln Apt 109

Denton TX
76205

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/6
2020

5 Full name of contributor

Jane Scholz

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

9913 Silver Rock Way Denton TX
76207

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/6
2020

Full name of contributor

Marilyn King

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$10

Contributor address;

City;

State;

Zip Code

3704 Cotten Dr Denton TX
76207

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/6
2020

Full name of contributor

Andrea Eberhard

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

7304 Frost Ln Denton TX 76210

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/6
2020

Full name of contributor

Anjelita Cadena

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

401 Calder Ln Ponder TX 76259

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/6
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Jane Cindric

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

9813 Edmondson Dr

Denton TX
76207

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Jordan Lancaster

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

401 W. Sycamore St Denton TX 76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Marshall Storm

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

3214 Avon Dr Denton TX 76209

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Geoffrey Ussery

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

200 N. Ruddell St Denton TX 76205

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/7
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Margo Ways

6 Contributor address;

City;

State;

Zip Code

8408 Sterling Dr Denton TX 76207

7 Amount of contribution (\$)

\$ 250

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Mary Margaret Dodd

Contributor address;

City;

State;

Zip Code

1107 Greenlee St Denton TX 76201

Amount of contribution (\$)

\$ 50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Gretchen Niendorf

Contributor address;

City;

State;

Zip Code

2020 Mistywood Ln Denton TX 76209

Amount of contribution (\$)

\$ 25

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/8
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Cheri Kennedy

Contributor address;

City;

State;

Zip Code

10409 Murray S. Johnson St Denton TX 76207

Amount of contribution (\$)

\$ 20

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/8
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Carey Curria

6 Contributor address; City; State; Zip Code

1918 Mistywood Ln Denton TX
76209

7 Amount of contribution (\$)

\$200

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/8
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Mariah Hope

Contributor address; City; State; Zip Code

1219 Ector St Denton TX 76201

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/7
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Karen Mc Daniels

Contributor address; City; State; Zip Code

9605 Pinewood Av Denton TX 76207

Amount of contribution (\$)

\$100

ck

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/8
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Tod King

Contributor address; City; State; Zip Code

117 E. Oak St Denton TX 76201

Amount of contribution (\$)

\$60

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/8
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Susan Davis

7 Amount of contribution (\$)

\$50

6 Contributor address;

City;

State;

Zip Code

807 Live Oak St

Denton TX 76209

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/9
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Christie Roden

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

1408 Egan St Denton TX 76201

cc

4:22A

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/9
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Kara Engstrom

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

9308 Orangewood Trl Denton TX
76207

cc

4:22A, 8:30A

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/9
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Jerry Petty

Amount of contribution (\$)

\$150

Contributor address;

City;

State;

Zip Code

320 Evers Way Denton TX 76207

cc

10:22A

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/9
2020

9:40p

5 Full name of contributor

out-of-state PAC (ID#: _____)

Sharon Barnhill

6 Contributor address;

City;

State; Zip Code

3329 Hummingbird Ln Denton TX
76209

7 Amount of contribution (\$)

\$50

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/10
2020

2:46p

Full name of contributor

out-of-state PAC (ID#: _____)

Marilyn King

Contributor address;

City;

State; Zip Code

3704 Cotten Dr Denton TX 76207

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/10
2020

8:21p

Full name of contributor

out-of-state PAC (ID#: _____)

Elinor Lichtenberg

Contributor address;

City;

State; Zip Code

1713 Crescent St Denton TX
76201

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/10
2020

9:12p

Full name of contributor

out-of-state PAC (ID#: _____)

Wilson Yager

Contributor address;

City;

State; Zip Code

1817 Glen Aerie Lane Denton TX
76210

Amount of contribution (\$)

\$50

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

10/31
2020

5 Full name of contributor

Phillip W. Young

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State; Zip Code

PO Box 366 Denton Tx 76202

7 Amount of contribution (\$)

\$150

ck

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

~~10/31~~
11/16
2020

Full name of contributor

Rahna P. Raney

out-of-state PAC (ID#: _____)

Contributor address;

City;

State; Zip Code

3238 Murchison Way Carmichael CA 95608

Amount of contribution (\$)

\$100

ck

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/5
2020

Full name of contributor

Hatice I. Salih

out-of-state PAC (ID#: _____)

Contributor address;

City;

State; Zip Code

300 Northridge St Denton Tx 76201

Amount of contribution (\$)

\$100

ck

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/11
2020

Full name of contributor

Sarah Gamblin

out-of-state PAC (ID#: _____)

Contributor address;

City;

State; Zip Code

2113 Preston Pl Denton Tx 76209

Amount of contribution (\$)

\$40

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/11
2020

8:03A

5 Full name of contributor out-of-state PAC (ID#: _____)

Danna Zoltner

6 Contributor address; City; State; Zip Code

610 Emery St Denton Tx 76201

7 Amount of contribution (\$)

\$100

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/12
2020

10:37A

Full name of contributor out-of-state PAC (ID#: _____)

Karen Skokan

Contributor address; City; State; Zip Code

11009 Ballentine St Denton Tx 76207

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/12
2020

11:07A

Full name of contributor out-of-state PAC (ID#: _____)

Bonnie Friedman

Contributor address; City; State; Zip Code

1914 W. Oak St Denton Tx 76201

Amount of contribution (\$)

\$150

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/12
2020

6p

Full name of contributor out-of-state PAC (ID#: _____)

Ashley Bender

Contributor address; City; State; Zip Code

606 Northridge St Denton Tx 76201

Amount of contribution (\$)

\$25

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/12
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Victoria Hodge

7 Amount of contribution (\$)

\$25

6 Contributor address;

City;

State;

Zip Code

1823 W. Bell Ave Denton Tx 76209

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/13
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Jerrie Allen

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

2545 Natchez Trace Denton Tx 76210

ck

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Richard or Annette wheldon

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

520 Roberts Denton Tx 76209

ck

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Linda T. Creagh

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

2521 E. Windson Dr Denton Tx 76209

ck

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/18
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Erin M O'Toole

7 Amount of contribution (\$)

\$ 100

6 Contributor address; City; State; Zip Code

1831 Panhandle St Denton, TX 76201

CK

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/18
2020

Full name of contributor out-of-state PAC (ID#: _____)

Patti R. Watts

Amount of contribution (\$)

\$ 200

Contributor address; City; State; Zip Code

9804 Stone wood Dr Denton TX 76207

CK

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor out-of-state PAC (ID#: _____)

Nelda H. Evarts or William J. Evarts

Amount of contribution (\$)

\$ 50

Contributor address; City; State; Zip Code

1917 Canyon Ct Denton TX 76205

CK

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor out-of-state PAC (ID#: _____)

Ann G. Barnett Living Trust

Amount of contribution (\$)

\$ 25

Contributor address; City; State; Zip Code

3109 Broken Bow St Denton TX 76209

CK

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/13
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Hildegard Rainbow

7 Amount of contribution (\$)

\$50

6 Contributor address;

City;

State; Zip Code

1101 Vista Verde Rd

Denton Tx

76210

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/13
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Yvonne Giroux

Amount of contribution (\$)

\$50

Contributor address;

City;

State; Zip Code

3520 Camino Real Trail

Denton Tx

76208

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/13
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Pamela Hulsey

Amount of contribution (\$)

\$100

Contributor address;

City;

State; Zip Code

1401 Stratford Ln

Denton Tx

76209

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Lynn McCreary

Amount of contribution (\$)

\$50

Contributor address;

City;

State; Zip Code

1112 Ector St

Denton Tx 76201

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/14
2020

5 Full name of contributor

Karen DeVinney

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

~~2020~~ 2:15 1820 W. Oak St

Denton Tx 76201

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/14
2020

Full name of contributor

Margo Waya

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$1000

Contributor address;

City;

State;

Zip Code

1:38p 8408 Sterling Dr

Denton, TX 76207

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14
2020

Full name of contributor

Caleb Norris

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$10

Contributor address;

City;

State;

Zip Code

3:07p 120 W. Oak St Apt A

Denton TX
76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14
2020

Full name of contributor

Charles Rives

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$25

Contributor address;

City;

State;

Zip Code

6:15p 2006 Southridge Dr

Denton TX 76205

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/14
2020

5 Full name of contributor

Jonathan Griffin

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50

6 Contributor address;

1812 Emerson Ln

City;

State; Zip Code

Denton TX

76209

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/14
2020

Full name of contributor

Ann MacMilkn

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20

Contributor address;

1929 Parkside Dr

City;

State; Zip Code

Denton TX 76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14
2020

Full name of contributor

Kerol Harrod

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20

Contributor address;

2319 Robinhood Ln

City;

State; Zip Code

Denton TX

76209

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/15
2020

Full name of contributor

Richard Rosprim

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$150

Contributor address;

10504 Murray S. Johnson St

City;

State; Zip Code

Denton TX

76207

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/15
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

Jaqueline Foertsch

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State; Zip Code

1401 Egan St

Denton TX
76201

cc

11:23A

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/15
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Richard Simms

Amount of contribution (\$)

\$150

Contributor address;

City;

State; Zip Code

2249 Stonegate Dr

Denton TX
76205

cc

1 pm

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/15
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Victoria Baker

Amount of contribution (\$)

\$100

Contributor address;

City;

State; Zip Code

9821 Callaway Ct

Denton TX
76207

cc

1:02p

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/15
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Sigrid Glenn

Amount of contribution (\$)

\$100

Contributor address;

City;

State; Zip Code

1505 Valley Creek Rd

Denton TX
76205

cc

2:13p

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/16
2020

5 Full name of contributor

out-of-state PAC (ID#: _____)

William Moen

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

303 M. Mosa Dr

Denton Tx 76201

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/16
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Ashley Thorpe

Amount of contribution (\$)

\$10

Contributor address;

City;

State;

Zip Code

1409 Santos Dr

Denton Tx
76207

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/17
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Patty Park

Amount of contribution (\$)

\$250

Contributor address;

City;

State;

Zip Code

2040 W. Oak St

Denton Tx 76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/17
2020

Full name of contributor

out-of-state PAC (ID#: _____)

Amy Morgan

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

1928 Parkside Dr

Denton Tx
76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/17
2020

5 Full name of contributor

Mike Gregory

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$ 50

6 Contributor address;

City;

State; Zip Code

4524 Coyote Point

Denton TX
76208

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/16
2020

Full name of contributor

Keith Shelton

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 20

Contributor address;

City;

State; Zip Code

2500 Hinkle Dr Apt 125 Denton TX
76201

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor

Leshie Finger

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 10

Contributor address;

City;

State; Zip Code

1904 Camellia St Denton TX 76205

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/18
2020

Full name of contributor

Mary Harris

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$ 75

Contributor address;

City;

State; Zip Code

2509 Shenandoah Trail Denton TX
76210

cc

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/18
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Barbara Stippel

7 Amount of contribution (\$)

\$100

6 Contributor address; City; State; Zip Code

101 Inca Rd Denton TX 76209
Barbara Stippel

cc

3:52p

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/19
2020

Full name of contributor out-of-state PAC (ID#: _____)

Rody Duvon

Amount of contribution (\$)

\$50

Contributor address; City; State; Zip Code

1710 Sam Bass Blvd Apt 1924 Denton TX
76205

cc

5:55A

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19
2020

Full name of contributor out-of-state PAC (ID#: _____)

Rody Duvon

Amount of contribution (\$)

\$50

Contributor address; City; State; Zip Code

1710 Sam Bass Blvd Apt 1924 Denton TX
76205

cc

6:04A

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19
2020

Full name of contributor out-of-state PAC (ID#: _____)

Olivia Walker

Amount of contribution (\$)

\$150

Contributor address; City; State; Zip Code

3100 Montecito Dr Denton TX 76205

cc

9:50A

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/19
2020

5 Full name of contributor

Janice Bigby

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$20

6 Contributor address;

City;

State;

Zip Code

1105 Sandpiper Dr Denton TX 76205

CC

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/25
2020

Full name of contributor

Joanne E. Nicolle

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$30

Contributor address;

City;

State;

Zip Code

1206 Thomas St Denton TX 76201

CK

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/25
2020

Full name of contributor

Patricia S. White

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$20

Contributor address;

City;

State;

Zip Code

2820 Wind River Ln Apt 105
Denton TX 76210

CK

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/25
2020

Full name of contributor

Sue W. Gray

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$15

Contributor address;

City;

State;

Zip Code

2006 Lee Dr Denton TX 76209

CK

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/20
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Linda Wallace

7 Amount of contribution (\$)

\$50

6 Contributor address; City; State; Zip Code

1200 Ridgecrest Cir Denton Tx 76205

cc

8:36A

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/20
2020

Full name of contributor out-of-state PAC (ID#: _____)

Ben Miller

Amount of contribution (\$)

\$100

Contributor address; City; State; Zip Code

PO Box 1135 Argyle Tx 76226

cc

4:35P

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20
2020

Full name of contributor out-of-state PAC (ID#: _____)

Melvin Achterberg

Amount of contribution (\$)

\$50

Contributor address; City; State; Zip Code

2129 Pembroke Pl Denton Tx 76205

cc

6:10P

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20
2020

Full name of contributor out-of-state PAC (ID#: _____)

Tom B. Slade

Amount of contribution (\$)

\$50

Contributor address; City; State; Zip Code

~~2143~~ Stonegate Ar Denton Tx 76205

cc

7:27P

Principal occupation / Job title (See Instructions)

Employer (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 POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

30

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 Date

11/20
2020

5 Full name of contributor out-of-state PAC (ID#: _____)

Catherine Lustgarten

6 Contributor address; City; State; Zip Code

11809 Southerland Dr Denton, TX
76207

7 Amount of contribution (\$)

\$150

cc

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/22
2020

Full name of contributor out-of-state PAC (ID#: _____)

Lucas Holl

Contributor address; City; State; Zip Code

815 Crestoak Pl Denton TX 76209

Amount of contribution (\$)

\$47

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/22
2020

Full name of contributor out-of-state PAC (ID#: _____)

Scott Andrews

Contributor address; City; State; Zip Code

3033 Country Club Rd Denton TX
76210

Amount of contribution (\$)

\$100

cc

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Paul D. Meltzer

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan

7 Name of lender out-of-state PAC (ID#: _____)

Paul D. Meltzer

9 Loan Amount (\$)

\$15,000

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code

1914^W Oak St Denton TX 76201

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

Retired

13 Employer (See Instructions)

14 Description of Collateral

none

15

Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender 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

none

Check if personal funds were deposited into political account (See Instructions)

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

not applicable

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
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4 Date 10/25/2020	5 Payee name Spectrum Reach
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6 Amount (\$) \$1095	7 Payee address; Charlotte, NC 28078	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description TV ads week 4
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/25/2020	Payee name Spectrum Reach
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Amount (\$) \$730	Payee address; Charlotte, NC 28078	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description TV ads week 5
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date 10/26/2020	Payee name Hunter Digital Insights Consulting
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Amount (\$) 122.71	Payee address; 915 Coit St Denton TX 76201	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Facebook ads 10/19 12AM TO 10/24 11:59 PM
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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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)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
---------------------------------	---------------------------------	---------------------------------------

4 Date 10/26/2020	5 Payee name Denton Record Chronicle
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6 Amount (\$) 223.97	7 Payee address; 3555 Duchess Denton TX	City: TX	State:	Zip Code 76205
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description News ads
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/10/20	Payee name Duotone printing
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Amount (\$) \$4461.44	Payee address; 9540 Garland Rd STE 381#245 Dallas TX	City: TX	State:	Zip Code 75218
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Postcard postage funds
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date 11/11/2020	Payee name Fast Signs
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Amount (\$) \$ 811.88	Payee address; 2119 Sadav Ct Denton TX 76210	City: TX	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Large signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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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)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
4 Date 11/11/2020	5 Payee name YT Ad Service	
6 Amount (\$) \$500	7 Payee address; City; State; Zip Code 2340 E. Trinity Mills Rd suite 300 Carrollton Tx 75006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Youtube commercial
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2020	Payee name Mike Weaver	
Amount (\$) \$34.39	Payee address; City; State; Zip Code 515 Ranchwood Dr Justin TX 76247	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Shipping expense	Description Reimbursement for FedEx delivery of check to Dvotone
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2020	Payee name Spectrum Reach	
Amount (\$) \$272	Payee address; City; State; Zip Code Charlotte NC 28078	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description TV ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living 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)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8		2 FILER NAME Paul D. Meltzer		3 Filer ID (Ethics Commission Filers)	
4 Date 11/13/2020		5 Payee name Duotone Printing			
6 Amount (\$) \$1662.40		7 Payee address; City; State; Zip Code 9540 Garland Rd Ste 381 #245 Dallas Tx 75218			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Postage for postcards #2		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/13/2020		Payee name Duotone Printing			
Amount (\$) \$1592.50		Payee address; City; State; Zip Code 9540 Garland Rd Ste 381 #245 Dallas Tx 75218			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Postage for postcards #3		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
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4 Date 11/16/2020	5 Payee name Spectrum Reach
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6 Amount (\$) \$119	7 Payee address; Charlotte, NC	City; 28078	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description TV ads
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/16/2020	Payee name One Source Promotions
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Amount (\$) \$642.86	Payee address; 2009 Greenstone Trail Carrollton Tx	City; 75010	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Yard signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/18/2020	Payee name Ddotone Printing
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Amount (\$) \$1945	Payee address; 9540 Garland Rd Suite 381 #245	City; Dallas Tx	State;	Zip Code 75218
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Print and mail/postcards #1
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8		2 FILER NAME Paul D. Meltzer		3 Filer ID (Ethics Commission Filers)	
4 Date 11/19/2020		5 Payee name Denton Record Chronicle			
6 Amount (\$) \$350		7 Payee address; PO Box 369 Denton Tx 76202		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description News Ads		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/19/2020		Payee name Denton Record Chronicle			
Amount (\$) \$704.86		Payee address; PO Box 369 Denton, Tx 76202		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description News Ads		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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	
Date 11/20/2020		Payee name Orbit Press			
Amount (\$) \$489.29		Payee address; 1811 N. ELM ST Denton Tx 76201		City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense		Description Door hanger/ Poll worker cards		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
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4 Date 11/20/2020	5 Payee name Meisner creative
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6 Amount (\$) \$750	7 Payee address: 1700 Cordero Ct Denton Tx 76210	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Video shots
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/20/2020	Payee name Duotone Printing
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Amount (\$) \$1204.68	Payee address: 9540 Garland Rd Ste 381 #245 Dallas Tx 75218	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Print and mail postcards #2
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/16/2020	Payee name Drop Cowboy
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Amount (\$) \$250	Payee address: 30 N- Goid St Ste 2890 Sheridan WY 82801	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description telecommunications phone advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
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4 Date 11/23/2020	5 Payee name Duotone Printing
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6 Amount (\$) \$645	7 Payee address; 9540 Garland Rd Ste 321 #245	City: Dallas	State: TX	Zip Code 75218
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Print and mail postcards
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/24 2020	Payee name Denton Record Chronicle
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Amount (\$) \$115.50	Payee address; Po Box 369 Denton Tx	City: 76202	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description News Ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/4/2020 to 11/23/2020	Payee name Square
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Amount (\$) \$255.68	Payee address; N/A	City:	State:	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Credit card donation fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Paul D. Meltzer</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11/25/2020</i>	5 Payee name <i>Duotone Printing</i>
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6 Amount (\$) <i>\$ 240</i>	7 Payee address; <i>9540 Garland Rd ste 381#245</i>	City; <i>Dallas</i>	State; <i>Tx</i>	Zip Code <i>75218</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Printing expense</i>	(b) Description <i>Poll handouts</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Paul D. Meltzer	3 Filer ID (Ethics Commission Filers)
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4 Date 10/26/2020	6 Payee name Denton Record Chronicle
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6 Amount (\$) 356.03 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 3555 Duchess Denton Tx City: State: Zip Code 76205
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description News ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/11/2020	Payee name office Max
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Amount (\$) 460 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; Denton Tx City: State: Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Envelopes
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/11/2020	Payee name United States Postal Service
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Amount (\$) \$148.50 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; N/A City: State: Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED