

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	2 Total pages filed: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Bonnie	MI
	NICKNAME	LAST Potraza	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3510 Chellen Drive Farmers Branch, TX 75234		ZIP CODE
	Date Received		
	Date Hand-Delivered or Date Postmarked		
	Receipt #	Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Clave	MI
	NICKNAME	LAST Connally	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3612 Court dale		APT / SUITE #; CITY; STATE; ZIP CODE Farmers Branch, TX 75234
	AREA CODE	PHONE NUMBER	EXTENSION
7 CAMPAIGN TREASURER PHONE	972 - 989 - 1242		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input 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 \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 02/11/2019	THROUGH	Month Day Year 03/25/2019
10 ELECTION	ELECTION DATE Month Day Year 05/04/2019		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Farmers Branch City Council District 4	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2
2 of 14

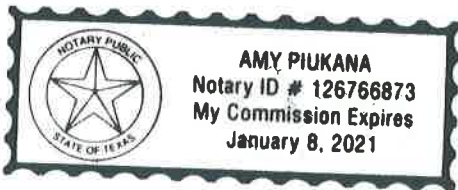
13 C / OH NAME Potraza, Bonnie	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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 TYPE	COMMITTEE NAME	COMMITTEE ADDRESS
	COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	387.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	20,509.28
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	138.05
	4.	TOTAL POLITICAL EXPENDITURES	\$	4,357.17
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	16,401.06
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	500.00

17 AFFIDAVIT

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



[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bonnie Potraza, this the 4 day of April, 2019, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering
Amy Piukana Printed name of officer administering
City Secretary Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Potraza, Bonnie		19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,187.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 322.28
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 500.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,742.17
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 615.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES 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: Sch: 1/3 Rpt: 4/14
2 FILER NAME Potraza, Bonnie		3 Filer ID
4 Date 02/15/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Dawn	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2710 Raintree Carrollton, TX 75006		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cope, Gail	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 3140 Brookhollow Dr Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Vega, Benny	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 3322 Pine Tree Circle Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dingman, Carol	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 13223 Glad Acres Drive Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3117 Jaclamo Flower Mound, TX 75022		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/14
2 FILER NAME Potraza, Bonnie		3 Filer ID
4 Date 02/20/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lotridge, Judith	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 1624 Sutters Mill Drive Carrollton, TX 75007		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivo, Andrew	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1622 E Belt Link Rd STE 100 Carrollton, TX 75006		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rains, Larry	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3424 Rockmartin Dr Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Kimberly	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 3464 Rockmartin Dr Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roemer, Greg	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1519 Meeting Street Southlake, TX 76092		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/14
2 FILER NAME Potraza, Bonnie		3 Filer ID
4 Date 02/19/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Amy	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 3607 Pine Valley Drive Farmers Branch, TX 75234		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Amy	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3607 Pine Valley Drive Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Chris	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 13229 Cedar Lane Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/19/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villafranca, Elizabeth	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 3130 Brookhollow Dr Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Charles	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3431 Janlyn Ln Farmers Branch, TX 75234		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/14	
2 FILER NAME Potraza, Bonnie		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/20/2019	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Jennifer	8 Amount of contribution (\$) \$210.11	9 In-kind contribution description Campaign Launch Party contribution 3 Nations
7 Contributor address; City; State; Zip Code 3319 Becket Ridge Ct Farmers Branch, TX 75244		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braswell, Alan	Amount of contribution (\$) \$100.00	In-kind contribution description Campaign Launch Party contribution 3 Nations
Contributor address; City; State; Zip Code 3818 wooded creek Farmers Branch, TX 75244		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potraza, Andrew	Amount of contribution (\$) \$12.17	In-kind contribution description Campaign domain - votebonnie.com - GoDaddy.com Order # 1428067592
Contributor address; City; State; Zip Code 3510 Chellen Drive Farmers Branch, TX 75234		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 8/14

2 FILER NAME
Potraza, Bonnie

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
02/11/2019

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

9 Loan Amount (\$)
\$500.00

6 Is lender a
financial
institution?
No

8 Lender address; City; State; Zip Code
3510 Chellen Drive

Farmers Branch, TX 75234

10 Interest Rate

11 Maturity Date
05/04/2019

12 Principal occupation / Job title (See Instructions)

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 (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES 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: Sch: 1/5 Rpt: 9/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
4 Date 02/22/2019	5 Payee name Alphagraphics	
6 Amount (\$) \$73.57	7 Payee address; City; State; Zip Code 3001 Knox St #102 Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Push Cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2019	Payee name Alphagraphics	
Amount (\$) \$32.48	Payee address; City; State; Zip Code 3001 Knox St #102 Dallas, TX 75205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design for revised artwork
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2019	Payee name Alphagraphics	
Amount (\$) \$497.85	Payee address; City; State; Zip Code 3001 Knox St #102 Dallas, TX 75205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 500 Door Hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 2/5 Rpt: 10/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
4 Date 03/15/2019	5 Payee name Alphagraphics	
6 Amount (\$) \$163.67	7 Payee address; City; State; Zip Code 3001 Knox St #102 Dallas, TX 75205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 500 Business Cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2019	Payee name Alphagraphics	
Amount (\$) \$249.60	Payee address; City; State; Zip Code 3001 Knox St #102 Dallas, TX 75205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 250 Push Cards, and 750 Post Cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2019	Payee name Costco	
Amount (\$) \$251.33	Payee address; City; State; Zip Code 8055 Churchill Way Dallas, TX 75251	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and drinks for volunteer training event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 3/5 Rpt: 11/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
4 Date 03/07/2019	5 Payee name Edwards and Patterson Sign	
6 Amount (\$) \$483.41	7 Payee address; City; State; Zip Code 203 S Belt Line Rd Irving, TX 75060	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Large Campaign signs 4x4
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2019	Payee name Hardman, Jennifer	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 2619 Marietta Farmes Branch, TX 75234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Events - Cookies with campaign logos for events
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/10/2019	Payee name Hardman, Jennifer	
Amount (\$) \$105.00	Payee address; City; State; Zip Code 2619 Marietta Farmes Branch, TX 75234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Events - Cookies with campaign logos for events
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 4/5 Rpt: 12/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
4 Date 03/22/2019	5 Payee name Home Depot	
6 Amount (\$) \$144.34	7 Payee address; City; State; Zip Code 11468 Grissom Ln Dallas, TX 75229	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Large campaign sign mounting hardware
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2019	Payee name Leaven Strategies	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 7425 La Vista Dr Dallas, TX 75214	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2019	Payee name TX Democratic Party	
Amount (\$) \$145.00	Payee address; City; State; Zip Code 1106 Lavaca St, #100 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Access Network List
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 5/5 Rpt: 13/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
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4 Date 03/16/2019	5 Payee name USPS
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6 Amount (\$) \$259.00	7 Payee address; City; State; Zip Code 13904 Josey Ln Farmers Branch, TX 75234
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postcard stamps
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/12/2019	Payee name Ver-Mac Industries
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Amount (\$) \$153.87	Payee address; City; State; Zip Code 100 Progress Drive Mount Vernon, OH 43050
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign Stakes
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/1 Rpt: 14/14	2 FILER NAME Potraza, Bonnie	3 Filer ID
4 Date 02/13/2019	5 Payee name AGE Graphics	
6 Amount (\$) \$615.00	7 Payee address; City; State; Zip Code 678 Collins Rd Little Hocking, OH 45742	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended	8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense
		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Yard Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held