

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE)

APT / SUITE #

CITY

STATE

ZIP CODE

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☐ July 15

☒ 8th day before election

☐ Exceeded Modified
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

03

28

23

THROUGH

Month

Day

Year

04

26

23

11 ELECTION

ELECTION DATE

Month

Day

Year

5

6

23

ELECTION TYPE

Primary

Runoff

Other

Description

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Arlington ISD Place 7

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Bridgett Davis Campaign

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)

\$

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

\$ *10,814.71*

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *254.49*

CONTRIBUTION
BALANCE

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

\$ *10,560.22*

OUTSTANDING
LOAN TOTALS

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

\$

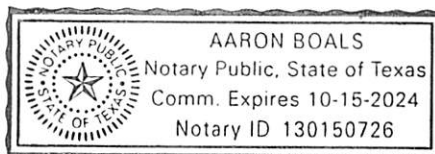
18 SIGNATURE

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.

Bridgett Davis
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Bridgett Davis* this the *28* day of *April*

23, to certify which, witness my hand and seal of office.

Aaron Boals

Signature of officer administering oath

Aaron Boals

Printed name of officer administering oath

Paralegal

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

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$

2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. SCHEDULE E: LOANS

\$

5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/23	5 Full name of contributor Betty Louise Moore out-of-state PAC (ID# _____) 6 Contributor address; City; State; Zip Code 76123	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Un Employed		9 Employer (See Instructions)
Date 3/30/23	Full name of contributor Barbara Hayman out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 3/30/23	Full name of contributor Maryellen Hicks out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code Fort Worth 76119	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 3/30/23	Full name of contributor David Godsey out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code Mansfield	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Godsey - Martin, PC

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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/23	5 Full name of contributor Cynthia Golden out-of-state PAC (ID# _____) 6 Contributor address; City: State: Zip Code Avl TX 76016	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) USAP
Date 4/1/23	Full name of contributor Cedric Powell out-of-state PAC (ID# _____) Contributor address; City: State: Zip Code MO 63074	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 4/1/23	Full name of contributor Jane Hope Hamilton out-of-state PAC (ID# _____) Contributor address; City: State: Zip Code Dallas 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 4/2/23	Full name of contributor Eric Neal out-of-state PAC (ID# _____) Contributor address; City: State: Zip Code 76002	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Fire Chief		Employer (See Instructions) Balch Springs

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/23	5 Full name of contributor James Davis out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code [REDACTED] Arlington 76016		
8 Principal occupation / Job title (See Instructions) Examiner		9 Employer (See Instructions) U.S. Treasury
Date 4/2/23	Full name of contributor Deborah Reed out-of-state PAC (ID# _____)	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code [REDACTED] Haltom City		
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Core Logic
Date 4/2/23	Full name of contributor Samiyah Middleton out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code [REDACTED] Ari 76002		
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Mannsfeld ISD
Date 4/2/23	Full name of contributor Denise Williams out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code [REDACTED] Ari 76005		W
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Kubota

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME **Bridgett Davis**

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

4/2/23

Tai Pullam

6 Contributor address;

City;

State;

Zip Code

Denton 76210

25.00

8 Principal occupation / Job title (See Instructions)

Manger

9 Employer (See Instructions)

Aetna

Date

Full name of contributor

out-of-state PAC (ID# _____)

Amount of contribution (\$)

4/2/23

Tanna Brooks

Contributor address;

City;

State;

Zip Code

Fort Worth 76140

10.00

Principal occupation / Job title (See Instructions)

Unemployed

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID# _____)

Amount of contribution (\$)

4/2/23

Allison Knott

Contributor address;

City;

State;

Zip Code

Burleson 76028

100.00

Principal occupation / Job title (See Instructions)

Educator

Employer (See Instructions)

Tarrant County College

Date

Full name of contributor

out-of-state PAC (ID# _____)

Amount of contribution (\$)

4/2/23

Valencia Grissett

Contributor address;

City;

State;

Zip Code

Arlington, 76010

50.00

Principal occupation / Job title (See Instructions)

Supervisor

Employer (See Instructions)

mcdonalds

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/23	5 Full name of contributor Tammy Baxter out-of-state PAC (ID# _____) 6 Contributor address: _____ City: Arlington State: _____ Zip Code: 76017	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Treasury Supervisor		9 Employer (See Instructions) City of Fort Worth
Date 4/2/23	Full name of contributor Monique Winfree out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: Crowley 76036	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Assistant Manager		Employer (See Instructions) Burleson Pawn
Date 4/2/23	Full name of contributor Deborah Peoples out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: 76103	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 4/6/23	Full name of contributor Nita Haliburton out-of-state PAC (ID# _____) Contributor address: _____ City: _____ State: _____ Zip Code: Arl 76018	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Career Advisor		Employer (See Instructions) TCLSE

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/23	5 Full name of contributor Myra McKenzie out-of-state PAC (ID# _____) 6 Contributor address; City; State; Zip Code [REDACTED] Rogers AR 72756	7 Amount of contribution (\$) 35.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Walmart
Date 4/6/23	Full name of contributor Charlotte Adams out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code [REDACTED] Bulbrod 75757	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 4/6/23	Full name of contributor Blake Moorman out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code [REDACTED] Fort Worth 76113	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) City of Fort Worth
Date 4/6/23	Full name of contributor Pamela Harmon out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code [REDACTED] 76006	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bridgett Davis

3 Filer ID (Ethics Commission Filers)

4 Date

4/7/23

5 Full name of contributor

Tyelia Codner

out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

250.00

6 Contributor address:

City:

State:

Zip Code

FL 33579

8 Principal occupation / Job title (See Instructions)

Human Resources

9 Employer (See Instructions)

Quest Inc

Date

4/7/23

Full name of contributor

Jackie Farns

out-of-state PAC (ID# _____)

Amount of contribution (\$)

20.00

Contributor address:

City:

State:

Zip Code

Borleson 76028

Principal occupation / Job title (See Instructions)

Manager

Employer (See Instructions)

C2

Date

4/7/23

Full name of contributor

James Hawthorne

out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

Contributor address:

City:

State:

Zip Code

Grand Prairie 75051

Principal occupation / Job title (See Instructions)

Police Chief

Employer (See Instructions)

CHISD

Date

4/8/23

Full name of contributor

Erayne Hill

out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

Contributor address:

City:

State:

Zip Code

FW 76244

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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <i>Bridgett Davis</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/10/23</i>	5 Full name of contributor <i>Curtis Petties</i> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code [Redacted] <i>76126</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>4/10/23</i>	Full name of contributor <i>Teal Yvonne</i> out-of-state PAC (ID# _____)	Amount of contribution (\$) <i>1000.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>IL 601822</i>		
Principal occupation / Job title (See Instructions) <i>Nurse</i>		Employer (See Instructions) <i>OSF Healthcare</i>
Date <i>4/10/23</i>	Full name of contributor <i>Cassandra Smith</i> out-of-state PAC (ID# _____)	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>Ar1 76001</i>		
Principal occupation / Job title (See Instructions) <i>Administrator</i>		Employer (See Instructions) <i>UTA</i>
Date <i>4/10/23</i>	Full name of contributor <i>Anthony Criss</i> out-of-state PAC (ID# _____)	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code [Redacted] <i>76016</i>		W
Principal occupation / Job title (See Instructions) <i>Unemployed</i>		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME Bridgett Davis

3 Filer ID (Ethics Commission Filers)

4 Date
4/10/23

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

7 Amount of contribution (\$)

6 Contributor address; City: State: Zip Code
[REDACTED] Ariz TX 76017

100.00

8 Principal occupation / Job title (See Instructions)
Team Leader

9 Employer (See Instructions)
General Motors

Date

4/11/23

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

Amount of contribution (\$)

Contributor address; City: State: Zip Code
[REDACTED] Ariz 76002

100.00

Principal occupation / Job title (See Instructions)
Unemployed

Employer (See Instructions)

Date

4/12/23

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

Amount of contribution (\$)

Contributor address; City: State: Zip Code
[REDACTED] FL 33812

500.00

Principal occupation / Job title (See Instructions)
Human Resources

Employer (See Instructions)
Publix

Date

4/12/23

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

Amount of contribution (\$)

Contributor address; City: State: Zip Code
[REDACTED] Montgomery AL

50.00

Principal occupation / Job title (See Instructions)
Unemployed

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/12/23	5 Full name of contributor out-of-state PAC (ID# _____) Arlene Barnett	7 Amount of contribution (\$) 500.00
6 Contributor address; City: State: Zip Code [Redacted] 76109		
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions)
Date 4/12/23	Full name of contributor out-of-state PAC (ID# _____) Cassandra Harris	Amount of contribution (\$) 100.00
Contributor address; City: State: Zip Code [Redacted] Edward Prairie 75521		
Principal occupation / Job title (See Instructions) Federal		Employer (See Instructions) DCMA
Date 4/15/21	Full name of contributor out-of-state PAC (ID# _____) Brigid Roberson	Amount of contribution (\$) 100.00
Contributor address; City: State: Zip Code [Redacted] Richmond 77407		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/15/21	Full name of contributor out-of-state PAC (ID# _____) Rose Straughter	Amount of contribution (\$) 100.00
Contributor address; City: State: Zip Code [Redacted] Jackson MS 39206		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bridgett Davis

3 Filer ID (Ethics Commission Filers)

4 Date

4/16/23

5 Full name of contributor

Eric Iawe

out-of-state PAC (ID#)

7 Amount of contribution (\$)

75.00

6 Contributor address;

City;

State;

Zip Code

Fortworth 76120

8 Principal occupation / Job title (See Instructions)

Systems Engineer

9 Employer (See Instructions)

Lockheed Martin

Date

4/21/23

Full name of contributor

Roderick Miles

out-of-state PAC (ID#)

Amount of contribution (\$)

150.00

Contributor address;

City;

State;

Zip Code

Fortworth 76123

Principal occupation / Job title (See Instructions)

Administrator

Employer (See Instructions)

Tarrant county

Date

4/21/23

Full name of contributor

Edna Morgan

out-of-state PAC (ID#)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

Arlington 76010

Principal occupation / Job title (See Instructions)

Legal Assistant

Employer (See Instructions)

Tarrant H Gray

Date

4/24/23

Full name of contributor

Kenneth Sanders

out-of-state PAC (ID#)

Amount of contribution (\$)

125.00

Contributor address;

City;

State;

Zip Code

Ar1 76002

Principal occupation / Job title (See Instructions)

Judge

Employer (See Instructions)

Tarrant County

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Bridgett Davis

3 Filer ID (Ethics Commission Filers)

4 Date

4/26/23

5 Full name of contributor

Brenda Williams

out-of-state PAC (ID#)

7 Amount of contribution (\$)

100.00

6 Contributor address;

City;

State; Zip Code

MS 39212

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/26/23

Full name of contributor

Helen Giddings

out-of-state PAC (ID#)

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Dallas 75214

Principal occupation / Job title (See Instructions)

Restaurant owner

Employer (See Instructions)

Date

4/26/23

Full name of contributor

Nancy Barrett

out-of-state PAC (ID#)

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Am 76016

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

4/26/23

Full name of contributor

Theo Tanner

out-of-state PAC (ID#)

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Rowlett, TX

Principal occupation / Job title (See Instructions)

Teacher

Employer (See Instructions)

Garland ISD

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1
2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)
4 Date 4/26/23	5 Full name of contributor out-of-state PAC (ID# _____) Tina Newton	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code [Redacted] Ar1 76107		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 4/26/23	Full name of contributor out-of-state PAC (ID# _____) Roland Parrish	Amount of contribution (\$) 750.00
Contributor address; City; State; Zip Code [Redacted] Dallas, Tx		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self
Date 4/26/23	Full name of contributor out-of-state PAC (ID# _____) Anthony and Arminda Grissett	Amount of contribution (\$) 1250.00
Contributor address; City; State; Zip Code [Redacted] 76016		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date	Full name of contributor out-of-state PAC (ID# _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2:	
2 FILER NAME <i>Bridgett Davis</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>3/29/23</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Paige Payne</i>	8 Amount of Contribution \$ <i>1533.35</i>	9 In-kind contribution description <i>signs</i>
7 Contributor address; City; State; Zip Code		Check if travel outside of Texas Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Assistant</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Law offices of Jim Ross</i>	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Printing Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services		Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2		2 FILER NAME Bridgett Davis		3 Filer ID (Ethics Commission Filers)	
4 Date 4/1/23		5 Payee name Actblue			
6 Amount (\$) 23.63		7 Payee address; City, State, Zip Code PO Box 44146 Somerville, MA 02144-6031			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Processing fees		
	(c) Check if travel outside of Texas. Complete Schedule T				
	Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/4/23		Payee name Ruby Faye Woodridge			
Amount (\$) 198.00		Payee address; City, State, Zip Code 4101 Viridian Village Dr. Arl, TX 76005			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description steel T-Post		
	Check if travel outside of Texas. Complete Schedule T				
	Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/4/23		Payee name Foster's Ace Hardware			
Amount (\$) 32.86		Payee address; City, State, Zip Code 4400 Little Road Arl, TX 76016			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description		
	Check if travel outside of Texas. Complete Schedule T				
	Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED