



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)
N/A

2 Total pages filed:
1 of 41

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	Jason					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
	Ballmann					
5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	Date Hand-delivered or Date Postmarked
	5204 Lovell Ave Fort Worth, TX 76107					
6 CAMPAIGN TREASURER NAME	AREA CODE	PHONE NUMBER	EXTENSION	Receipt #	Amount \$	Date Processed
	()					
7 CAMPAIGN TREASURER ADDRESS	MS / MRS / MR	FIRST	MI	Date Imaged		
	Isabelle					
8 CAMPAIGN TREASURER PHONE	NICKNAME	LAST	SUFFIX	STREET ADDRESS (NO PO BOX PLEASE);		
	Young					
9 REPORT TYPE	3704 Astoria Dr.		Arlington	TX	76013	STATE; ZIP CODE
	(Residence or Business)					
10 PERIOD COVERED	AREA CODE	PHONE NUMBER	EXTENSION	ELECTION DATE		
	()	817.213.6286				
11 ELECTION	<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)			ELECTION TYPE		
	<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)					
12 OFFICE	Month	Day	Year	Month	Day	Year
	01	26	2025	THROUGH	03	24 / 2025
13 OFFICE SOUGHT (if known)	Month	Day	Year	City Councilmember, District 3, Fort Worth, Tx		
	05	03	2025			
14 NOTICE FROM POLITICAL COMMITTEE(S)	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description			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 checked="" type="checkbox"/> General <input type="checkbox"/> Special					
<input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME				
		COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME **Jason Ballmann** 16 Filer ID (Ethics Commission Filers) **N/A**

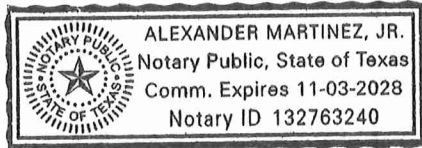
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$11438.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$8409.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$1147.94
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.

[Handwritten Signature]
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



THE UPS STORE #7512
2300 W 7TH ST. #108
FORT WORTH TX 76107
682-224-5277

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Jason E Ballmann this the 2 day of April,

20 25, to certify which, witness my hand and seal of office.

Amelina J Signature of officer administering oath
Alexander Martinez Printed name of officer administering oath
TX State Notary 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 Jason Ballmann		20 Filer ID (Ethics Commission Filers) N/A
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
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

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: 1 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 1/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jake Davis	7 Amount of contribution (\$) 5.00
6 Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth TX 76107,		
8 Principal occupation / Job title (See Instructions) Field Director		9 Employer (See Instructions) TDP
Date 1/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Rojas	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6321 S Chesterfield Dr Fort Worth, TX 76179		
Principal occupation / Job title (See Instructions) District Director		Employer (See Instructions) City of Fort Worth
Date 1/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Benthien	Amount of contribution (\$) 94.00
Contributor address; City; State; Zip Code 3009 Hillcrest Dr Los Angeles, CA 90016		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) University of Southern California
Date 1/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Chance	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 8600 Running River Ct Fort Worth, TX 76131		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Sarah Chance
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 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 1/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Watson <hr/> 6 Contributor address; City; State; Zip Code 1905 Knoxville Dr Bedford, TX 76022	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Sr. Director		9 Employer (See Instructions) Real Page Inc
Date 1/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Echols <hr/> Contributor address; City; State; Zip Code 315 Eighth Ave Apt 10 Brooklyn, NY 11215	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Nonprofit manager		Employer (See Instructions) Inclusiv
Date 1/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Candace Morrow <hr/> Contributor address; City; State; Zip Code 11500 Lago Vista E Apt 1135 Farmers Branch, TX 75234	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Admin Assistant		Employer (See Instructions) QEO
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Ballmann <hr/> Contributor address; City; State; Zip Code 2201 Creekview 1336 Waco, TX 76711	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy Morrow 6 Contributor address; City; State; Zip Code 404 Lindenwood Lane West W Hewitt, TX 76643	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Waco ISD
Date 2/2/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raechal Anthony Contributor address; City; State; Zip Code 9520 Pepper Grass Dr. Dallas, TX 76131	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Client Relations		Employer (See Instructions) Printed Union
Date 2/2/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dona Readinger Contributor address; City; State; Zip Code 548 Trail Rider Road Fort Worth, TX 76114	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 2/3/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paddy Meehan Contributor address; City; State; Zip Code 2512 Independence Rd Colleyville, TX 76034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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: 4 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jake Davis	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Field Organizer		9 Employer (See Instructions) TDP
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Foster	Amount of contribution (\$) 35.00
Contributor address; City; State; Zip Code 3908 Kenley Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frances Garcia	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code PO Box 1536 Marfa, TX 79843		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caitlynn Morrow	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7600 White Oak Dr Lago Vista, TX 78645		
Principal occupation / Job title (See Instructions) Portfolio Property Manager		Employer (See Instructions) Harbor Capital
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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erin McAdams 6 Contributor address; City; State; Zip Code 1035 Maltese Ln. San Antonio, TX 78260	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions) Musician		9 Employer (See Instructions) Temple Beth-el San Antonio
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Ballmann (Self) Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth, TX 76107	Amount of contribution (\$) 3000.00
Principal occupation / Job title (See Instructions) Strategist		Employer (See Instructions) Texas Instruments
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glorianna Bartolo Contributor address; City; State; Zip Code 801 Redondo Ave. Long Beach, CA 90804	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Trade Show Manager		Employer (See Instructions) Procure
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delancey Webster Contributor address; City; State; Zip Code 10926 1/2 Landale Street North Hollywood 91602	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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: 6 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otha Graham	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 4733 Bonnell Ave Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) FWISD
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethany Campbell	Amount of contribution (\$) 40.00
Contributor address; City; State; Zip Code 620 Painted Cloud Place Las Vegas, NV 89144		
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) SBCEO
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilary Beebe	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code PO Box 70 Marfa, TX 79843		
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathryn Slover	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1702 Powell Dr Arlington, TX 76013		
Principal occupation / Job title (See Instructions) Archivist		Employer (See Instructions) University of Texas at Arlington
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: 7 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald Miller	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 5901 Maple Valley Dr Azle, TX 76020		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob Fox	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 6717 Woodstock Rd		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huyen Pham	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 2033 Windsor Place Fort Worth, TX 76110		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas A&M University
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavonne Cockerell	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 6016 Westridge Lane 406 Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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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: 8 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney Strittmatter 6 Contributor address; City; State; Zip Code 6559 Ridgemont Dr Dallas, TX 75214	7 Amount of contribution (\$) 15.00
8 Principal occupation / Job title (See Instructions) Public Relations		9 Employer (See Instructions) Golin
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzi Carter Contributor address; City; State; Zip Code 5329 Locke Ave Fort Worth, TX 76108	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Suzie Carter
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Ray Contributor address; City; State; Zip Code 4401 Quail Trail Fort Worth, TX 76114	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Reed Contributor address; City; State; Zip Code 2512 Independence Rd Colleyville, TX 76034	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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: 9 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mia Boatner 6 Contributor address; City; State; Zip Code 900 Matisse Dr Apt 2075 Fort Worth, TX 76107	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) District Director		9 Employer (See Instructions) City of Fort Worth
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gabriel Rivas Contributor address; City; State; Zip Code 501 East Tucker Boulevard Arlington, TX 76010	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Community Outreach		Employer (See Instructions) Tarrant County
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney lee Contributor address; City; State; Zip Code 945 Churchhill Drive Fort Worth, TX 76107	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) District Attendance Officer		Employer (See Instructions) AISD
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Long Contributor address; City; State; Zip Code 3230 River Lodge Trl S 832 Fort Worth, TX 76116	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Art Handler		Employer (See Instructions) U.S.ART

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: 10 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhonda McDonald 6 Contributor address; City; State; Zip Code 1504 W Tucker Blvd Arlington, TX 76013	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddie Morales Contributor address; City; State; Zip Code 352 Hillcrest Blvd Eagle Pass, TX 78852	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Langley & Banack INC
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen Seldin Contributor address; City; State; Zip Code 11525 Saint Michaels Drive Dallas, TX 75230	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Goodrich Contributor address; City; State; Zip Code 4017 Verano Dr Austin, TX 78735	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions) Board Member		Employer (See Instructions) Lightspeed Systems
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: 11 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Foster	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3908 Kenley St Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren Horgan	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 9316 Mountain Lake Court Fort Worth, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Ballmann	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2201 Creekview 1336 Waco, TX 76711		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Mabe	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 3451 Riverpark Apt 2114 Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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: 12 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Galupi	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 1501 Saxony Road Fort Worth, TX 76116		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcia Mederos	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 3309 W 6th St Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale Bronstein	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code 7700 Meadowbrook Drive Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) Wine Merchant		Employer (See Instructions) Mr. [sic]
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Burnhham	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 4736 Kilpatrick Ave Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) TCU
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: 13 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Kettyle 6 Contributor address; City; State; Zip Code PO Box 171 Marfa, TX 79843	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Development Director		9 Employer (See Instructions) Big Bend Conservation Alliance
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Miller Contributor address; City; State; Zip Code 3932 Weyburn Dr. Fort Worth, TX 76109	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jared A Stewart Contributor address; City; State; Zip Code 4121 Micki Lynn Avenue Fort Worth, TX 76107	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) TCC
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Watson Contributor address; City; State; Zip Code 1905 Knoxville Dr Bedford, TX 76022	Amount of contribution (\$) 36.00
Principal occupation / Job title (See Instructions) Sr. Director		Employer (See Instructions) Real Page Inc

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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: 14 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jake Davis	7 Amount of contribution (\$) 36.00
6 Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Field Organizer		9 Employer (See Instructions) TDP
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy Morrow	Amount of contribution (\$) 36.00
Contributor address; City; State; Zip Code 404 Lindenwood Lane West Hewitt, TX 76643		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Waco ISD
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pamela Lewis	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code 6600 River Bend Road Fort Worth, TX 76132		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharon Austray	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6716 Blue Meadow Drive Fort Worth, TX 76132		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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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: 15 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooke Hyatt	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 4128 Sanguinet St Fort Worth, TX 76107		
8 Principal occupation / Job title (See Instructions) Anesthesia MD		9 Employer (See Instructions) USAP
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsay Dills	Amount of contribution (\$) 36.00
Contributor address; City; State; Zip Code 901 Grange Hall Dr Apt 1301 Euless, TX 76039		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery Ballmann	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 2430 S 2nd St Waco, TX 76706		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) College
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Soria	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 3607 W Biddison St Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Texas Health Resources

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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: 16 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Dycus 6 Contributor address; City; State; Zip Code 3607 Shady Park Drive Arlington, TX 76013	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anai Vega Contributor address; City; State; Zip Code 5208 Lovell Ave Fort Worth, TX 76107	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Southwestern Health Resources
Date 03/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheila White Contributor address; City; State; Zip Code 5000 Lovell Ave Fort Worth, TX 76107	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Foster Contributor address; City; State; Zip Code 3908 Kenley St Fort Worth, TX 76107	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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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: 17 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Hopkins 6 Contributor address; City; State; Zip Code 4004 Sanguinet St Fort Worth, TX 76107	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Risk Analyst		9 Employer (See Instructions) Wells Fargo
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sally Craig Contributor address; City; State; Zip Code 4505 Wilson Court Lake Worth, TX 76135	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Windstream
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen Seldin Contributor address; City; State; Zip Code 11625 St Michaels Dr Dallas, TX 75230	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Seeberger Contributor address; City; State; Zip Code 3217 Rolling Knoll Dr Farmers Branch, TX 75234	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Insurance Consultant		Employer (See Instructions) Frost Insurance Agency

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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: 18 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franya Wilhelm 6 Contributor address; City; State; Zip Code 809 Cara Lane Arlington, TX 76013	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen Galley Contributor address; City; State; Zip Code 6460 Curzon Ave Fort Worth, TX 76116	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FWISD
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffrey Barnett Contributor address; City; State; Zip Code 3830 Antigua Dr. Dallas, TX 75244	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions) Barista		Employer (See Instructions) 50.00
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brody Mulligan Contributor address; City; State; Zip Code 312 Rambling Ct Euless, TX 76039	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
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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: 19 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darlene Aksoy	7 Amount of contribution (\$) 10.00
6 Contributor address; City; State; Zip Code 116 Woodcrest Lane Fort Worth, TX 75019		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frances Garvin	Amount of contribution (\$) 20.00
Contributor address; City; State; Zip Code 3536 Confidence Dr Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claire Wood	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 3428 Wharton Dr Fort Wort, TX 76133		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diane van Gelder	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 6324 Rebecca Ln Watauga, TX 76148		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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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: 20 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Madrulli	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 4349 Twinleaf Dr Crowley, TX 76036		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John James Dillard	Amount of contribution (\$) 15.00
Contributor address; City; State; Zip Code 6551 Locke Ave Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John James Dillard	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 6551 Locke Ave Fort Worth, TX 76116		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Nettle	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 4720 Boulder Run Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
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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: 21 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridget Swanson	7 Amount of contribution (\$) 20.00
6 Contributor address; City; State; Zip Code 3521 Westcliff Rd S Fort Worth, TX 76109		
8 Principal occupation / Job title (See Instructions) Doctor		9 Employer (See Instructions) Cook Children' s
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Chance	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 8600 Running River Ct Fort Worth, TX 76109		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Sarah Chance
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Prilliman	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 3724 Hamilton Ave Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valerie Watson	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1905 Knoxville Dr Bedford, TX 76022		
Principal occupation / Job title (See Instructions) Sr Director		Employer (See Instructions) Real Page

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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: 22 of 22
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Gray	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 5020 Riverbluff Dr Fort Worth, TX 76132		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis Orr	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 12 Holcomb Ridge Hartford County, CT 6090		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
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>		

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: 1 of 1	
2 FILER NAME Jason Ballmann		3 Filer ID (Ethics Commission Filers) N/A	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 575.00	
5 Date 03/09/202 5	6 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) Jake Davis 7 Contributor address; City; State; Zip Code 5204 Lovell Ave Fort Worth, TX 76107	8 Amount of Contribution \$ 575.00 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	9 In-kind contribution description Custom seed packets and event food / beverage
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Field Organizer		11 Employer (FOR NON-JUDICIAL)(See Instructions) TDP	
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#: _____) Contributor address; City; State; Zip Code	Amount of Contribution \$	In-kind contribution description
		<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)			

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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	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: 1 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/03/2025	5 Payee name FedEx Office	
6 Amount (\$) 48.70	7 Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Push cards for direct voter contact
	(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 02/05/2025	Payee name MLK Parade FWTX	
Amount (\$) 108.55	Payee address; City; State; Zip Code PO BOX 3328 Fort Worth, TX 76113	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Registration fee for 2025 Ft. Worth MLK Parade
	<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 02/06/2025	Payee name Tarrant Elections	
Amount (\$) 20.47	Payee address; City; State; Zip Code 2700 Premier St Fort Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Tarrant County GIS Map Services
	<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

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	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: 2 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/07/2025	5 Payee name Printed Union
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6 Amount (\$) 189.44	7 Payee address; City; State; Zip Code 8800 Chancellor Row Irving, TX 75247
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing expense	(b) Description Push cards and yard signs
	(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 02/07/2025	Payee name Staples
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Amount (\$) 7.57	Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Copies of letterhead
	<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 02/10/2025	Payee name Fort Worth Coffee Company
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Amount (\$) 36.00	Payee address; City; State; Zip Code 4731 Camp Bowie Blvd Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Coffee for volunteers
	<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

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 | 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: 3 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/10/2025	5 Payee name Squarespace	
6 Amount (\$) 7.20	7 Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description Website domain registration
	(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 02/10/2025	Payee name Staples 1187	
Amount (\$) 2.53	Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Printed internal documentation
	<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 02/10/2025	Payee name Staples 1187	
Amount (\$) 12.66	Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Printed internal documentation
	<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

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	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: 4 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/10/2025	5 Payee name Tommy's Grill
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6 Amount (\$) 20.21	7 Payee address; City; State; Zip Code 2455 Forest Park Dr Fort Worth, TX 76110
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation expense	(b) Description Attend community club meeting
	(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 02/11/2025	Payee name Inclusion Coffee
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Amount (\$) \$15.78	Payee address; City; State; Zip Code 101 E Abram St #110 Fort Worth, TX 76110
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Attend community club meeting
	<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 02/11/2025	Payee name The UPS Store
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Amount (\$) \$60.00	Payee address; City; State; Zip Code 2830 S Hulen St Fort Worth, TX 76109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal services	Description Notary public
	<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

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	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: 5 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/11/2025	5 Payee name Tommy's Grill	
6 Amount (\$) 50.59	7 Payee address; City; State; Zip Code 2455 Forest Park Dr Fort Worth, TX 76110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation expense	(b) Description Attend community club meeting
	(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 02/14/2025	Payee name Isabelle Young	
Amount (\$) 250.00	Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Description Contract payment to Isabelle Young
	<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 02/14/2025	Payee name Marissa Sanchez	
Amount (\$) 500.00	Payee address; City; State; Zip Code 5177 Britton Ridge Ln Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Description Contract payment to Marissa Sanchez
	<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

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	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: 6 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/14/2025	5 Payee name NGP VAN
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6 Amount (\$) 710.00	7 Payee address; City; State; Zip Code 10801-2 N Mopac Expressway, Suite 300 Austin, TX 78759
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Voter database licensing
	(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 02/14/2025	Payee name Staples
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Amount (\$) 14.05	Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Printed internal documentation
	<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 02/18/2025	Payee name Christian Olivas
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Amount (\$) 50.00	Payee address; City; State; Zip Code 5177 Britton Ridge Ln Fort Worth, TX 76179
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift expense	Description Acknowledgement for time and truck usage parade involvement
	<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

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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: 7 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/18/2025	5 Payee name Best Donuts	
6 Amount (\$) 53.16	7 Payee address; City; State; Zip Code 1201 Longhorn Rd Fort Worth, TX 76179	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense	(b) Description Food / beverage for volunteers
	(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 02/18/2025	Payee name FedEx Office	
Amount (\$) 107.71	Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Copies of letterhead
	<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 02/18/2025	Payee name FedEx Office	
Amount (\$) .77	Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Copies of letterhead
	<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

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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 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/18/2025	5 Payee name Lowe's
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6 Amount (\$) 43.21	7 Payee address; City; State; Zip Code 4305 Bryant Irvin Rd Fort Worth, TX 76132
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing expense	(b) Description Zip ties for signage
	(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 336.05	Payee name Native American Seed
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Amount (\$) 336.05	Payee address; City; State; Zip Code 10101 FM1102 New Braunfels, TX 78130
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Promotional materials
	<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 02/18/2025	Payee name Squarespace
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Amount (\$) 1.01	Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Addition of email user
	<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

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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: 9 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/18/2025	5 Payee name Home Depot	
6 Amount (\$) 18.36	7 Payee address; City; State; Zip Code 4850 SW Loop 820 R Fort Worth, TX 76109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description PVC pipe for signage
	(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 02/20/2025	Payee name Squarespace	
Amount (\$) 31.18	Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Upgrade of email newsletter capacity
	<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 02/21/2025	Payee name Marissa Sanchez	
Amount (\$) 500.00	Payee address; City; State; Zip Code 5177 Britton Ridge Ln Fort Worth, TX 76179	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Description Contract payment to Marissa Sanchez
	<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

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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: 10 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/24/2025	5 Payee name Isabelle Young
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6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense	(b) Description Contract payment to Isabelle Young
	(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 02/24/2025	Payee name FedEx
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Amount (\$) 104.46	Payee address; City; State; Zip Code 6020 Camp Bowie Blvd Fort Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Copies of event advertisement
	<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 02/27/2025	Payee name SquareSpace
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Amount (\$) 38.38	Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Website and email hosting
	<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

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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: 11 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 02/28/2025	5 Payee name Isabelle Young	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense	(b) Description Contract payment to Isabelle Young
	(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 02/28/2025	Payee name NGP VAN	
Amount (\$) 199.88	Payee address; City; State; Zip Code 10801-2 N Mopac Expressway, Suite 300 Austin, TX 78759	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Volunteer activation/documentation licensing
	<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 02/28/2025	Payee name SquareSpace	
Amount (\$) 51.17	Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Email Marketing Renewal
	<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

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	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: 12 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 02/28/2025	5 Payee name Tractor Supply
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6 Amount (\$) 513.09	7 Payee address; 9249 Benbrook Blvd Benbrook, TX 76126	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing expense	(b) Description T-posts for signage
	(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 03/03/2025	Payee name Isaac Coronado
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Amount (\$) 1,125.00	Payee address; 1010 Avon St Dallas, TX 75211	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Installation of signage
	<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 03/03/2025	Payee name Google Voice
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Amount (\$) 13.98	Payee address; 1600 Amphitheatre Parkway Mountain View, CA 94043	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead expense	Description Office phone number
	<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

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	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: 13 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/03/2025	5 Payee name La Madeleine	
6 Amount (\$) 22.72	7 Payee address; City; State; Zip Code 6140 Camp Bowie Blvd Fort Worth, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense	(b) Description Attend constituency meeting
	(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 03/03/2025	Payee name Lowe's	
Amount (\$) 51.85	Payee address; City; State; Zip Code 4305 Bryant Irvin Rd Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Zip ties for signage
	<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 03/04/2025	Payee name Shipleys	
Amount (\$) 24.43	Payee address; City; State; Zip Code 4224 Miller Ave Fort Worth, TX 76119	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / beverage expense	Description Coffee / donuts for volunteers
	<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

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	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: 14 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
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4 Date 03/06/2025	5 Payee name Michael's
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6 Amount (\$) 6.48	7 Payee address; City; State; Zip Code 4921 Overton Ridge Blvd Fort Worth, TX 76132
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation expense	(b) Description Craft needs for fundraising event
	(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 03/06/2025	Payee name The UPS Store
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Amount (\$) 15.74	Payee address; City; State; Zip Code 2830 S Hulen St Fort Worth, TX 76109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal services	Description Notary public
	<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 03/07/2025	Payee name Isabelle Young
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Amount (\$) 500.00	Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Description Contract payment to Isabelle Young
	<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

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	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: 16 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/14/2025	5 Payee name Isabelle Young	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense	(b) Description Contract payment to Isabelle Young
	(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 03/19/2025	Payee name Printed Union	
Amount (\$) 500.00	Payee address; City; State; Zip Code 8800 Chancellor Row Irving, TX 75247	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing expense	Description Signage
	<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 03/20/2025	Payee name Squarespace	
Amount (\$) 36.37	Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Website and email hosting
	<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

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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: 15 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/10/2025	5 Payee name Jason Ballmann	
6 Amount (\$) 165.00	7 Payee address; City; State; Zip Code 2800 Sharon St Dallas, TX 75211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event expense	(b) Description Paleta Cart rental for community event
	(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 03/10/2025	Payee name Staples	
Amount (\$) 35.72	Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Printing of materials for community event
	<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 03/10/2025	Payee name Walmart	
Amount (\$) 12.14	Payee address; City; State; Zip Code 6770 Westworth Blvd Fort Worth, TX 76114	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation expense	Description Cord for pinata at community event
	<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

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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: 17 of 17	2 FILER NAME Jason Ballmann	3 Filer ID (Ethics Commission Filers) N/A
4 Date 03/20/2025	5 Payee name Staples	
6 Amount (\$) 47.56	7 Payee address; City; State; Zip Code 1660 S University Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation expense	(b) Description Printing of supporter correspondence
	(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 03/21/2025	Payee name Isabelle Young	
Amount (\$) 500.00	Payee address; City; State; Zip Code 3704 Astoria Dr Arlington, TX 76013	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense	Description Contract payment to Isabelle Young
	<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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