

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

17

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

Mr.

Robert

L.

NICKNAME

LAST

SUFFIX

Sellers

Jr.

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX,

APT / SUITE #,

CITY,

STATE,

ZIP CODE

4410 Meadows Creek Dr. Rowlett TX 75088

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 215 0686

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Mr.

Joel

J

NICKNAME

LAST

SUFFIX

Wilson

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE):

APT / SUITE #,

CITY,

STATE,

ZIP CODE

2000 Arapaho Road 7202 Richardson TX 75089

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(214) 605-2683

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

2 / 24 / 2021

THROUGH

Month

Day

Year

4 / 1 / 2021

11 ELECTION

ELECTION DATE

Month

Day

Year

5 / 1 / 2021

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

Garland ISD Trustee - Place 6

13 OFFICE SOUGHT (if known)

Garland ISD Trustee - Place 6

14 NOTICE FROM POLITICAL COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

Additional Pages

GENERAL

COMMITTEE ADDRESS

SPECIFIC

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 <u>Robert Selders, Jr</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,335.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 7746.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5006.76
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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Robert Selders, Jr., and my date of birth is 7/7/1970

My address is 4410 Meadowcreek Drive, Rowlett, TX, 75083, USA
(street) (city) (state) (zip code) (country)

Executed in Dallas County, State of Texas, on the 1st day of April, 2021
(month) (year)

Robert S. Selders, Jr.
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Robert Selders, Jr.</div>	20 Filer ID (Ethics Commission Filers)
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	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,335.
2.	<input 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 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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 7490.62
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 256.19
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: <u>11</u>
2 FILER NAME <u>Robert Selders, Jr.</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>3/10/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Robert Selders</u>	7 Amount of contribution (\$) <u>\$ 25.00</u>
6 Contributor address; City; State; Zip Code <u>109 S. 6th Street Garland TX 75040</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>3/12/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Robert Canady</u>	Amount of contribution (\$) <u>\$100.00</u>
Contributor address; City; State; Zip Code <u>476 Boulder Lane Sunnyvale TX 75182</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>3/16/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Shedrick Toussaint</u>	Amount of contribution (\$) <u>\$100.00</u>
Contributor address; City; State; Zip Code <u>9803 Avenal Lane Charlotte NC 28270</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>3/17/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Amie Goins</u>	Amount of contribution (\$) <u>\$50.00</u>
Contributor address; City; State; Zip Code <u>2610 Brittany Drive Garland TX 75040</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Robert Selders, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/18/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christy Scarga 6 Contributor address; City; State; Zip Code 4014 Arrowcrest Lane Garland TX 75044	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marilyn Craft-Brown Contributor address; City; State; Zip Code 1206 Howard Lane Garland TX 75044	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rebhi Abusrad Contributor address; City; State; Zip Code 304 Basil Street Garland TX 75040	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sonja Loyd Contributor address; City; State; Zip Code 5332 Oster Drive Baton Rouge LA 70805	Amount of contribution (\$) \$ 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

2

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
2 FILER NAME Robert Selders, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/22/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terry Hollingsworth	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 4406 Meadows Drive Rowlett TX 75088		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Felipe Fabunrieta	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 965 Chimney Hill Ln #2025 Dallas TX 75243		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jeremy Lemon	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2978 Crystal Springs Ln Richardson TX 75082		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Janine Fields	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9034 Fairglen Dr Dallas TX 75231		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
3		

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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
2 FILER NAME <i>Robert Selders, Jr.</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/22/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Justin Graham</i>	7 Amount of contribution (\$) <i>\$ 50.00</i>
6 Contributor address; City; State; Zip Code <i>1323 Windy Thicket Katy TX 77494</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Audrey Young</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code <i>20135 N. State Hwy 94 Lufkin TX 75904</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Rick Galindres</i>	Amount of contribution (\$) <i>\$ 250.00</i>
Contributor address; City; State; Zip Code <i>806 Wildgrove Dr. Garland TX 75041</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Steven Fischer</i>	Amount of contribution (\$) <i>\$ 1000.00</i>
Contributor address; City; State; Zip Code <i>306 Stonebridge Dr. Richardson TX 75080</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
4		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Robert Siders, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/22/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keith Ellis	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 13077 Amber Meadows Dr. Forney TX 75126		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Natalie Vasquez	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 830 Maple Dr Garland TX 75040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Lincoln	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 921 North Lake Rd Rowlett TX 75089		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Theresa Blomat	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code 5309 Glass Ridge Rd Raleigh NC 27616		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
5		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Robert Sellers, Jr.	3 Filer ID (Ethics Commission Filers)
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4 Date 3/23/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gradyne Brown	7 Amount of contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 3225 Tuttle Creek Blvd Dallas TX 75219 #1706	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dirk Johnson	Amount of contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 5804 Bryan Parkway Dallas TX 75206	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dennis Daniel	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2167 Rutland Ct. Woodbridge VA 22191	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sean Blount	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 5309 Glass Ridge Rd Raleigh NC 27616	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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: 11
2 FILER NAME Robert Selden, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/23/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kevin Mendoza	7 Amount of contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 5725 Bentley Dr. Garland TX 75043	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Emily Legree	Amount of contribution (\$) \$100.00
	Contributor address; City; State; Zip Code P.O. Box 187 St. Stephen SC 29479	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patrick Walls	Amount of contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 2217 Rolling Oak Lane Garland TX 75044	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/24/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erica Papillion - Posey	Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 630 Wynnwood Ct SW Powder Springs GA 30127	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
		7

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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: 11
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2 FILER NAME <i>Robert Selders, Jr.</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>3/25/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Arthur Neal</i>	7 Amount of contribution (\$) <i>\$100.00</i>
6 Contributor address; City; State; Zip Code <i>13709 Mary Bowie Pkwy Upper Marlboro MD 20774</i>		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date <i>3/25/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Tim Henson</i>	Amount of contribution (\$) <i>\$200.00</i>
Contributor address; City; State; Zip Code <i>1408 Wildwood Circle Garland TX 75042</i>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>3/26/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Leasa Legee</i>	Amount of contribution (\$) <i>\$100.00</i>
Contributor address; City; State; Zip Code <i>6723 Fairway Row Lane Charlotte NC 28277</i>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date <i>3/27/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Steve Carson</i>	Amount of contribution (\$) <i>\$250.00</i>
Contributor address; City; State; Zip Code <i>2237 Villawood Lane Garland TX 75040</i>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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: 11
2 FILER NAME Robert Selders, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) BJ Williams	7 Amount of contribution (\$) \$ 25.00
6 Contributor address; City; State; Zip Code 617 San Carlos Dr. Garland TX 75043		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/27/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Connie Woods	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 2803 Riverside Pkwy 5603 Grand Prairie TX 75050		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/29/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beatris Martinez	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 1958 Naval Dr. Garland TX 75040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/29/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Naidra Conliffe	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 4510 Brittany Drive Rowlett TX 75088		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
9		

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Robert Sellers, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kevin Wyrick	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code P.O. Box 2201 Wylie TX 75098		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 4/1/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Janice Horton	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 803 Simon Dr. Cedar Hill TX 75104		
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)

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)

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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: 11
2 FILER NAME Robert Sellers		3 Filer ID (Ethics Commission Filers)
4 Date 3/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Darrin Humphill	7 Amount of contribution (\$) \$ 200.00
6 Contributor address; City; State; Zip Code 1526 Lexington Dr. Garland TX 75041		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 2	2 FILER NAME Robert Selders, Jr	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/21	5 Payee name Daley Professional Web Solutions	
6 Amount (\$) 1,145.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 211 Cardinal Drive Montgomery NY 12549	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Website design
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 3/24/21	Payee name K & R Screen Graphics	
Amount (\$) 1,315.24 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3915 Main Street Dallas TX 75226	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 3/29/21	Payee name K & R Screen Graphics	
Amount (\$) 2,930.33 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3915 Main Street Dallas TX 75226	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: 2	2 FILER NAME Robert Selders Jr.	3 Filer ID (Ethics Commission Filers)
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4 Date 3/23/21	5 Payee name K & R Screen Graphics
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6 Amount (\$) 2,100.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 3915 Main Street City: Dallas State: TX Zip Code: 75226
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

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

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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 I: 1	2 FILER NAME Robert Selders Jr.	3 Filer ID (Ethics Commission Filers)
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4 Date 4/1/21	5 Payee name Raise The Money
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6 Amount (\$) \$256.19	7 Payee address; P.O. Box 26466	City Little Rock	State AR	Zip Code 72221
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8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Fees	(b) Description (See instructions regarding type of information required.) Fee collected for campaign donations
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Date	Payee name
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Amount (\$)	Payee address;	City	State	Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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Date	Payee name
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Amount (\$)	Payee address;	City	State	Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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Date	Payee name
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Amount (\$)	Payee address;	City	State	Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED