

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mrs.

Paola

Gonzalez Fusilier

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

4416

Young St

Pasadena

TX

77504

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832 )

403-1570

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mrs.

Theresa

A

NICKNAME

LAST

SUFFIX

Fusilier

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #:

CITY:

STATE:

ZIP CODE

4416 Young St

Pasadena

TX

77504

(Residence or Business)

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713 )

857-3442

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  
4 / 1 / 21

THROUGH

Month Day Year  
4 / 23 / 21

11 ELECTION

ELECTION DATE

ELECTION TYPE

Month Day Year  
05 / 01 / 2021

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Pasadena ISD School Board, Position 1

14 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

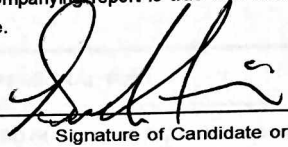
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME		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)	\$ 2,506.44
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,506.44
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 822.70
	4. TOTAL POLITICAL EXPENDITURES	\$ 822.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5,974.89
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 Paola Gonzalez Esquivel and my date of birth is 09/16/1984  
 My address is 5223 Camansa Dr., Pasadena, TX, 77504, USA  
(street) (city) (state) (zip code) (country)  
 Executed in Harris County, State of Texas, on the 23 day of April, 2021  
(month) (year)  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,506.66
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	SCHEDULE E: LOANS	\$ 0
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 822.70
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Paola Gonzalez Fusilier		3 Filer ID (Ethics Commission Filers)
4 Date 4/19/21	5 Full name of contributor Danny Schnautz out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 485.20
6 Contributor address; City; State; Zip Code PO Box 5808 Pasadena TX 77508		
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) Clark Freight Lines
Date 4/19/21	Full name of contributor Jasmine Jenkins out-of-state PAC (ID#: _____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1210 Adele Street Houston TX 77009		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Houstonians for Great Public Schools
Date 4/19/21	Full name of contributor Madyson Chavez out-of-state PAC (ID#: _____)	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 2100 Revere Dr 143 Houston TX 77098		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) BMC Software
Date 4/20/21	Full name of contributor Ana Valenzuela out-of-state PAC (ID#: _____)	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 3203 Somerton Dr La Porte TX 77571		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Clearhope Counseling and wellness

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Paola Gonzalez Fusilier

3 Filer ID (Ethics Commission Filers)

4 Date

4/18/21

5 Full name of contributor

Veronica Santellanas

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

38.54

6 Contributor address;

1417 Delabrook

City;

Seabrook

State; Zip Code

TX 77586

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/12/21

Full name of contributor

Catalina Rangel

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

11.00

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/21

Full name of contributor

AJ Garcia

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address;

4747 Buike # 167

City;

Pasadena TX 77504

State; Zip Code

Principal occupation / Job title (See Instructions)

Educator

Employer (See Instructions)

HSD

Date

4/19/21

Full name of contributor

Joseph Greenberg

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

193.90

Contributor address;

6442 Rutges

City;

Houston

State; Zip Code

TX 77005

Principal occupation / Job title (See Instructions)

CEO

Employer (See Instructions)

Alta Resources LLC

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

2 FILER NAME

Paola Gonzalez Fujer

3 Filer ID (Ethics Commission Filers)

4 Date

4/20/21

5 Full name of contributor

Luisa Beck

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/20/21

Full name of contributor

Dora Valle

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

20.00

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/21/21

Full name of contributor

Douglas Foshee

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

3504 Georgetown

Houston

TX

77005

Principal occupation / Job title (See Instructions)

owner/CEO

Employer (See Instructions)

Sallyport Investments, LLC

Date

4/22

Full name of contributor

Danny Schnauz

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

558.02

Contributor address;

City;

State;

Zip Code

Po Box 5808

Pasadena

TX

77508

Principal occupation / Job title (See Instructions)

General Manager

Employer (See Instructions)

(Lain Freight Line)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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1 Total pages Schedule A1:

2 FILER NAME

Paola Gonzalez Fusilier

3 Filer ID (Ethics Commission Filers)

4 Date

4/19/21

5 Full name of contributor

Theresa Wilding

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

100.00

6 Contributor address;

5242 Findlay Dr. Pasadena TX 77505

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

Office manager

9 Employer (See Instructions)

Southeast Houston Pulmonology

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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