CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

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

1  Filer ID (Ethics Commission Filer)  2  Total pages filed: 6

OFFICE USE ONLY

Date Received

MAY 10 2021
City Secretary
Port Aransas, TX

Receive

Date Hand-delivered or Date Postmarked

Receipt #:  Amount $:

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

Mr. David D. Bulldog Stielloff

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX:  APT / SUITE #:  CITY;  STATE;  ZIP CODE

105 Five Dove Circle
Port Aransas, TX 78373

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE  PHONE NUMBER  EXTENSION

(512) 966-1499

6 CAMPAIGN TREASURER NAME

Mr. Martin J. Bud Phalen

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);  APT / SUITE #:  CITY;  STATE;  ZIP CODE

168 Five Dove Circle
Port Aransas, TX 78373

8 CAMPAIGN TREASURER PHONE

AREA CODE  PHONE NUMBER  EXTENSION

(815) 690-1938

9 REPORT TYPE

☐ January 15  ☐ 30th day before election  ☐ Runoff  ☐ 15th day after campaign treasurer appointment (Officer Holder Only)

☐ July 15  ☐ 8th day before election  ☐ Exceeded Modified Reporting Limit

10 PERIOD COVERED

Month  Day  Year  THROUGH  Month  Day  Year

02  11  21  THROUGH  5  9  21

11 ELECTION

ELECTION DATE

Month  Day  Year  PRIMARY  RUNOFF  OTHER DESCRIPTION

5  1  21  General  Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Port Aransas City Council Seat #5

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

GO TO PAGE 2

Forms provided by Texas Ethics Commission  www.ethics.state.tx.us  Revised 8/17/2020
<table>
<thead>
<tr>
<th>17 CONTRIBUTIONS TOTALS</th>
<th>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</th>
<th>$ 0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td>
<td>$ 855.06</td>
</tr>
<tr>
<td></td>
<td>3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.</td>
<td>$ 0.00</td>
</tr>
<tr>
<td></td>
<td>4. TOTAL POLITICAL EXPENDITURES</td>
<td>$ 1,009.91</td>
</tr>
<tr>
<td>EXPENDITURE TOTALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CONTRIBUTION BALANCE</td>
<td>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>OUTSTANDING LOAN TOTALS</td>
<td>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td>
<td>$ 0.00</td>
</tr>
</tbody>
</table>

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 ________________, and my date of birth is __08/18/1962__________________.

My address is 105 Five Dove Circle, Port Aransas, TX 78373, USA.

Executed in Nueces County, State of TX, on the 09th day of 05 2021.

Signature of Candidate/Officeholder (Declaration)
<table>
<thead>
<tr>
<th>SCHEDULE SUBTOTALS</th>
<th>NAME OF SCHEDULE</th>
<th>SUBTOTAL AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</td>
<td>$855.06</td>
</tr>
<tr>
<td>2.</td>
<td>SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>3.</td>
<td>SCHEDULE B: PLEDGED CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>4.</td>
<td>SCHEDULE E: LOANS</td>
<td>$0.00</td>
</tr>
<tr>
<td>5.</td>
<td>SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>6.</td>
<td>SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>7.</td>
<td>SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>8.</td>
<td>SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</td>
<td>$455.06</td>
</tr>
<tr>
<td>9.</td>
<td>SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</td>
<td>$554.85</td>
</tr>
<tr>
<td>10.</td>
<td>SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/ OH</td>
<td>$0.00</td>
</tr>
<tr>
<td>11.</td>
<td>SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$0.00</td>
</tr>
<tr>
<td>12.</td>
<td>SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
**MONETARY POLITICAL CONTRIBUTIONS**

Schedule A1

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

<table>
<thead>
<tr>
<th>FILER NAME</th>
<th>Full name of contributor</th>
<th>out-of-state PAC (ID#:)</th>
</tr>
</thead>
<tbody>
<tr>
<td>David D. &quot;Bulldog&quot; Siseloff</td>
<td>John P. MacDarmid</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Full name of contributor</th>
<th>out-of-state PAC (ID#: )</th>
<th>Amount of contribution ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/18/2021</td>
<td>Gary W. Raba</td>
<td>2815 Low Oak Street, San Antonio, TX 78212</td>
<td>300.00</td>
</tr>
<tr>
<td>02/11/2021</td>
<td>Martin J. Phalen</td>
<td>168 Five Dove Circle, Port Aransas, TX 78373</td>
<td>279.62</td>
</tr>
<tr>
<td>03/01/2021</td>
<td>Martin J. Phalen</td>
<td>168 Five Dove Cir, Port Aransas, TX 78373</td>
<td>175.44</td>
</tr>
</tbody>
</table>

**Principal occupation / Job title** (See Instructions)

Health Physicist

**Employer** (See Instructions)

Nuclear Energy Institute

**ATTACH ADDITIONALkoppyES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.
EXPENDITURES MADE BY CREDIT CARD

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advertising Expense</td>
<td>Event Expense</td>
</tr>
<tr>
<td>Accounting/Bookkeeping</td>
<td>Fees</td>
</tr>
<tr>
<td>Consulting Expense</td>
<td>Food/Beverage Expense</td>
</tr>
<tr>
<td>Contributions/Donations Made By</td>
<td>Gift/Awards/Memorials Expense</td>
</tr>
<tr>
<td>Candidate/Officeholder/Political Committee</td>
<td>Legal Services</td>
</tr>
<tr>
<td>Solicitation/Fundraising Expense</td>
<td>Loan Repayment/Reimbursement</td>
</tr>
<tr>
<td>Transportation Equipment &amp; Related Expense</td>
<td>Office Overhead/Rental Expense</td>
</tr>
<tr>
<td>Travel In District</td>
<td>Postal Expense</td>
</tr>
<tr>
<td>Other (enter a category not listed above)</td>
<td>Printing Expense</td>
</tr>
<tr>
<td></td>
<td>Salaries/Wages/Contract Labor</td>
</tr>
</tbody>
</table>

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2 FILER NAME David D. "Bulldog" Sieloff 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITIZED EXPENDITURES CHARGED TO A CREDIT CARD $ 455.06

5 Date 02/11/2021

6 Payee name Vista Print

7 Amount ($) 279.62

8 Payee address; City; State; Zip Code Hadsoweg 8, Vinio, The Netherlands 5928LW

9 TYPE OF EXPENDITURE

   [ ] Political   [ ] Non-Political

10 PURPOSE OF EXPENDITURE

   (a) Category (See Categories listed at the top of this schedule)
   Printing Expense

   (b) Description
   Door Hangers & Yard Signs

11 Check if travel outside of Texas. Complete Schedule T.

Complete ONLY if direct expenditure to benefit CI/CH

Candidate / Officeholder name Office sought Office held

---

Date 03/01/2021

Payee name Vista Print

Amount ($) 175.44

Payee address; City; State; Zip Code Hadsoweg 8, Vinio, The Netherlands 5928LW

TYPE OF EXPENDITURE

   [ ] Political   [ ] Non-Political

PURPOSE OF EXPENDITURE

   Category (See Categories listed at the top of this schedule)
   Printing Express

   Description
   Yard Signs

Complete ONLY if direct expenditure to benefit CI/CH

Candidate / Officeholder name Office sought Office held

---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 3/17/2020
### EXPENDITURE CATEGORIES FOR BOX 8(a)

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advertising Expense</td>
<td>Newspaper Ad</td>
</tr>
<tr>
<td>Food/Beverage Expense</td>
<td></td>
</tr>
<tr>
<td>Gift/Awards/Memorials Expense</td>
<td></td>
</tr>
<tr>
<td>Legal Services</td>
<td></td>
</tr>
<tr>
<td>Loan Repayment/Reimbursement</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous</td>
<td></td>
</tr>
<tr>
<td>Office Overhead/Rental Expense</td>
<td></td>
</tr>
<tr>
<td>Political Expense</td>
<td></td>
</tr>
<tr>
<td>Printing Expense</td>
<td></td>
</tr>
<tr>
<td>Solicitation/Fundraising Expense</td>
<td></td>
</tr>
<tr>
<td>Transportation Expense</td>
<td></td>
</tr>
<tr>
<td>Travel Expense</td>
<td></td>
</tr>
<tr>
<td>Travel Out Of District</td>
<td></td>
</tr>
<tr>
<td>Travel In District</td>
<td></td>
</tr>
<tr>
<td>Salaries/Wages/Contract Labor</td>
<td></td>
</tr>
</tbody>
</table>

### Specific Expenditures

<table>
<thead>
<tr>
<th>Date</th>
<th>Payee Name</th>
<th>Payee Address</th>
<th>Amount ($)</th>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/16/2021</td>
<td>South Jetty Newspaper</td>
<td></td>
<td>267.30</td>
<td>Advertising Expense</td>
<td>Newspaper Ad</td>
</tr>
<tr>
<td>03/02/2021</td>
<td>Banner Buzz</td>
<td>595 Old Norcross Rd Suite G, Lawrenceville, GA 30046</td>
<td>24.36</td>
<td>Advertising Expense</td>
<td>Flag</td>
</tr>
<tr>
<td>03/03/2021</td>
<td>Custom Lanyard WB Promotion</td>
<td>12505 Reed Road #110, Sugar Land, TX 77478</td>
<td>263.19</td>
<td>Advertising Expense</td>
<td>Color Can Coolers</td>
</tr>
</tbody>
</table>

**Important Note:**
- Complete ONLY if direct expenditure to benefit C/OH
- Check if Austin, TX, officeholder living expense

**Additional Instructions:**
- The Instruction Guide explains how to complete this form.
- ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT
FORM C/OH - FR

The Instruction Guide explains how to complete this form.

-- Complete only if "Report Type" on page 1 is marked "Final Report" --

1 C/OH NAME
David D. "Bulldog" Sieloff

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

-- Complete A & B below only if you are not an officeholder. --

A. CAMPAIGN FUNDS

Check only one:

☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

-- Complete this section only if you are an officeholder --

✓ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

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