CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed: 30	OFFICE USE ONLY		
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr Ten NICKNAME LAST Atki	Date Received			
4	ORIGINAL REPORT TYPE	30th day before election 15th app	offf Other (specify) seeded \$500 limit ———————————————————————————————————	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
5	ORIGINAL PERIOD COVERED	Month Day Year 03 / 23 / 2021 TH	Month Day Year IROUGH 04 21 2021	Date Processed Date Imaged		
6	EXPLANATION OF CO	RRECTION				
	Correction to Last Day Balance (Line 5, Coversheet 2)- \$22,958.96					
7	AFFIDAVIT	report is	or affirm, under penalty of perjury, true and correct. ONLY if applicable:	that this corrected		
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear.					
or affirm, that any error or omission in the report as originally filed was made in good faith.						
			* * * Electronically Certified	d * * *		
	AFFIX NOTARY STAM	MP / SEAL ABOVE	Signature of Candidate or C	Officeholder		
		d before me, by the said Mr Tennell A		oth day of May ,		
	20, to certify	which, witness my hand and seal of office	ce.			
_	Signature of officer adr	ninistering oath Printed	I name of officer administering oath	Title of officer administering oath		
	Re		rt Of The Campaign Finance Re ort And Explain Corrections	eport Form		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages file 30	ed:
3 CANDIDATE/ OFFICEHOLDER	MS / MRS / MR Mr	FIRST Tennell	MI	OFFICE	USE ONLY
NAME			OUEEIV	Date Received	
	NICKNAME	LAST Atkins	SUFFIX		
4 CANDIDATE/	ADDRESS / PO BOX;		CITY; STATE; ZIP CODE		
OFFICEHOLDER MAILING ADDRESS	2717 Meadow St		Dallas TX 75232		
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (469)	PHONE NUMBER 417 8839	EXTENSION	Date Hand-delivered	
6 CAMPAIGN TREASURER	MS / MRS / MR Mrs	FIRST Velma	MI	Receipt #	Amount \$
NAME	NICKNAME	LAST	SUFFIX	Date Processed	
	THOMANIE	Milliner	33.17.	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (I	NO PO BOX PLEASE); APT / S	UITE #; CITY; Dallas TX 75241	STATE;	ZIP CODE
(Residence or Business)					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
FIIONE	(214)	371 7482			
9 REPORT TYPE	January 15	30th day before e	election Runoff	15th day aft treasurer ap (Officeholder	
	July 15	X 8th day before ele	ection Exceeded Modified Reporting Limit	Final Report	(Attach C/OH - FR)
10 PERIOD	Month	Day Year	Month	Day Year	
COVERED	03 /	23 /2021	THROUGH 04	/ 21 / 202	1
11 ELECTION	ELECTION DAT		ELECTION TYPE		
	Month Day Year Primary Runoff Other Description				
	05 / 01 /	2021 X General	Special		
12 OFFICE	OFFICE HELD (if any)	'	13 OFFICE SOUGHT (if known Council District 8)	
14 NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	ACCEPTED OR POLITICAL EXPENDITURES MS MAY HAVE BEEN MADE WITHOUT THE CANI	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	EASURER NAME		
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
		GO TO	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mr Tennell Atkins				16 Filer ID	(Ethics Commission Filers)	
17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICA PLEDGES, LOANS, OR GUARA CONTRIBUTIONS MADE ELECT		N	\$ 0.00	
	2.	TOTAL POLITICAL CONTRIB (OTHER THAN PLEDGES, LOAN	BUTIONS IS, OR GUARANTEES OF LOANS)	\$ 14975.00	
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL	_ EXPENDITURE.	:	\$ 0.00	
	4.	TOTAL POLITICAL EXPENDI	TURES	:	\$ 23640.57	
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTI OF REPORTING PERIOD	IONS MAINTAINED AS OF THE LA	ST DAY	\$ 22958.96	
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF LAST DAY OF THE REPORTING	ALL OUTSTANDING LOANS AS C PERIOD	OF THE	\$ 15000.00	
	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.					
			ELECTRONICA	ALLY CER	TIFIED	
			Signature of C	andidate or	Officeholder	
		Please compl	ete either option belov	w:		
		i iodoo oompi	oto ottilor option bolo	•••		
(1) Affidavit						
NOTARY STAMP/SEA	L					
Sworn to and subscribed	before me	by	this the		day of	
20, to certify	which, witn	ess my hand and seal of office.				
Signature of officer administe	ering oath	Printed name of office	cer administering oath	T	itle of officer administering oa	
			OR			
(2) Unsworn Declaration	on					
Mv name is			, and my date of birth is	s		
		(street)	(city)	(state) (zi	p code) (country)	
Executed in	(County, State of	_ , on the day of (mont	th)	, 20 (year)	
			Signature of Cand	idate/Officeh	older (Declarant)	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

-	19 FILER NAME Mr Tennell Atkins 20 Filer ID (Ethics Con				
21 S	SUBTOTAL AMOUNT				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 14,975.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	ONS	\$ 0.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00		
4.	SCHEDULE E: LOANS		\$ 0.00		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL	AL CONTRIBUTIONS	\$ 23,640.57		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLIT	TICAL CONTRIBUTIONS	\$ 0.00		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONA	AL FUNDS	\$ 0.00		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS	TO A BUSINESS OF C/OH	\$ 0.00		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITIC	AL CONTRIBUTIONS	\$ 0.00		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT TO FILER	RIBUTIONS RETURNED	\$ 0.00		

SCHEDULE A1

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

	e Instruction Guide explains how to compl	ete this form. 1 Total pages Schedule A1: 1 of 5
2 FILER NAM Mr Tennell Atl		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-	state PAC (ID#:) 7 Amount of contribution (\$)
03/23/2021	Evalynn Williams	700.00
	6 Contributor address; City; 1104 Shadow Wood Trail	State; Zip Code Desoto, TX 75115
8 Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions)
Date	Full name of contributor	state PAC (ID#:) Amount of contribution (\$)
03/23/2021	John W Price	500.00
	Contributor address; City; 510 E 5th St	
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	state PAC (ID#:) Amount of contribution (\$)
03/23/2021	Demetris Sampson	1000.00
	Contributor address; City; P.O. Box 2252	State; Zip Code Dallas, TX 75222
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)
Date 03/24/2021	Full name of contributor out-of-Dallas Black Firefighter Retiree PAC	state PAC (ID#:) Amount of contribution (\$) 500.00
	Contributor address; City; P.O. Box 226983	Dallas, TX 75222
	upation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 fo	orm.	1 Total pages Schedule A1: 2 of 5
2 FILER NAME Mr Tennell Atkir	ıs		3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2021	-		7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/05/2021	Full name of contributor	State; Zip Code	Amount of contribution (\$) 2500.00
Principal occup	nation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/31/2021	The Real Estate Counce Political Action Com	State; Zip Code	Amount of contribution (\$) 2500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/23/2021	Full name of contributor out-of-state PAC (II Dallas Police Officers PAC Contributor address; City; 1412 Griffin St East Dallas, T	D#:) State: Zip Code X 75215	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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:
	mistraction during explains now to complete this	o TOTTII.	3 of 5
2 FILER NAME Mr Tennell Atkir	ns		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/10/2021	RKCJ LLC		500.00
	6 Contributor address; City;	State; Zip Code , TX 75215	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
04/14/2021	Dallas Firefighters Association Public Safet	y Committee	1000.00
	Contributor address; City; 10956 Audelia Rd Dallas,	State; Zip Code , TX 75243-8204	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
03/25/2021	Jon Killen		75.00
	Contributor address; City; 2050 Chevella Dr Dallas,	State; Zip Code , TX 75232	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 03/31/2021	Full name of contributor out-of-state PAC CHRIS HAMILTON	C (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; City; 5521 Swiss Ave DALL	AS, TX 75214	
	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

	he Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 4 of 5
2 FILER NAM Mr Tennell Atl		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
04/09/2021	South Oak Cliff Alumi Dear Cave	100.00
	6 Contributor address; City; State; Zip Code 3601 S Marsailis Dallas, TX 75216	
3 Principal oc	ccupation / Job title (See Instructions) 9 Employer (See Instructions)	nstructions)
Date	Full name of contributor	Amount of contribution (\$)
04/15/2021	Syd Hurley	500.00
	Contributor address; City; State; Zip Code 8750 N Central Expressway Dallas, TX 75206	
Principal occ	cupation / Job title (See Instructions) Employer (See In	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$)
04/15/2021	Larry Offutt	100.00
	Contributor address; City; State; Zip Code 6038 Bryan Pkwy Dallas, TX 75206	
Principal occ	cupation / Job title (See Instructions) Employer (See Instructions)	nstructions)
Date 04/19/2021	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 1830 PARK ROW AVE DALLAS, TX 75215	
	cupation / Job title (See Instructions) Employer (See Instructions)	nstructions)

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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: 5 of 5
2 FILER NAME Mr Tennell Atkir	ıs			3 Filer ID (Ethics Commission Filers)
04/16/2021 Bradford A Phillips		City;	State; Zip Code TX 75229	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date 04/16/2021	Full name of contributor Timothy Pannell Contributor address; 4361 Cedar Lake Drive	City;	State; Zip Code	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)			Employer (See Instruc	tions)
Date	Full name of contributor Contributor address;		State; Zip Code	Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	ATTACHARRIT	ONAL CODIEC		IEEDED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 1 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2021	5 Payee name The Order Desk		
6 Amount (\$) 4577.89	7 Payee address; 9890 Monore Dr Suite 104 allas, TX 75230	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description postage	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/01/2021	Payee name Relly Echols Printing		
Amount (\$) 4122.16	Payee address; P700 Boxu 19Harwood SuiDa 190,1TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/08/2021	Payee name MMS Company Ad Specialties, LLC		
Amount (\$) 997.50	Payee address; PIO.NB & 290 Suite 2901 Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 2 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2021	5 Payee name MMS Company Ad Specialties, LLC		
6 Amount (\$) 960.00	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description advertising	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/13/2021	MMS Company Ad Specialties, LLC		
Amount (\$) 339.00	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	ad	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/15/2021	Payee name Black Business Directory		
Amount (\$) 1000.00	Payee address; 8401 Manchester Dr Rowlett, TX 75089	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 3 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/13/2021	5 Payee name Gail Turner			
6 Amount (\$) 200.00	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/13/2021	Payee name Lucy Cain			
Amount (\$) 200.00	Payee address; 4312 Spring St Dallas, TX 75215	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/16/2021	Payee name CCP Printing			
Amount (\$) 300.00	Payee address; 5534 S Hampton Rd Dallas, TX 75232	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description printing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Ordan Oard Faymon	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 4 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2021	5 Payee name James Virden		
6 Amount (\$) 1586.00	7 Payee address; 3424 Hacienda Dr Dallas, TX 75233	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description labor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/15/2021	LaShun Virden		
Amount (\$) 1586.00	Payee address; 3424 Hacienda Dr Dallas, TX 75233	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/24/2021	Payee name ECO Latino		
Amount (\$) 599.00	Payee address; 2320 W Davis St Dallas, TX 75208	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 5 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/15/2021	5 Payee name Beyond the Slogan			
6 Amount (\$) 1650.00	7 Payee address; 4201 Bunker Hill Rd Sui@afilahd, TX 75048	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description consulting		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atloms	Office sought Council District 8		Office held
Date 03/29/2021	Payee name Sams Club			
Amount (\$) 43.30	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/23/2021	Payee name Sams Club			
Amount (\$) 40.72	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 6 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/26/2021	5 Payee name Sams Club			
6 Amount (\$) 36.87	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/26/2021	Payee name Sams Club			
Amount (\$) 53.70	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/31/2021	Payee name Sams Club			
Amount (\$) 45.70	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	oursi (orner a sategor)	,
1 Total pages Schedule F1: 7 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 04/06/2021	5 Payee name Sams Club			
6 Amount (\$) 43.62	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date 04/09/2021	Payee name Big Bang Endeavors			
Amount (\$) 325.00	Payee address; 103 NW 14th St Grand Prairie, TX 75050	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description printing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
Date 04/01/2021	Payee name Phone Burner			
Amount (\$) 298.00	Payee address; 1968 S Coast Hwy Long Beach, CA 92651	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 8 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission File	ers)
4 Date 04/05/2021	5 Payee name ATT			
6 Amount (\$) 383.00	7 Payee address; P.O. Box 6811 Dallas, CA 75225	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description phone		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
04/01/2021	Jefferson Monument			
Amount (\$) 350.00	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 04/02/2021	Payee name Tennell Atkins Office Depot			
Amount (\$) 859.43	Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	office supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		,
1 Total pages Schedule F1: 9 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethic	s Commission Filers)
4 Date 03/24/2021	5 Payee name Gonzalez Resturant			
6 Amount (\$) 31.28	7 Payee address; 3697 W Jefferson Suite I D29 as, TX 75208	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atlins	Office sought Council District 8		Office held
Date	Payee name			
03/30/2021	Pizza Hut			
Amount (\$) 11.98	Payee address; 3333 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	gexpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/25/2021	Payee name McDonalds			
Amount (\$) 6.05	Payee address; 705 W Jefferson Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 10 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/28/2021	5 Payee name Paradiso			
6 Amount (\$) 37.89	7 Payee address; 308 N Bishop Dallas, TX 75208	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/28/2021	Payee name Paradiso			
Amount (\$) 39.06	Payee address; 308 N Bishop Dallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/28/2021	Payee name Paradiso			
Amount (\$) 39.06	Payee address; 308 N Bishop Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		,
1 Total pages Schedule F1: 11 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethic	s Commission Filers)
4 Date 03/28/2021	5 Payee name Olive Garden			
6 Amount (\$) 26.07	7 Payee address; 639 S Cockrell Hill Rd Duncanville, TX 75116	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/30/2021	The Island Spot			
Amount (\$) 58.71	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/06/2021	Payee name KFC			
Amount (\$) 18.25	Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 12 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/23/2021	5 Payee name Lisa Soul Food Cafe			
6 Amount (\$) 30.30	7 Payee address; 2550 W Redbird Lane Subbell404TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/23/2021	Lisa Soul Food Cafe			
Amount (\$) 30.30	Payee address; 2550 W Redbird Lane Subtel #104 TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/05/2021	Payee name Lisa Soul Food Cafe			
Amount (\$) 51.93	Payee address; 2550 W Redbird Lane Subtell#104/TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 13 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/09/2021	5 Payee name Lisa Soul Food Cafe			
6 Amount (\$) 49.23	7 Payee address; 2550 W Redbird Lane Subal#04TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/26/2021	La Madeline			
Amount (\$) 11.44	Payee address; 6430 N Mac Arthur BlvdIrving, TX 75039	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/29/2021	Payee name Lockhart Smoke House			
Amount (\$) 20.23	Payee address; 400 W Davis St Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Ordan Oard Faymon	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 14 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 03/29/2021	5 Payee name Burger King			
6 Amount (\$) 15.54	7 Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/07/2021	Burger King			
Amount (\$) 10.70	Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/29/2021	Payee name PT Fried Chicken and Fish			
Amount (\$) 33.41	Payee address; 907 Elms St Dallas, TX 75202	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel In District
Travel Out Of District
Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/ The Instruction Guide explains how to	Wages/Contract Labor complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 15 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2021	5 Payee name Chilis		
6 Amount (\$) 96.74	7 Payee address; 2503 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/02/2021	Baby Back Shack		
Amount (\$) 15.10	Payee address; 1800 S Akard St Dallas, TX 75215	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/04/2021	Payee name Cheddars		
Amount (\$) 26.49	Payee address; 39640 LBJ Frwy Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 16 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 03/23/2021	5 Payee name Tennell Atkins Home Depot			
6 Amount (\$) 28.12	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/05/2021	Murphy USA 7674			
Amount (\$) 34.48	Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/19/2021	Payee name Anita Burnett			
Amount (\$) 200.00	Payee address; 8823 East Valley Ranch Swine gl 36 X 75063	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

•	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 17 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2021	5 Payee name CC Printing		
6 Amount (\$) 324.75	7 Payee address; 5534 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description printing	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/17/2021	Payee name US Postal Service		
Amount (\$) 220.00	Payee address; 401 Tom Laundry Hwy Dallas, TX 75260-9996	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/25/2021	Payee name Sams Club		
Amount (\$) 53.10	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 18 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 04/13/2021	5 Payee name Sams Club			
6 Amount (\$) 93.89	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living e	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
Date 04/18/2021	Payee name Sams Club			
Amount (\$) 41.42	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
Date 04/18/2021	Payee name Sams Club			
Amount (\$) 27.56	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living e	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 19 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2021	5 Payee name Office Depot		
6 Amount (\$) 859.43	7 Payee address; 39759 LBJ Frwy Suite 4000 allas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/19/2021	Payee name Office Depot		
Amount (\$) 90.92	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/20/2021	Payee name Office Depot		
Amount (\$) 84.37	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 20 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission File	ers)
4 Date 03/23/2021	5 Payee name Home Depot			
6 Amount (\$) 33.42	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description supplies		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/30/2021	Chilis Bar & Grill			
Amount (\$) 81.98	Payee address; 2503 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 03/24/2021	Payee name La Madeline			
Amount (\$) 11.44	Payee address; 3072 Mockingbird Ln Dallas, TX 75205	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THE	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 21 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2021	5 Payee name La Madeline		
6 Amount (\$) 13.83	7 Payee address; 3072 Mockingbird Ln Dallas, TX 75205	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/02/2021	Payee name Lisas Soul Food Cafe		
Amount (\$) 51.93	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/08/2021	Payee name Lisas Soul Food Cafe		
Amount (\$) 49.23	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	,
1 Total pages Schedule F1: 22 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 03/24/2021	5 Payee name Shake Shack			
6 Amount (\$) 34.89	7 Payee address; 5500 Greenville Ave Dallas, TX 75206	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/31/2021	Baby Back Shack			
Amount (\$) 15.10	Payee address; 1800 Akard Dallas, TX 75215	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/16/2021	Payee name South Dallas Cafe			
Amount (\$) 34.06	Payee address; 7035 Marvin D Love Fwpallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

City Secretary's Office

Supplement Officeholder	tal Report			FOR Cover She	et SR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Tennell	МІ	2. Total Pages Filed: 28	
	NICKNAME	LAST Atkins	SUFFIX	3. Office Held	
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day bef	ore election c Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	c July 15	🗶 8th day befo	re election c Exceeded \$5 limit	00 c Final Report	
5. PERIOD / COVERED		3/23/20)21 THROUGH 4/21/202	1	
6. ELECTION	Month Day Year				
	5/1/2021	c Primar	ry c Runoff	X General c Spe	ecial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00			\$ 0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$0.00
	EXPENDITURE	3. TOTAL OFFICEHO	DLDER EXPENDITURES OF \$100	OR LESS, UNLESS ITEMIZED	\$ 0.00
	TOTALS	4. TOTAL OFFICEHO	OLDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS		L CONTRIBUTIONS OF \$50 OR L NTEES OF LOANS), UNLESS ITEM		\$ 0.00
(Campaign)		6. TOTAL POLITICAL (OTHER THAN PLED	L CONTRIBUTIONS IGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 14,975.00
	EXPENDITURE	7. TOTAL POLITICAL	L EXPENDITURES OF \$100 OR LI	ESS UNLESS ITEMIZED	\$ 0.00
	TOTALS	8. TOTAL POLITICAL	L EXPENDITURES		\$23,640.57
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR			MOUNT OF OFFICEHOLDER CON TURES DURING THE REPORTIN		\$ 0.00
10. AFFIDAVIT		is true a	or affirm, under penalty of nd correct and includes all i er Title 15, Election code.		
			ELECTRONICALL`	Y CERTIFIED	
AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder					
Sworn to and subscribed	before me, by the said Mr T	ennell Atkins		, this the 19th	day
of, 2	0_23, to certify which	, witness my hand an	d seal of office.		
Signature of officer ad	ministering path	Printed name of office	er administering oath	Title of officer ad	ministering oath

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 f	orm.	1 Total pages Schedule A1: 1 of 5
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
03/23/2021	Evalynn Williams		700.00
Campaign Contribution	6 Contributor address; City; 1104 Shadow Wood Trail Desoto, 7	State; Zip Code TX 75115	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
03/23/2021	John W Price		500.00
Campaign Contribution	Contributor address; City; 510 E 5th St Dallas, T	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
03/23/2021	Demetris Sampson		1000.00
Campaign Contribution	Contributor address; City; P.O. Box 2252 Dallas, T	State; Zip Code "X 75222	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 03/24/2021	Full name of contributor	D#:)	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; P.O. Box 226983 Dallas, T	State: Zip Code X 75222	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2 of 5
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	is .	
4 Date	5 Full name of contributor out-of-state_PAC_(ID#:_TX	7 Amount of contribution (\$)
03/31/2021	Tante Williams	1000.00
Campaign Contribution	6 Contributor address; City; State; 1005 Lakeridge Ct Colleyville, TX	Zip Code 76034
8 Principal occu	pation / Job title (See Instructions) 9 Emp	loyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
04/05/2021	HBA of Greater Dallas Homepac	2500.00
Campaign Contribution	Contributor address; City; State; 5816 W Plano Pkwy Plano, TX 7509.	Zip Code
Principal occup	pation / Job title (See Instructions)	loyer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
03/31/2021	The Real Estate Counce Political Action Committee	2500.00
Campaign Contribution	Contributor address; City; State; 6100 McKinnon St Suite 1150 Dallas, TX 7520	Zip Code)1
Principal occup	pation / Job title (See Instructions) Emp	loyer (See Instructions)
Date 03/23/2021	Full name of contributor	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; State; 1412 Griffin St East Dallas, TX 7521	Zip Code 15
	pation / Job title (See Instructions) Emp	loyer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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	s form.	1 Total pages Schedule A1: 3 of 5
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state PA	C (ID#:)	7 Amount of contribution (\$)
04/10/2021	RKCJ LLC		500.00
Campaign Contribution	6 Contributor address; City; 2642 S Harwood Dallas	State; Zip Code , TX 75215	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor ut-of-state PA	C (ID#:)	Amount of contribution (\$)
04/14/2021	Dallas Firefighters Association Public Safet	y Committee	1000.00
Campaign Contribution	Contributor address; City; 10956 Audelia Rd Dallas	State; Zip Code , TX 75243-8204	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	iions)
Date	Full name of contributor	C (ID#:)	Amount of contribution (\$)
03/25/2021	Jon Killen		75.00
Campaign Contribution	Contributor address; City; 2050 Chevella Dr Dallas	State; Zip Code , TX 75232	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 03/31/2021	Full name of contributor □ out-of-state PA CHRIS HAMILTON	C (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 5521 Swiss Ave DALI	State; Zip Code AS, TX 752I4	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 4 of 5
2 FILER NAME	:	3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ins	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
04/09/2021	South Oak Cliff Alumi Dear Cave	100.00
Campaign Contribution	6 Contributor address; City; State; Zip Code 3601 S Marsailis Dallas, TX 75216	
8 Principal occi	upation / Job title (See Instructions) 9 Employer (See Inst	ructions)
Date	Full name of contributor	_) Amount of contribution (\$)
04/15/2021	Syd Hurley	500.00
Campaign Contribution	Contributor address; City; State; Zip Code 8750 N Central Expressway Dallas, TX 75206	
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	ructions)
Date	Full name of contributor out-of-state PAC (ID#:	_) Amount of contribution (\$)
04/15/2021	Larry Offutt	100.00
Campaign Contribution	Contributor address; City; State; Zip Code 6038 Bryan Pkwy Dallas, TX 75206	
Principal occu	pation / Job title (See Instructions) Employer (See Instructions)	ructions)
Date 04/19/2021	Full name of contributor	_) Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; DALLAS, TX 75215	
Principal occu	pation / Job title (See Instructions) Employer (See Inst	ructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 5 of 5
2 FILER NAME Mr Tennell Atkir	ıs			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
04/16/2021	Bradford A Phillips			1000.00
Campaign Contribution	6 Contributor address; 5515 Lebello Dr	City; Dallas,	State; Zip Code TX 75229	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/16/2021	Timothy Pannell			1000.00
Campaign Contribution	Contributor address; 4361 Cedar Lake Drive	City;	State; Zip Code TX 75227	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	ATTACH ADDIT	IONAL CODIES	OF THIS SCHEDULE AS N	IFFDED
	ATTACHADDII	ICITAL OUTIES (OF THE OWNED OF ENDIN	122727

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

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Ordan Oard Faymon	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 1 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/31/2021	The Order Desk		
6 Amount (\$) 4577.89	7 Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	9890 Monore Dr Suite 104 allas, TX 75230		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising Expense	postage	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/01/2021	Relly Echols Printing		
Amount (\$) 4122.16	Payee address; P700Boxu129Harwood SuiDa1190,1TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	,		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
EXI ENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/08/2021	MMS Company Ad Specialties, LLC		
Amount (\$) 997.50	Payee address; PIO.NBb33990Suite 2901 Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Liv. Bow 2 As Bulle 2701 Dallas, 1A 13231		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/05/2021	MMS Company Ad Specialties, LLC		
6 Amount (\$) 960.00 Campaign Funds for Campaign Expenditures	7 Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising Expense	advertising	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/13/2021	MMS Company Ad Specialties, LLC		
Amount (\$) 339.00 Campaign Funds for Campaign Expenditures	Payee address; 217 N I-35 E Desoto, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	ad	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/15/2021	Black Business Directory		
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; 8401 Manchester Dr Rowlett, TX 75089	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 3 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/13/2021	Gail Turner		
6 Amount (\$) 200.00 Campaign Funds for Campaign Expenditures	7 Payee address; 524 Sumac Place DeSoto, TX 75115	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/13/2021	Lucy Cain		
Amount (\$) 200.00 Campaign Funds for	Payee address; 4312 Spring St Dallas, TX 75215	City;	State; Zip Code
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/16/2021	CCP Printing		
Amount (\$) 300.00	Payee address; 5534 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	555+5 Hampton Ru Danas, 1X 15252		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Printing Expense	printing	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 4 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/15/2021	James Virden			
6 Amount (\$) 1586.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3424 Hacienda Dr Dallas, TX 75233	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/15/2021	LaShun Virden			
Amount (\$) 1586.00	Payee address; 3424 Hacienda Dr Dallas, TX 75233	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	labor		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
03/24/2021	ECO Latino			
Amount (\$) 599.00	Payee address; 2320 W Davis St Dallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2320 W Davis St Danas, TA /3208			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Advertising Expense	advertising		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 5 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
04/15/2021	Beyond the Slogan		
6 Amount (\$) 1650.00	7 Payee address; 4201 Bunker Hill Rd Suite 5111	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Garland, TX 75048		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting Expense	consulting	
OF EXPENDITURE			
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atloms	Office sought Council District 8	Office held
Date	Payee name		
03/29/2021	Sams Club		
Amount (\$) 43.30	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/23/2021	Sams Club		
Amount (\$) 40.72	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	:DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 6 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/26/2021	Sams Club		
6 Amount (\$) 36.87 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/26/2021	Sams Club		
Amount (\$) 53.70	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/31/2021	Sams Club		
Amount (\$) 45.70	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2700 w wheatiand Ru Danas, 1A /323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 7 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/06/2021	Sams Club			
6 Amount (\$) 43.62 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/09/2021	Big Bang Endeavors			
Amount (\$) 325.00	Payee address; 103 NW 14th St Grand Prairie, TX 75050	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Printing Expense	printing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
04/01/2021	Phone Burner			
Amount (\$) 298.00	Payee address; 1968 S Coast Hwy Long Beach, CA 92651	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Bong Bouch, 61172001			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Office Overhead/Rental Expense	phone		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Travel In District
Travel Out Of District
Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 8 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/05/2021	ATT		
6 Amount (\$) 383.00 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 6811 Dallas, CA 75225	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/01/2021	Jefferson Monument		
Amount (\$) 350.00 Campaign Funds for Campaign Expenditures	Payee address; 1350 Manufacturing St Dallas, TX 75207	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	rent	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/02/2021	Tennell Atkins Office Depot		
Amount (\$) 859.43 Campaign Funds for Campaign Expenditures	Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	office supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 9 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/24/2021	Gonzalez Resturant		
6 Amount (\$) 31.28	7 Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3697 W Jefferson Suite 1929 Dallas, TX 75208		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atlins	Office sought Council District 8	Office held
Date	Payee name		
03/30/2021	Pizza Hut		
Amount (\$) 11.98	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3333 W Camp Wisdom Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
02/25/2021	11.5		
03/25/2021	McDonalds		
Amount (\$) 6.05	Payee address; 705 W Jefferson Dallas, TX 75208	City;	State; Zip Code
Campaign Funds for	2 mms, 111 / 0 2 00		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense	food	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
expenditure to benefit C/OH	Telliell Attilis		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	:DED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	cale. (cities a category not noted apove)
1 Total pages Schedule F1: 10 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/28/2021	Paradiso		
6 Amount (\$) 37.89 Campaign Funds for	7 Payee address; 308 N Bishop Dallas, TX 75208	City;	State; Zip Code
Campaign Expenditures	(2) Cotogony (See Cotogonica listed at the tax of this schedule)	(b) Description	
8	(a) Category (See Categories listed at the top of this schedule)		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/28/2021	Paradiso		
Amount (\$) 39.06	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	308 N Bishop Dallas, TX 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/28/2021	Paradiso		
Amount (\$) 39.06	Payee address; 308 N Bishop Dallas, TX 75208	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Joe Iv Bishop Dallas, 1A 73206		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/28/2021	Olive Garden		
6 Amount (\$) 26.07 Campaign Funds for Campaign Expenditures	7 Payee address; 639 S Cockrell Hill Rd Duncanville, TX 75116	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/30/2021	The Island Spot		
Amount (\$) 58.71	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		T =	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/06/2021	KFC		
Amount (\$) 18.25	Payee address; 3415 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	5415 W Camp Wisdom Danas, 1X /525/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (enter a category	nother above,
1 Total pages Schedule F1: 12 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics (Commission Filers)
4 Date	5 Payee name		<u> </u>	
03/23/2021	Lisa Soul Food Cafe			
6 Amount (\$) 30.30 Campaign Funds for Campaign Expenditures	7 Payee address; 2550 W Redbird Lane Suite 404 Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	O	ffice held
Date	Payee name			
03/23/2021	Lisa Soul Food Cafe			
Amount (\$) 30.30 Campaign Funds for Campaign Expenditures	Payee address; 2550 W Redbird Lane Suite 404 Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living ex	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
Date	Payee name			
04/05/2021	Lisa Soul Food Cafe			
Amount (\$) 51.93 Campaign Funds for Campaign Expenditures	Payee address; 2550 W Redbird Lane Suite 404 Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living ex	rpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Guiei (einei a sategei	, nethered above,
1 Total pages Schedule F1: 13 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/09/2021	Lisa Soul Food Cafe			
6 Amount (\$) 49.23 Campaign Funds for Campaign Expenditures	7 Payee address; 2550 W Redbird Lane Suite 404 Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date	Payee name			
03/26/2021	La Madeline			
Amount (\$) 11.44 Campaign Funds for Campaign Expenditures	Payee address; 6430 N Mac Arthur BlvdIrving, TX 75039	City;	State;	Zip Code
1 0 1	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	(Office held
Date	Payee name			
03/29/2021	Lockhart Smoke House			
Amount (\$) 20.23 Campaign Funds for Campaign Expenditures	Payee address; 400 W Davis St Dallas, TX 75208	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Garer (errier a satege	.,
1 Total pages Schedule F1: 14 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name		<u> </u>	
03/29/2021	Burger King			
6 Amount (\$) 15.54 Campaign Funds for	7 Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/07/2021	Burger King			
Amount (\$) 10.70	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2403 W Wheatland Rd Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/29/2021	PT Fried Chicken and Fish			
Amount (\$) 33.41	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	907 Elms St Dallas, TX 75202			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 15 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
03/31/2021	Chilis			
6 Amount (\$) 96.74 Campaign Funds for Campaign Expenditures	7 Payee address; 2503 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/02/2021	Baby Back Shack			
Amount (\$) 15.10	Payee address; 1800 S Akard St Dallas, TX 75215	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
04/04/2021	Cheddars			
Amount (\$) 26.49	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	39640 LBJ Frwy Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Food/Beverage Expense	food		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 16 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
03/23/2021	Tennell Atkins Home Depot			
6 Amount (\$) 28.12 Campaign Funds for Campaign Expenditures	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/05/2021	Murphy USA 7674			
Amount (\$) 34.48	Payee address; 605 Uptown Blvd Cedar Hill, TX 75104	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		Description		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
	•			
04/19/2021	Anita Burnett			
Amount (\$) 200.00	Payee address; 8823 East Valley Ranch Suite 136	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	Irving, TX 75063			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Salaries/Wages/Contract Labor	labor		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By
Candidate/Officeholder/Political Co

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 17 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
04/06/2021	CC Printing		
6 Amount (\$) 324.75 Campaign Funds for	7 Payee address; 5534 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Printing Expense	printing	
OF EXPENDITURE			
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/17/2021	US Postal Service		
Amount (\$) 220.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	401 Tom Laundry Hwy Dallas, TX 75260-9996		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/25/2021	Sams Club		
Amount (\$) 53.10	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (ether a satege	,
1 Total pages Schedule F1: 18 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/13/2021	Sams Club			
6 Amount (\$) 93.89 Campaign Funds for	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Expenditures	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/18/2021	Sams Club			
Amount (\$) 41.42 Campaign Funds for Campaign Expenditures	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Expenditures	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/18/2021	Sams Club			
Amount (\$) 27.56 Campaign Funds for Campaign Expenditures	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	, , ,	,
1 Total pages Schedule F1: 19 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics (Commission Filers)
4 Date	5 Payee name			
04/01/2021	Office Depot			
6 Amount (\$) 859.43 Campaign Funds for Campaign Expenditures	7 Payee address; 39759 LBJ Frwy Suite 4000allas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	office held
Date	Payee name			
04/19/2021	Office Depot			
Amount (\$) 90.92	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	0	ffice held
	Tellion Trains	Council District 6		
Date	Payee name			
04/20/2021	Office Depot			
Amount (\$) 84.37	Payee address; 39759 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	37/37 EB3 11wy Danas, 17/3237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	supplies		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living ex	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	C	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 20 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/23/2021	Home Depot		
6 Amount (\$) 33.42	7 Payee address; 2901 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Office Overhead/Rental Expense	supplies	
EXPENDITURE			
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/30/2021	Chilis Bar & Grill		
Amount (\$) 81.98	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2503 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/24/2021	La Madeline		
Amount (\$) 11.44	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	3072 Mockingbird Ln Dallas, TX 75205		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
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SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 21 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/08/2021	La Madeline			
6 Amount (\$) 13.83 Campaign Funds for Campaign Expenditures	7 Payee address; 3072 Mockingbird Ln Dallas, TX 75205	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/02/2021	Lisas Soul Food Cafe			
Amount (\$) 51.93	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
04/08/2021	Lisas Soul Food Cafe			
Amount (\$) 49.23	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2550 w Redbird Lane Danas, 1X /525/			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Food/Beverage Expense	food		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 22 of 22	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
03/24/2021	Shake Shack		
6 Amount (\$) 34.89	7 Payee address; 5500 Greenville Ave Dallas, TX 75206	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Food/Beverage Expense	food	
EXPENDITURE			
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
03/31/2021	Baby Back Shack		
Amount (\$) 15.10	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1800 Akard Dallas, TX 75215		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense	food	
EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/16/2021	South Dallas Cafe		
Amount (\$) 34.06	Payee address;	City;	State; Zip Code
Campaign Funds for	7035 Marvin D Love FwtDallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	food	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED