City Secretary's Office

(214)670-3738

| Suppleme Officehold | ntal Report er | | FOR Cover She | et SR |
|--|-------------------------------------|---|---|------------------|
| 1. CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr | FIRST MI Tennell | 2. Total Pages Filed: 44 | |
| | NICKNAME | LAST SUFFIX Atkins | 3. Office Held | |
| 4. SUPPLEMENTAL REPORT TYPE | ☆ January 15 | c 30th day before election c Runoff | c 15th day after camp treasurer appointme (officeholder only) | |
| | c July 15 | c 8th day before election c Exceeded \$50 limit | | |
| 5. PERIOD / COVERED | | 7/1/2022 THROUGH 12/31/202 | 22 | |
| 6. ELECTION | Month Day Year | c Primary 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 O | F LOANS) | \$0.00 |
| | EXPENDITURE | 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 C | DR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | TOTALS | 4. TOTAL OFFICEHOLDER EXPENDITURES \$ 0.00 | | |
| 8. POLITICAL | CONTRIBUTION TOTALS | 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00 | | \$ 0.00 |
| (Campaign) | | 6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES (| OF LOANS) | \$ 19,850.00 |
| | EXPENDITURE | 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LE | SS UNLESS ITEMIZED | \$ 0.00 |
| | TOTALS | 8. TOTAL POLITICAL EXPENDITURES | | \$22,899.09 |
| 9. OFFICEHOLDER F FOR CAMPAIGN PU | | 9. TOTAL DOLLAR AVOUNT OF OFFICEHOLDER CON CAMPAIGN EXPENDITURES DURING THE REPORTING | | \$0.00 |
| 10. AFFIDAVIT | | I swear, or affirm, under penalty of is true and correct and includes all ir me under Title 15, Election code. | | |
| AFFLY MOTARY ST | TAMP / SEAL ABOVE | ***ELECTRONICALLY | CERTIFIED*** | |
| ATTA NOTALL S | / GENERIOVE | Signature of Candidate | e or Officeholder | |
| Sworn to and subscribe | ed before me, by the said Mr^{-1} | Tennell Atkins | , this the16th | day |
| | | n, witness my hand and seal of office. | | |
| Signature of officer | administering oath | Printed name of officer 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 fe | orm. | 1 Total pages Schedule A1: 1 of 6 |
|--------------------------|---|--------------------------------------|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Mr Tennell Atkii | ns | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (II | D#:) | 7 Amount of contribution (\$) |
| 11/04/2022 | Iyriad Roofing & Construction LLC | | 1000.00 |
| Campaign Contribution | 6 Contributor address; City; 6060 Chevelia Dr Dallas, T | State; Zip Code 'X 75232-4159 | |
| 8 Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor out-of-state PAC (II | D#:) | Amount of contribution (\$) |
| 11/04/2022 | Annette Graves | | 500.00 |
| Campaign Contribution | Contributor address; City; 1017 Water Street Carrollto | State; Zip Code on, TX 75007-2905 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor | D#:) | Amount of contribution (\$) |
| 11/04/2022 | Stephony Chopp | | 1000.00 |
| Campaign Contribution | Contributor address; City; 2448 Club Manor Dr Dallas, T | State; Zip Code 'X 75237-2702 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date 07/29/2022 | Full name of contributor out-of-state_PAC (II SOUTHWEST AIRLINES CO FREEDOM FU | | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; City; P.O. Box 36611 Dallas, T | State: Zip Code X 75235 | |
| 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 f | form. | 1 Total pages Schedule A1: 2 of 6 |
|---|---|--------------------------------|---------------------------------------|
| 2 FILER NAME Mr Tennell Atkir | is | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (| ID#:) | 7 Amount of contribution (\$) |
| 08/04/2022 | SOUTHWEST AIRLINES CO FREEDOM F | | 1000.00 |
| Campaign Contribution | 6 Contributor address; City; | State; Zip Code ΓX 75235 | |
| 8 Principal occu | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| Date | Full name of contributor | ID#:) | Amount of contribution (\$) |
| 08/01/2022 | Demetris Sampson | | 250.00 |
| Campaign Contribution | Contributor address; City; P.O. Box 763837 Dallas, 7 | State; Zip Code IX 75376 | |
| Principal occup | ation / Job title (See Instructions) | Employer (See Instruction | ons) |
| Date | Full name of contributor | ID#:) | Amount of contribution (\$) |
| 07/13/2022 | AFISU OLABIMTAN | | 1000.00 |
| Campaign Contribution | Contributor address; City; 74 BUCK TRAIL SADLE | State; Zip Code R, TX 76264 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| Date 07/06/2022 | Full name of contributor | ID#:) | Amount of contribution (\$) 500.00 |
| Campaign Contribution | Contributor address; 1065 Peachtree St NE Suite 3104 Atlanta, | State: Zip Code GA 30309 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| | | | |

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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 t | form. | 1 Total pages Schedule A1: 3 of 6 |
|---|--|------------------------------------|---------------------------------------|
| 2 FILER NAME Mr Tennell Atkin | ıs | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor out-of-state PAC (| ID#:) | 7 Amount of contribution (\$) |
| 11/08/2022 | Trelaine M Mapp | | 750.00 |
| Campaign Contribution | 6 Contributor address; City; 12612 Beech Tree Lane Euless, T | State; Zip Code ΓX 76040 | |
| 8 Principal occu | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| Date | Full name of contributor | ID#:) | Amount of contribution (\$) |
| 11/08/2022 | Wayne T Warren | | 1000.00 |
| Campaign Contribution | Contributor address; City; 7 Equestrian Trail Duncany | State; Zip Code ville, TX 75116 | |
| Principal occup | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| Date | Full name of contributor | ID#:) | Amount of contribution (\$) |
| 11/07/2022 | Russell Glenn Company | | 500.00 |
| Campaign Contribution | Contributor address; City; 1722 Routh St Dallas, 7 | State; Zip Code ГХ 75201 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| Date 11/10/2022 | Full name of contributor | ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address: City; 600 Six Flags Dr Suite 435 Arlingto | State; Zip Code n, TX 76011 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructi | ons) |
| | | | |
| | | | |
| | | | |

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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 comple | ete this form. | 1 Total pages Schedule A1: 4 of 6 |
|--------------------------|---|---|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Mr Tennell Atkin | as | | |
| 4 Date | 5 Full name of contributor out-of-s | state PAC (ID#:) | 7 Amount of contribution (\$) |
| 11/05/2022 | Chuck Hixson | | 100.00 |
| Campaign Contribution | 6 Contributor address; City; 1030 Harvest Hill | State; Zip Code Prosper, TX 75078 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruc | ctions) |
| Date | Full name of contributor uut-of-s | state PAC (ID#:) | Amount of contribution (\$) |
| 10/13/2022 | Steven A Okon | | 1000.00 |
| Campaign Contribution | Contributor address; City; | State; Zip Code Dallas, TX 75230 | |
| Principal occup | ation / Job title (See Instructions) | Employer (See Instruc | ctions) |
| Date | Full name of contributor | state PAC (ID#:) | Amount of contribution (\$) |
| 10/13/2022 | Beth Freundlich Trustee | | 1000.00 |
| Campaign Contribution | Contributor address; City; 4283 NW 64th St | State; Zip Code Boca Raton, FL 33496 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | ctions) |
| Date 11/08/2022 | Full name of contributor | state PAC (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; City; 1900 North Akard St | Dallas, TX 75201 ^{Zip Code} | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | ctions) |
| | | | |

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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 | e this form. | 1 Total pages Schedule A1: 5 of 6 |
|--------------------------|---|-------------------------------------|---------------------------------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Mr Tennell Atki | ns | | |
| 4 Date | 5 Full name of contributor out-of-sta | te PAC (ID#:) | 7 Amount of contribution (\$) |
| 08/26/2022 | FRED H MARGOLIN | | 250.00 |
| Campaign Contribution | 6 Contributor address; City; 2828 HOOD ST Suite 1604 D. | State; Zip Code ALLAS, TX 75219 | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | te PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Mary Vasquez | | 1000.00 |
| Campaign Contribution | Contributor address; City; | State; Zip Code aty, TX 77493 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date | Full name of contributor | te PAC (ID#:) | Amount of contribution (\$) |
| 12/12/2022 | Anthony J Aranza | | 1000.00 |
| Campaign Contribution | Contributor address; City; 1507 Stonehedge Bend Dr H | State; Zip Code ouston, TX 77073 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| Date 12/16/2022 | Full name of contributor ☐ out-of-sta | te PAC (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; City; 5 Lazee Trail H | State: Zip Code ouston, TX 77024 | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruc | tions) |
| | | | |

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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: 6 of 6 |
|--------------------------|---|------------------|--------------------------------|---------------------------------------|
| 2 FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| Mr Tennell Atkins | S | | | |
| 4 Date | 5 Full name of contributor | out-of-state PAC | C (ID#:) | 7 Amount of contribution (\$) |
| 12/16/2022 | Katherine R Crow | | | 1000.00 |
| Campaign Contribution | 6 Contributor address; 4700 Preston Rd | City; Dallas, | State; Zip Code TX 75205 | |
| 8 Principal occup | pation / Job title (See Instructions) | | 9 Employer (See Instruc | tions) |
| Date | Full name of contributor | out-of-state PAC | ; (ID#:) | Amount of contribution (\$) |
| 12/20/2022 | Harlan R Crow | | | 1000.00 |
| Campaign Contribution | Contributor address; 3819 Maple Ave | City; | State; Zip Code TX 75219 | |
| Principal occupa | ation / Job title (See Instructions) | | Employer (See Instruct | tions) |
| Date | Full name of contributor | out-of-state PAC | C (ID#:) | Amount of contribution (\$) |
| 11/17/2022 | Edwin Jones | | | 1000.00 |
| Campaign Contribution | Contributor address; 1316 Parkview Lane | City; Murph | State; Zip Code y, TX 75094 | |
| Principal occupa | ation / Job title (See Instructions) | | Employer (See Instruc | tions) |
| Date 12/21/2022 | Full name of contributor Trammell S Crow | out-of-state PAC | C (ID#:) | Amount of contribution (\$) 1000.00 |
| Campaign Contribution | Contributor address; 4000 Rock Creek Dr | City; Dallas, | State: Zip Code TX 75204 | |
| | ation / Job title (See Instructions) | | Employer (See Instruc | tions) |

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 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/01/2022 | Jefferson Monument | | | |
| 6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 1350 Manufacturing St Dallas, TX 75207 | 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 | rent | | |
| | (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 | | | |
| 08/01/2022 | Jefferson Monument | | | |
| Amount (\$) 350.00 | Payee address; 1350 Manufacturing St Dallas, TX 75207 | 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 | 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 | Candidate / Officeholder name | Office sought | | Office held |
| expenditure to benefit C/OH | Tennell Atkins | Council District 8 | | |
| Date | Payee name | | | |
| 09/01/2022 | Jefferson Monument | | | |
| Amount (\$) 350.00 | Payee address; | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1350 Manufacturing St Dallas, TX 75207 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Office Overhead/Rental Expense | rent | | |
| 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. | | |
|---|--|-------------------------------------|----------------------------|----------------------|
| 1 Total pages Schedule F1: 2 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/01/2022 | Jefferson Monument | | | |
| 6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 1350 Manufacturing St Dallas, TX 75207 | 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 | rent | | |
| | (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 | | | |
| 11/01/2022 | Jefferson Monument | | | |
| Amount (\$) 350.00 | Payee address; 1350 Manufacturing St Dallas, TX 75207 | 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 | Office Overhead/Rental Expense | rent | | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g 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 | | | |
| 12/01/2022 | Jefferson Monument | | | |
| Amount (\$) 350.00 | Payee address; 1350 Manufacturing St Dallas, TX 75207 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 1330 Wandacturing St. Danas, 1A 73207 | | | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE | Office Overhead/Rental Expense | rent | | |
| 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

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

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: 3 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/01/2022 | ATT | | |
| 6 Amount (\$) 429.00 | 7 Payee address; P.O. Box 6811 Dallas, TX 75225 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Office Overhead/Rental Expense | phone | |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | 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 | | |
| 08/01/2022 | ATT | | |
| Amount (\$) 440.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | P.O. Box 6811 Dallas, TX 75225 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead/Rental Expense | phone | |
| EXPENDITORE | 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 | | |
| 09/01/2022 | ATT | | |
| Amount (\$) 447.00 | Payee address; P.O. Box 6811 Dallas, TX 75225 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | r.O. Box 0011 Danas, 1A 13223 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE | Office Overhead/Rental Expense | phone | |
| 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

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/Magnes/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: 4 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/01/2022 | ATT | | |
| 6 Amount (\$) 568.00 | 7 Payee address; P.O. Box 6811 Dallas, TX 75225 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE | Office Overhead/Rental Expense | phone | |
| OF EXPENDITURE | | | |
| | (c) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 11/01/2022 | ATT | | |
| Amount (\$) 453.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | P.O. Box 6811 Dallas, TX 75225 | | |
| | 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 Austi | n, TX, officeholder living expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Council District 8 | Office Held |
| Date | Payee name | | |
| 12/01/2022 | ATT | | |
| Amount (\$) 451.00 | Payee address; P.O. Box 6811 Dallas, TX 75225 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1.0. DOX 0011 Dallas, 1A 75225 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE | Office Overhead/Rental Expense | phone | |
| 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 THI | 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 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: 5 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethic | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/01/2022 | Sams Club | | | |
| 6 Amount (\$) 45.00 | 7 Payee address; 2900 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 EXPENDITURE | Transportation Equipment & Related Expense | gas | | |
| | (C) Check if travel outside of Texas. Complete Schedule T. | Check if Austi | n, TX, officeholder living | g expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | | Office held |
| Date | Payee name | | | |
| 07/05/2022 | Sams Club | | | |
| Amount (\$) 66.00 | 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 | | |
| LAI ENDITORE | 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 | Payee name | | | |
| 07/05/2022 | Sams Club | | | |
| Amount (\$) 100.00 | 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 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. | outer (errier a satisge | ., |
|--|--|-------------------------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 6 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name Sams Club | | | |
| 07/06/2022 6 Amount (\$) | | City | State | Zin Codo |
| 35.00 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 | | | |
| 07/06/2022 | Sams Club | | | |
| Amount (\$) 25.00 | 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 expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | | Office held |
| Date | Payee name | | | |
| 07/08/2022 | Sams Club | | | |
| Amount (\$) 20.00 | Payee address; 2900 W Wheatland Rd Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2700 w wheatiand Ru Danas, 1A 13231 | | | |
| | 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 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: 7 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/11/2022 | Sams Club | | |
| 6 Amount (\$) 78.00 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 | | |
| 07/18/2022 | Sams Club | | |
| Amount (\$) 67.00 | 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 | | |
| 07/18/2022 | Sams Club | | |
| Amount (\$) 58.00 | 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 | 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

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: 8 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/19/2022 | Sams Club | | | |
| 6 Amount (\$) 91.00 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 e | expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | C | Office held |
| Date | Payee name | | | |
| 07/22/2022 | Sams Club | | | |
| Amount (\$) 97.00 | 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 e | xpense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | C | Office held |
| expenditure to benefit C/OH | Tennell Atkins | Council District 8 | | |
| Date | Payee name | | | |
| 07/25/2022 | Sams Club | | | |
| Amount (\$) 55.00 | Payee address; 2900 W Wheatland Rd Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2700 W Wilediand 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 e | xpense |
| 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: 9 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 07/28/2022 | Sams Club | | | |
| 6 Amount (\$) 38.00 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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | | Office held |
| Date | Payee name | | | |
| 08/01/2022 | Sams Club | | | |
| Amount (\$) 34.00 | Payee address; 2900 W Wheatland Rd Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | _ | T | | |
| | 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 | | | |
| 08/08/2022 | Sams Club | | | |
| Amount (\$) 32.00 | Payee address; 2900 W Wheatland Rd Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2500 W Whouthaid Rd Bahas, 112 13237 | | | |
| | 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: 10 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | s Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 08/12/2022 | Sams Club | | | |
| 6 Amount (\$) 48.00 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 | 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 | | | |
| 08/18/2022 | Sams Club | | | |
| Amount (\$) 52.00 | 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 | 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 | | | |
| 08/25/2022 | Sams Club | | | |
| Amount (\$) 36.00 | Payee address; 2900 W Wheatland Rd Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 w wheatland Ru Danias, 1X /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 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 | 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. | |
|---|--|-------------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | , |
| 08/26/2022 | Sams Club | | |
| 6 Amount (\$) 100.00 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 Aust | in, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 08/26/2022 | Sams Club | | |
| Amount (\$) 11.00 | 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 | | |
| 08/29/2022 | Sams Club | | |
| Amount (\$) 36.00 | 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 | 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

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. | Other (enter a category not isseed above | <i>=)</i> |
|--|--|-------------------------------------|--|-----------|
| 1 Total pages Schedule F1: 12 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Fi | ilers) |
| 4 Date | 5 Payee name | | | |
| 08/29/2022 | Sams Club | | | |
| 6 Amount (\$) 47.00 Campaign Funds for | 7 Payee address; 2900 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 | 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 | | | |
| 07/01/2022 | Popeyes | | | |
| Amount (\$) 27.04 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2972 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 | | | |
| 07/18/2022 | Popeyes | | | |
| Amount (\$) 131.00 | Payee address; 2972 W Wheatland Rd Dallas, TX 75237 | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 27/2 W Wheatana Rd Bahas, 17(73237 | | | |
| | 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 | 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. | |
|--|--|-------------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 13 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/26/2022 | Popeyes | | |
| 6 Amount (\$) 58.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2972 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 | 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 | | |
| 10/11/2022 | Popeyes | | |
| Amount (\$) 41.00 | Payee address; 2972 W Wheatland Rd Dallas, TX 75237 | 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 | | |
| 07/01/2022 | CAMPISIS | | |
| Amount (\$) 38.00 | Payee address; 1520 ELM ST DALLAS, TX 75201 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1320 ELM 31 DALLAS, 1X 73201 | | |
| | 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

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. | eale. (e.le. a salegel, liethere azete, |
|--|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 14 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | l | |
| 08/16/2022 | CAMPISIS | | |
| 6 Amount (\$) 93.00 Campaign Funds for | 7 Payee address; 1520 ELM ST DALLAS, TX 75201 | 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 | | |
| 09/12/2022 | CAMPISIS | | |
| Amount (\$) 42.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1520 ELM ST DALLAS, TX 75201 | | |
| | 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 | | |
| 10/04/2022 | CAMPISIS | | |
| Amount (\$) 149.00 | Payee address; 1520 ELM ST DALLAS, TX 75201 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1320 ELM 31 DALLAS, 1A 73201 | | |
| | 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 |

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. | cals. (cind. a category not local approx |
|--|---|-------------------------------------|--|
| 1 Total pages Schedule F1: 15 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 11/28/2022 | 5 Payee name CAMPISIS | | |
| 6 Amount (\$) 51.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 1520 ELM ST DALLAS, TX 75201 | 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 | | |
| 12/06/2022 | CAMPISIS | City; | State; Zip Code |
| Amount (\$) 63.00 Campaign Funds for Campaign Expenditures | Payee address; 1520 ELM ST DALLAS, TX 75201 | 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 | Payee name | | |
| 12/12/2022 | CAMPISIS | | |
| Amount (\$) 16.00 Campaign Funds for Campaign Expenditures | Payee address; 1520 ELM ST DALLAS, TX 75201 | 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 | 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. | Other (enter a category not listed above) |
|--|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 16 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 12/12/2022 | CAMPISIS | | |
| 6 Amount (\$) 65.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 1520 ELM ST DALLAS, TX 75201 | City; | State; Zip Code |
| 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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 07/07/2022 | Chubbys | | |
| Amount (\$) 41.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 7474 Cockrell Hill Dallas, TX 75236 | | |
| | 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 | | |
| | | | |
| 08/15/2022 | Outback | | |
| Amount (\$) 82.00 | Payee address; 1101 N I-35 E Desoto, TX 75115 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 20000, 1175115 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Gift/Awards/Memorials 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. | | |
|---|--|-------------------------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 17 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 09/01/2022 | Ojeda Family Rest. | | | |
| 6 Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2109 N Hampton Desoto, TX 75115 | 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 | | | |
| 09/19/2022 | Ojeda Family Rest. | | | |
| Amount (\$) 78.00 | Payee address; 2109 N Hampton Desoto, TX 75115 | 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 | | | |
| 12/02/2022 | Ojeda Family Rest. | | | |
| Amount (\$) 60.00 | Payee address; 2109 N Hampton Desoto, TX 75115 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2109 N Hampton Desoto, 1X 73113 | | | |
| | 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 |
| | 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 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: 18 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/15/2022 | Saltgrass | | |
| 6 Amount (\$) 109.00 Campaign Funds for | 7 Payee address; 747 N Hwy 67 Suite 747Cedar Hill, TX 75104 | City; | State; Zip Code |
| Campaign Expenditures | | | |
| 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 Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 10/03/2022 | Bone Daddy | | |
| Amount (\$) 198.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 415 E Interstate 20 Arlington, TX 76017 | | |
| | 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 | | |
| 09/06/2022 | Sams Club | | |
| Amount (\$) 48.00 | Payee address; | City; | State; Zip Code |
| | 2900 W Wheatland Dallas, TX 75237 | | |
| 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 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

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

| Candidate/Officeholder/Politica Credit Card Payment | ll Committee Legal Services Salaries/ | Wages/Contract Labor | Other (enter a category not listed above) |
|--|--|-------------------------------------|---|
| | The Instruction Guide explains how to | complete this form. | |
| 1 Total pages Schedule F1: 19 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 09/08/2022 | Sams Club | | |
| 6 Amount (\$) 48.00 Campaign Funds for | 7 Payee address; 2900 W Wheatland 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 | 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 | | |
| 09/08/2022 | Sams Club | | |
| Amount (\$) 42.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 | | |
| | • | | |
| 09/12/2022 | Sams Club | | |
| Amount (\$) 23.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland Dallas, TX 75237 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Transportation Equipment & Related | gas | |
| EXPENDITURE | Expense | | |
| | 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: 20 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date | 5 Payee name | | | |
| 09/12/2022 | Sams Club | | | |
| 6 Amount (\$) 55.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 29000 W Wheatland 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 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 | | | |
| 09/19/2022 | Sams Club | | | |
| Amount (\$) 69.00 | Payee address; 2900 W Wheatland 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 Austin, 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 | | | |
| 09/23/2022 | Sams Club | | | |
| Amount (\$) 46.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 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. | Other (enter a category not listed above) |
|---|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 21 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | l | |
| 09/26/2022 | Sams Club | | |
| 6 Amount (\$) 57.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 | | |
| 09/26/2022 | Sams Club | | |
| Amount (\$) 41.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 00/20/2020 | | | |
| 09/30/2022 | Sams Club | | |
| Amount (\$) 44.00 Campaign Funds for Campaign Expenditures | Payee address; 2900 W Wheatland 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 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

| 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 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | l | |
| 10/03/2022 | Sams Club | | |
| 6 Amount (\$) 47.00 | 7 Payee address; 2900 W Wheatland 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 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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 10/06/2022 | Sams Club | | |
| Amount (\$) 56.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 | | |
| 10/11/2022 | Sams Club | | |
| Amount (\$) 31.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 w wheatiand Danas, 1A /323/ | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF | Transportation Equipment & Related | gas | |
| EXPENDITURE | Expense | | |
| | 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

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: 23 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/14/2022 | Sams Club | | | |
| 6 Amount (\$) 28.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 | | | |
| 10/17/2022 | Sams Club | | | |
| Amount (\$) 43.00 | Payee address; 2900 W Wheatland 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 | 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 | | | |
| 10/19/2022 | Sams Club | | | |
| Amount (\$) 89.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 w wheatiand Danas, 1X /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 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. | outer (enter a satisfier) necticular aper | ٥, |
|--|--|-------------------------------------|---|--------|
| 1 Total pages Schedule F1: 24 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission F | ilers) |
| 4 Date | 5 Payee name | | | |
| 10/17/2022 6 Amount (\$) | Sams Club 7 Payee address; | City; | State; Zip Code | |
| 26.00 | 2900 W Wheatland 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 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 | | | |
| 10/21/2022 | Sams Club | | | |
| Amount (\$) 40.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held | |
| Date | Payee name | | | |
| 10/25/2022 | Sams Club | | | |
| Amount (\$) 18.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 Austin | 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 | 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. | | |
|--|--|-------------------------------------|----------------------------|--------------------|
| 1 Total pages Schedule F1: 25 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 10/31/2022 | Sams Club | | | |
| 6 Amount (\$) 92.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 | | | |
| 11/02/2022 | Sams Club | | | |
| Amount (\$) 54.00 Campaign Funds for | Payee address; 2900 W Wheatland 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 | | | |
| 11/07/2022 | Sams Club | | | |
| Amount (\$) 39.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2700 w wheatianu 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 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: 26 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics | Commission Filers) |
| 4 Date | 5 Payee name | | | |
| 11/09/2022 | Sams Club | | | |
| 6 Amount (\$) 43.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 | | | |
| 11/14/2022 | Sams Club | | | |
| Amount (\$) 80.00 | Payee address; 2900 W Wheatland 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 | 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 | | | |
| 11/15/2022 | Sams Club | | | |
| Amount (\$) 48.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; | Zip Code |
| Campaign Funds for Campaign Expenditures | 2700 w wheatianu Danas, 1X /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 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: 27 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 11/21/2022 | Sams Club | | |
| 6 Amount (\$) 61.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 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 | | |
| 11/23/2022 | Sams Club | | |
| Amount (\$) 21.00 | Payee address; 2900 W Wheatland 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 | | |
| 11/23/2022 | Sams Club | | |
| Amount (\$) 44.00 | Payee address; 2900 W Wheatland Dallas, TX 75237 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 2900 w wheatiand 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 NE | 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/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/

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: 28 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date | 5 Payee name | | | |
| 11/28/2022 | Sams Club | | | |
| 6 Amount (\$) 25.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2900 W Wheatland 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 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 | | | |
| 12/02/2022 | Sams Club | | | |
| Amount (\$) 45.00 | Payee address; 2900 W Wheatland 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. | T. Check if Austin, 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 | | | |
| 12/05/2022 | Sams Club | | | |
| Amount (\$) 49.00 | Payee address; | City; | State; Zip Code | |
| Campaign Funds for Campaign Expenditures | 2900 W Wheatland 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 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. | Other (enter a category not listed above) |
|--|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 29 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 12/05/2022 | Sams Club | | |
| 6 Amount (\$) 75.00 | 7 Payee address; 2900 W Wheatland 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 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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 10/05/2022 | Lubys | | |
| Amount (\$) 42.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 5600 S Hampton Rd Dallas, TX 75232 | | |
| | 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 | | |
| 11/28/2022 | Lubys | | |
| Amount (\$) 50.00 | Payee address; 5600 S Hampton Rd Dallas, TX 75232 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | Jood 3 Hampton Ru Danas, 1A 73232 | | |
| | 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 |
| | 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/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/Opensitions/

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: 30 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 10/17/2022 | Pappadeux | | |
| 6 Amount (\$) 150.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 800 E US Hwy 67 Duncanville, TX 75137 | 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 <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 10/24/2022 | Colters BBQ | | |
| Amount (\$) 43.00 Campaign Funds for | Payee address; 3904 W Camp Wisdom Dallas, TX 75237 | City; | State; Zip Code |
| 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 | | |
| 10/24/2022 | Fuzzys Taco | | |
| Amount (\$) 26.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 3704 W Camp Wisdom 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 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

| Credit Card Payment | The Instruction Guide explains how to | complete this form. | Other (enter a category not listed above) |
|--|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 31 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | l | |
| 11/14/2022 | Baby Back Shack | | |
| 6 Amount (\$) 100.00 | 7 Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1800 S Akard Dallas, TX 75215 | | |
| 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 Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 12/16/2022 | Baby Back Shack | | |
| Amount (\$) 33.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1800 S 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 | | |
| 12/05/2022 | Smokey Joes | | |
| Amount (\$) 73.00 | Payee address; | City; | State; Zip Code |
| Campaign Funds for | 6403 S RL Thornton Dallas, TX 75232 | | |
| 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 |

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: 32 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 11/02/2022 | Easy Slides | | |
| 6 Amount (\$) 82.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2701 Main St Dallas, TX 75220 | 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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 12/05/2022 | Walmart | | |
| Amount (\$) 1000.00 | Payee address; 200 Short St Dallas, TX 75232 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee | Donation | |
| | 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 | | |
| 12/05/2022 | Walmart | | |
| Amount (\$) 1043.00 | Payee address; 200 Short St Dallas, TX 75232 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 200 Short St Danas, 17 73232 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee | Donation | |
| | 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. | Other (enter a category not listed above) |
|---|---|-------------------------------------|---|
| 1 Total pages Schedule F1: 33 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 08/01/2022 | Target | | |
| 6 Amount (\$) 140.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 39739 LBJ Frwy 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 | supply | |
| | (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 | | |
| 08/15/2022 | Michaels Store | | |
| Amount (\$) 65.00 Campaign Funds for Campaign Expenditures | Payee address; 751 N Hwy 67 Cedar Hill, TX 75104 | City; | State; Zip Code |
| 1 0 1 | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Office Overhead/Rental Expense | supply | |
| | 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 | | |
| 10/11/2022 | State Fair of Texas | | |
| Amount (\$) 400.00 Campaign Funds for Campaign Expenditures | Payee address; 1300 Robert B Cullum Dallas, TX 75210 | City; | State; Zip Code |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee | Donation | |
| | 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

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. | Other (enter a category not listed above) |
|--|--|-------------------------------------|---|
| 1 Total pages Schedule F1: 34 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/06/2022 | US Postal Office | | |
| 6 Amount (\$) 54.00 | 7 Payee address; 3107 W Camp Wisdom Suite 175 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | Dallas, TX 75237 | | |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Office Overhead/Rental Expense | postal | |
| | (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 | | |
| 12/05/2022 | Reilly Echols Printing Inc | | |
| Amount (\$) 1266.53 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1710 South Harwood Dallas, TX 75215 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Advertising Expense | mailers | |
| | 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 | | |
| 12/19/2022 | The Order Desk | | |
| Amount (\$) 1546.15 | Payee address; | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 9840 Monroe Dr Suite 1024allas, TX 75220 | | |
| | 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 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. | |
|--|--|-------------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: 35 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 12/16/2022 | Democracy Toolbox | | |
| 6 Amount (\$) 2000.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 8552 Royal County Dow M DKinney, TX 75070 | City; | State; Zip Code |
| 8 | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| PURPOSE OF EXPENDITURE | Consulting Expense | consulting | |
| | (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 | | |
| 11/09/2022 | Mr Mark Rutlede | | |
| Amount (\$) 300.00 | Payee address; 2633 Whispering Trail Little Elm, TX 75068 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Salaries/Wages/Contract Labor | salary | |
| | 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 | | |
| 11/09/2022 | Merrick Butler | | |
| Amount (\$) 1000.00 | Payee address; P.O. Box 297 Lancaster, TX 75146 | City; | State; Zip Code |
| Campaign Funds for Campaign Expenditures | 1.0. Box 277 Lancaster, 1X 75140 | | |
| | Category (See Categories listed at the top of this schedule) | Description | |
| PURPOSE OF EXPENDITURE | Salaries/Wages/Contract Labor | salary | |
| | 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

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. | oute. (e.n.e. a category not noted above) | |
|--|---|-------------------------------------|---|---|
| 1 Total pages Schedule F1: 36 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers |) |
| 4 Date 11/09/2022 | 5 Payee name Kimberly Shaw | | | |
| 6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 2608 Wallingford Dr Mansfield, TX 76084 | 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 salary | | |
| | (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 | | | |
| 11/09/2022 | Deryl McKissack | City. | Chata. Zin Cada | |
| Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | Payee address; 901 K Street NW Washington, DC 20001 | City; | State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description salary | | |
| | 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 | | | |
| 10/13/2022 | Jeff Carey | | | |
| Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | Payee address; 300 E Round Grove Road Suite 621 Lewisville, TX 75067 | City; | State; Zip Code | |
| | Category (See Categories listed at the top of this schedule) | Description | | |
| PURPOSE OF EXPENDITURE | Salaries/Wages/Contract Labor | salary | | |
| | 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/Officered

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: 37 of 37 | 2 FILER NAME Mr Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Payee name | | |
| 07/01/2022 | Jennifer Gates | | |
| 6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures | 7 Payee address; 4914 Keyhole Lane Dallas, TX 75229 | 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 | salary | |
| | (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/OF | Candidate / Officeholder name Tennell Atkins | Office sought Council District 8 | Office held |
| Date | Payee name | | |
| 12/22/2022 | The Order Desk | | |
| Amount (\$) 1007.37 | Payee address; 9840 Monroe Dr Suite 1024allas, TX 75220 | 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 | postage | |
| | Check if travel outside of Texas. Complete Schedule T. | Check if Aust | in, TX, officeholder living expense |
| Complete ONLY if direct | Candidate / Officeholder name | Office sought | Office held |
| expenditure to benefit C/OF | Tennell Atkins | Council District 8 | |
| Date | Payee name | | |
| Amount (\$) | Payee address; | City; | State; Zip Code |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description | |
| | 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 | Office sought | Office held |
| | ATTACH ADDITIONAL COPIES OF THIS | S SCHEDULE AS NEI | EDED |