

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

<b>1</b> Filer ID (Ethics Commission Filers)		<b>2</b> Total pages filed: 131		<b>OFFICE USE ONLY</b>		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI		Date Received			
	Chad					
	NICKNAME LAST SUFFIX					
	West					
<b>4</b> ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> Runoff		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded \$500 limit			
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final report			
<b>5</b> ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07	01	2024	THROUGH	12	31
Date Hand-delivered or Date Postmarked						
Receipt # Amount \$						
Date Processed						
Date Imaged						

## 6 EXPLANATION OF CORRECTION

Austin Schenkel donation corrected to \$500 Greater Dallas Chamber sponsorship corrected to \$200 FWADG sponsorship corrected to \$300

## 7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☒ **Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

\*\*\* Electronically Certified \*\*\*

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Chad West, this the 16th day of January, 2025, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)		<b>2</b> Total pages filed: 131		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Chad</b>	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST <b>West</b>	SUFFIX			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>810 N Bishop Avenue Dallas TX 75208</b>			Date Received		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>( 214 ) 406 7861</b>					Date Hand-delivered or Date Postmarked
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <b>Benny</b>					
NICKNAME LAST SUFFIX <b>Guzman</b>		Receipt #		Amount \$		
Date Processed		Date Imaged				
Date Imaged						
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>306 S Montreal Dallas TX 75208</b>					
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>( )</b>					
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
<b>10</b> PERIOD COVERED	Month Day Year    Month Day Year <b>07 / 01 / 2024</b> THROUGH <b>12 / 31 / 2024</b>					
<b>11</b> ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <b>05 / 03 / 2025</b> <input checked="" type="checkbox"/> General <input type="checkbox"/> Special    _____					
<b>12</b> OFFICE	OFFICE HELD (if any) <b>Council District 1</b>		<b>13</b> OFFICE SOUGHT (if known) <b>Council District 1</b>			
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
COMMITTEE TYPE		COMMITTEE NAME				
<input type="checkbox"/> GENERAL		COMMITTEE ADDRESS				
<input type="checkbox"/> SPECIFIC		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

<b>15</b> C/OH NAME Chad West		<b>16</b> Filer ID (Ethics Commission Filers)
<b>17</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 130300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 51012.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 105995.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 SIGNATURE** I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

\*\*\*ELECTRONICALLY CERTIFIED\*\*\*

Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Chad West this the 15th day of January, 20 25, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

**19** FILER NAME

Chad West

**20** Filer ID (Ethics Commission Filers)

**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 130,300.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 51,012.07
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 1 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Carey <hr/> <b>6</b> Contributor address; City; State; Zip Code 300 E Round Grove Road Suite 621 Lewisville, TX 75067	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Behring <hr/> Contributor address; City; State; Zip Code 1044 Burlington Blvd Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Gair <hr/> Contributor address; City; State; Zip Code 2200 Ross Avenue Suite 2800 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Reid <hr/> Contributor address; City; State; Zip Code 71 S Wacker Drive Suite 2750 Chicago, IL 60606	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
2 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/29/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Daniel Huerta

7 Amount of contribution (\$)

250.00

6 Contributor address;

1414 Cedar Hill Avenue

City;

Dallas, TX 75208

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dominic Perry

Amount of contribution (\$)

100.00

Contributor address;

12801 N Central Expressway Suite 1075 Dallas, TX 75243

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James Mathis

Amount of contribution (\$)

250.00

Contributor address;

2029 W Colorado Blvd

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jane Weempe

Amount of contribution (\$)

1000.00

Contributor address;

1316 Canterbury Court

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
3 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/29/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joseph Pitchford

7 Amount of contribution (\$)

100.00

6 Contributor address;

742 Midbury

City;

Dallas, TX 75230

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marc Andres

Amount of contribution (\$)

500.00

Contributor address;

2800 N Henderson Ave Suite 200

Dallas, TX 75206

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James Neil Jr

Amount of contribution (\$)

1000.00

Contributor address;

2727 LBJ Freeway Suite 600

Dallas, TX 75234

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/02/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mary Ann Jenkins

Amount of contribution (\$)

100.00

Contributor address;

744 S Manus Drive

Dallas, TX 75224

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

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1 Total pages Schedule A1:  
4 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/08/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tyler Woodruff

7 Amount of contribution (\$)

250.00

6 Contributor address;

4848 Lemmon Ave

City;

Dallas, TX 75219

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/09/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Hargrave

Amount of contribution (\$)

250.00

Contributor address;

4201 Spring Valley Road Suite 1210 Dallas, TX 75244

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Elisa Goodwin

Amount of contribution (\$)

100.00

Contributor address;

2310 Broken Point

City;

McKinney, TX 75072

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joseph Dingman

Amount of contribution (\$)

1000.00

Contributor address;

13223 Glad Acres Drive

City;

Dallas, TX 75234

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
5 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/12/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Hurst

7 Amount of contribution (\$)

100.00

6 Contributor address;

2100 Ross Avenue Suite 2700

City;

Dallas, TX 75201

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/14/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Samuel Herskovits

Amount of contribution (\$)

1000.00

Contributor address;

6214 Prestoncrest Lane

City;

Dallas, TX 75230

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/16/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Marrinucci

Amount of contribution (\$)

500.00

Contributor address;

2217 Ivan Street Suite 201

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/17/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bob Meckfessel

Amount of contribution (\$)

250.00

Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam McDonald 6 Contributor address; City; State; Zip Code 5484 State Highway 276 Point, TX 75472	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tim Attlee Contributor address; City; State; Zip Code 8751 Collin McKinney Parkway Suite 405 McKinney, TX 75070	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex Pace Contributor address; City; State; Zip Code 400 N Ervay Suite 230 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Love Contributor address; City; State; Zip Code 4911 W Lovers Lane Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aris Tsiakos 6 Contributor address; City; State; Zip Code 5224 Springmeadow Drive Dallas, TX 75229	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford Braly Contributor address; City; State; Zip Code 300 Throckmorton Street Suite 1500 Fort Worth, TX 76102	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Banerjee Contributor address; City; State; Zip Code 6911 Ellsworth Avenue Dallas, TX 75214	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Gurney Contributor address; City; State; Zip Code 6001 Windhaven Parkway Suite 100 Plano, TX 75093	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
8 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/26/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chris Bragg

7 Amount of contribution (\$)

100.00

6 Contributor address;

6401 Widgeon Drive

City;

Plano, TX 75024

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Preziosi

Amount of contribution (\$)

150.00

Contributor address;

2229 Lawndale Drive

City;

Dallas, TX 75211

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hudson Henley

Amount of contribution (\$)

1000.00

Contributor address;

2520 Fairmount Street Suite 200

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kim Henley

Amount of contribution (\$)

1000.00

Contributor address;

2520 Fairmount Street Suite 200

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
9 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/26/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kim Henley

7 Amount of contribution (\$)

500.00

6 Contributor address;

2520 Fairmount Street Suite 200

City;

Dallas, TX 75208

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Valerie Weatherwax

Amount of contribution (\$)

250.00

Contributor address;

1000 Oak Hill Park

City;

Kennedale, TX 76060

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alfred Crozier

Amount of contribution (\$)

100.00

Contributor address;

517 Beacon Hill Drive

City;

Coppell, TX 75019

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ariel Marin

Amount of contribution (\$)

100.00

Contributor address;

3134 Ross Avenue Suite 2

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 10 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Campos <hr/> <b>6</b> Contributor address; City; State; Zip Code 428 W Davis St Suite 3 Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Hartnett <hr/> Contributor address; City; State; Zip Code 5848 Prospect Avenue Dallas, TX 75206	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Rendon <hr/> Contributor address; City; State; Zip Code 4565 Claire Chennault St Suite 204 Addison, TX 75001	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayna Moser <hr/> Contributor address; City; State; Zip Code 4231 Ridge Dallas, TX 75229	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Shugart 6 Contributor address; City; State; Zip Code 8891 Southwestern Blvd Suite 235 Dallas, TX 75206	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Weempe Contributor address; City; State; Zip Code 1316 Canterbury Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed Gough Contributor address; City; State; Zip Code 2021 Olive Street Suite 798 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Henley Contributor address; City; State; Zip Code 4304 Beverly Drive Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 12 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Henley <hr/> <b>6</b> Contributor address; City; State; Zip Code 4304 Beverly Drive Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 1500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jody Bland <hr/> Contributor address; City; State; Zip Code 5556 Richard Avenue Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Elony <hr/> Contributor address; City; State; Zip Code 60001 Windhaven Parkway Suite 100 Plano, TX 75093	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Carden <hr/> Contributor address; City; State; Zip Code 2007 Harlandale Avenue Dallas, TX 75216	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 13 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wright <hr/> <b>6</b> Contributor address; City; State; Zip Code 2361 Allen Street Dallas, TX 75204	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow <hr/> Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Patterson <hr/> Contributor address; City; State; Zip Code 1215 Stafford Street Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veronica Attlee <hr/> Contributor address; City; State; Zip Code 8751 Collin McKinney Parkway Suite 1405 McKinney, TX 75070	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 14 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfred Sardar ..... <b>6</b> Contributor address; City; State; Zip Code 7000 Nueces Drive Irving, TX 75029	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Ebert ..... Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Helstowski ..... Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Dilling ..... Contributor address; City; State; Zip Code 13208 Meandering Way Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 15 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pam Gerber ..... <b>6</b> Contributor address; City; State; Zip Code 4435 Holland Avenue Dallas, TX 75219	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Huth ..... Contributor address; City; State; Zip Code 13455 Noel Road Suite 400 Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Huth ..... Contributor address; City; State; Zip Code 13455 Noel Road Suite 400 Dallas, TX 75240	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Pitchford ..... Contributor address; City; State; Zip Code 7422 Midbury Dallas, TX 75230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 16 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 09/25/2024	5 Full name of contributor Roger Wedell <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... 6 Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/02/2024	Full name of contributor John Moritz <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code P.O. Box 490 Arlington, TX 76004	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor Harold Ginsburg <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 2610 Fairmount Street Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor Mitchell Voss <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 300 Crescent Court Suite 1800 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 17 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Scovell <hr/> <b>6</b> Contributor address; City; State; Zip Code 7034 Alexander Drive Dallas, TX 75214	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Rohrman <hr/> Contributor address; City; State; Zip Code 3720 Marquette Street Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Enzler <hr/> Contributor address; City; State; Zip Code 6027 Goliad Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen Davis <hr/> Contributor address; City; State; Zip Code 1218 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 18 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Princeton <hr/> <b>6</b> Contributor address; City; State; Zip Code 2816 Southwood Drive Dallas, TX 75233	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feargal McKinney <hr/> Contributor address; City; State; Zip Code 5722 Oram Street Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marilee OConnell <hr/> Contributor address; City; State; Zip Code 634 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Segrest <hr/> Contributor address; City; State; Zip Code 6935 Meadow Lake Ave Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 20 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Guerrero <hr/> <b>6</b> Contributor address; City; State; Zip Code 2915 Skylark San Antonio, TX 78210	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz <hr/> Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz <hr/> Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Effie Dennison <hr/> Contributor address; City; State; Zip Code 1303 Woodlawn Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 21 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow <hr/> <b>6</b> Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow <hr/> Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Weempe <hr/> Contributor address; City; State; Zip Code 1316 W Canterbury Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Arechinga <hr/> Contributor address; City; State; Zip Code 22603 Impala Bend San Antonio, TX 78259	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 22 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Heller <hr/> <b>6</b> Contributor address; City; State; Zip Code 2165 East Maya Palm Drive Boca Raton, FL 33432	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newt Walker <hr/> Contributor address; City; State; Zip Code 2519 Thomas Avenue Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Walsh <hr/> Contributor address; City; State; Zip Code 3200 McKinney Avenue Suite 701 Dallas, TX 75204	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasha Heidari <hr/> Contributor address; City; State; Zip Code 3020 Greenville Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 23 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasha Heidari <hr/> <b>6</b> Contributor address; City; State; Zip Code 3020 Greenville Avenue Dallas, TX 75206	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wright <hr/> Contributor address; City; State; Zip Code 2361 Allen Street Dallas, TX 75204	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syd Hurley <hr/> Contributor address; City; State; Zip Code 2227 Vantage Street Dallas, TX 75207	Amount of contribution (\$) 5000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Shidid <hr/> Contributor address; City; State; Zip Code 6208 Copperhill Drive Dallas, TX 75248	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 24 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Santa Maria <hr/> <b>6</b> Contributor address; City; State; Zip Code 785 Huntingdon Street Coppel, TX 75019	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Goldstein <hr/> Contributor address; City; State; Zip Code 10115 Kirkhaven Drive Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Petty <hr/> Contributor address; City; State; Zip Code 2808 Fairmount Street Suite 100 Dallas, TX 75201	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrea Mayes <hr/> Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 25 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Conrad	<b>7</b> Amount of contribution (\$) 1000.00
<b>6</b> Contributor address; City; State; Zip Code 411 W 24th Street New York, NY 10011		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbert Weitzman	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 3102 Maple Avenue Suite 500 Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 26 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payton Mayes 6 Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 4000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Lamkin Contributor address; City; State; Zip Code 6201 W Plano Pkwy Suite 100 Plano, TX 75092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

10/28/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mariam Andersen

7 Amount of contribution (\$)

500.00

6 Contributor address;

903 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/29/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Blewett

Amount of contribution (\$)

1000.00

Contributor address;

6228 Vickery Blvd

City;

Dallas, TX 75214

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Phil Wise

Amount of contribution (\$)

1000.00

Contributor address;

4514 Travis Street Suite 326

City;

Dallas, TX 75205

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Feargal McKinney

Amount of contribution (\$)

1000.00

Contributor address;

5722 Oram Street

City;

Dallas, TX 75206

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 28 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Meisel <hr/> <b>6</b> Contributor address; City; State; Zip Code 3637 Haynie Avenue Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullen Finnegan <hr/> Contributor address; City; State; Zip Code 8117 Preston Road Suite 600 Dallas, TX 75225	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Holloway <hr/> Contributor address; City; State; Zip Code 8906 Stanwood Drive Dallas, TX 75228	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Jones <hr/> Contributor address; City; State; Zip Code 20238 Marimac Trinidad, TX 75163	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 29 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adrian Iglesias 6 Contributor address; City; State; Zip Code 5822 Gallant Run Suite 120 Frisco, TX 75033	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon Albritton Contributor address; City; State; Zip Code 6941 Dalhart Lane Dallas, TX 75214	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson Elvis Contributor address; City; State; Zip Code 2500 Bennett Avenue Suite 1314 Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole Wade Contributor address; City; State; Zip Code 3326 Conroe Street Dallas, TX 75212	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Brown 6 Contributor address; City; State; Zip Code 6316 Brimwood Drive Plano, TX 75093	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris McKay Contributor address; City; State; Zip Code 5949 Sherry Lane Suite 1500 Dallas, TX 75225	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Walk Contributor address; City; State; Zip Code 6327 Brook Lake Drive Dallas, TX 75248	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeremiah Dover Contributor address; City; State; Zip Code 10014 Estacado Drive Dallas, TX 75228	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 31 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Merrick Egan <hr/> <b>6</b> Contributor address; City; State; Zip Code 3420 Rosedale Avenue Suite 7 Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Altschuler <hr/> Contributor address; City; State; Zip Code 1601 Elm Street Suite 3130 Dallas, TX 75201	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Leach <hr/> Contributor address; City; State; Zip Code 300 S Pearl Street Suite 200 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Dixon <hr/> Contributor address; City; State; Zip Code 4654 Beverly Drive Dallas, TX 75209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 32 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Black <hr/> <b>6</b> Contributor address; City; State; Zip Code 751 Kessler Lake Drive Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perren Gasc <hr/> Contributor address; City; State; Zip Code 6716 Churchill way Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Simmons <hr/> Contributor address; City; State; Zip Code 2500 McKinney Avenue Suite 734 Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Breunig <hr/> Contributor address; City; State; Zip Code 9900 N Central Expressway Suite 570 Dallas, TX 75238	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

11/19/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Benjamin Breunig

**7** Amount of contribution (\$)

1500.00

**6** Contributor address;

City;

State;

Zip Code

9900 N Central Expressway Suite 570 Dallas, TX 75238

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

**9** Employer (See Instructions)

Date

11/19/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Adams

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

4213 Caruth Blvd

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jacobe Chandler

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

4718 Firewheel Drive

Garland, TX 75044

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brenda Garza

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

223 E 6th Street

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 34 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/20/2024	5 Full name of contributor Jennifer Thornton <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... 6 Contributor address; City; State; Zip Code 431 E 6th Street Dallas, TX 75203	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2024	Full name of contributor Scott Kepner <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 940 Emmett Ave Suite 200 Belmont, CA 94002	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor Schafer Smartt <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 5426 Martel Ave Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor Tony Page <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 3210 Carlisle Street Suite 1 Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 35 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Alvarez <hr/> <b>6</b> Contributor address; City; State; Zip Code 1327 Walter Street Dallas, TX 75211	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jude Akpunku <hr/> Contributor address; City; State; Zip Code 512 Avenue L Dallas, TX 75203	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Felts <hr/> Contributor address; City; State; Zip Code 3997 FM 3211 Caddo Mills, TX 75135	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Camp <hr/> Contributor address; City; State; Zip Code 611 Kessler Springs Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

11/26/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bonnie Taylor

7 Amount of contribution (\$)

25.00

6 Contributor address;

1403 Hollywood Avenue

City;

Dallas, TX 75208

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

11/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bruce Reid

Amount of contribution (\$)

1000.00

Contributor address;

71 S Wacker Drive

City;

Chicago, IL 60606

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lee Cobb

Amount of contribution (\$)

1000.00

Contributor address;

1717 Arts Plaza Suite 2311

City;

Dallas, TX 75201

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Leland Burk

Amount of contribution (\$)

1000.00

Contributor address;

8215 Westchester Drive Suite 207

City;

Dallas, TX 75225

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 37 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alencia Deanda Gregg ..... 6 Contributor address; City; State; Zip Code 6108 Teresa Lane Rowlett, TX 75089	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Prewitt ..... Contributor address; City; State; Zip Code 1601 Elm Street Suite 3110 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Collier ..... Contributor address; City; State; Zip Code 1600 Arbor Ridge Drive Fort Worth, TX 76112	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter Abrahamsen ..... Contributor address; City; State; Zip Code 821 Haines Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/03/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bob Meckfessel

**7** Amount of contribution (\$)

100.00

**6** Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State; Zip Code

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

**9** Employer (See Instructions)

Date

12/03/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Mullally

Amount of contribution (\$)

250.00

Contributor address;

922 N Edgefield Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Gay Revi

Amount of contribution (\$)

100.00

Contributor address;

908 N Bishop Avenue Suite 102

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mike Rawlings

Amount of contribution (\$)

1000.00

Contributor address;

3879 Maple Avenue Suite 400

City;

Dallas, TX 75219

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 39 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Heinbaugh <hr/> <b>6</b> Contributor address; City; State; Zip Code 1801 Annex Ave Suite 507 Dallas, TX 75204	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence <hr/> Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence <hr/> Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veletta Forsythe Lill <hr/> Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 40 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady Wood ..... <b>6</b> Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Moser ..... Contributor address; City; State; Zip Code 600 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Megan Wood ..... Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne Hagan ..... Contributor address; City; State; Zip Code 204 S Willomet Avenue Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/10/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bonnie Taylor

**7** Amount of contribution (\$)

25.00

**6** Contributor address;

1403 Hollywood Avenue

City;

Dallas, TX 75208

State;

Zip Code

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

**9** Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Britton Williams

Amount of contribution (\$)

25.00

Contributor address;

832 Blaylock Drive Suite 3

City;

Dallas, TX 75203

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brooks Johnson

Amount of contribution (\$)

500.00

Contributor address;

929 N Windomere Avenue

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cindy Hawkins

Amount of contribution (\$)

50.00

Contributor address;

2126 Kessler Court

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
43 of 66

**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/10/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Clinton Haley

**7** Amount of contribution (\$)

500.00

**6** Contributor address;

6311 Club Lake Drive

City;

Dallas, TX 75214

State; Zip Code

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

**9** Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cynthia Michaels

Amount of contribution (\$)

250.00

Contributor address;

519 Woolsey Drive

City;

Dallas, TX 75224

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Preziosi

Amount of contribution (\$)

100.00

Contributor address;

2229 Lawndale Drive

City;

Dallas, TX 75211

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lisa Taylor

Amount of contribution (\$)

50.00

Contributor address;

923 Salmon Drive

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 44 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell <hr/> <b>6</b> Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ Aikman <hr/> Contributor address; City; State; Zip Code 225 S Windomere Ave Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Buss <hr/> Contributor address; City; State; Zip Code 653 Culpepper Place Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Tibbitts <hr/> Contributor address; City; State; Zip Code 8580 County Road 167 McKinney, TX 75071	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 45 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/11/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Williams ..... <b>6</b> Contributor address; City; State; Zip Code 4323 Lorraine Avenue Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Hetzel ..... Contributor address; City; State; Zip Code 7002 Vivian Avenue Dallas, TX 75223	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Williams ..... Contributor address; City; State; Zip Code 4323 Lorraine Avenue Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiffany Hicks ..... Contributor address; City; State; Zip Code 740 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 46 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Garner ..... <b>6</b> Contributor address; City; State; Zip Code P.O. Box 180188 Dallas, TX 75218	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Taylor ..... Contributor address; City; State; Zip Code 1147 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Walker ..... Contributor address; City; State; Zip Code 1010 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Reese ..... Contributor address; City; State; Zip Code 8625 Douglas Avenue Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 47 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Kurtz <hr/> <b>6</b> Contributor address; City; State; Zip Code 526 S Winnetka Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Green <hr/> Contributor address; City; State; Zip Code 4411 Vandelia Street Dallas, TX 75219	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barb Nunn <hr/> Contributor address; City; State; Zip Code 504 N Manus Drive Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Deggs <hr/> Contributor address; City; State; Zip Code 4241 Rawlins Street Suite 14 Dallas, TX 75219	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 48 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Nichols <hr/> <b>6</b> Contributor address; City; State; Zip Code 5877 Bayside Drive Fort Worth, TX 76132	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Bellomy <hr/> Contributor address; City; State; Zip Code 4425 Swiss Avenue Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Assieh Khajehnoori <hr/> Contributor address; City; State; Zip Code 812 N Bishop Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Pomykal <hr/> Contributor address; City; State; Zip Code 3001 Sale Street Suite 409 Dallas, TX 75219	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 49 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Payma <hr/> <b>6</b> Contributor address; City; State; Zip Code 812 N Bishop Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Wingo <hr/> Contributor address; City; State; Zip Code 1227 Woodlawn Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula Larsen <hr/> Contributor address; City; State; Zip Code 665 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Larsen <hr/> Contributor address; City; State; Zip Code 665 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 50 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Mendoza <hr/> <b>6</b> Contributor address; City; State; Zip Code 520 E 5th Street Dallas, TX 75203	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Hagler <hr/> Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Hagler <hr/> Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tino Jalomo <hr/> Contributor address; City; State; Zip Code 607 W Canty Street Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 51 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vipin Nambiar <hr/> <b>6</b> Contributor address; City; State; Zip Code 5534 W Hanover Avenue Dallas, TX 75209	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vipin Nambiar <hr/> Contributor address; City; State; Zip Code 5534 W Hanover Avenue Dallas, TX 75209	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony Cuevas <hr/> Contributor address; City; State; Zip Code 1619 Sylvan Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Schenkel <hr/> Contributor address; City; State; Zip Code 3317 Purdue Avenue Dallas, TX 75225	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 52 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Scherrieb <hr/> <b>6</b> Contributor address; City; State; Zip Code 5877 Bayside Drive Fort Worth, TX 76132	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Luna <hr/> Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent Mecklenburg <hr/> Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leo Cusimano <hr/> Contributor address; City; State; Zip Code 1619 Sylvan Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 53 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupe Valdez <hr/> <b>6</b> Contributor address; City; State; Zip Code 707 N Edgefield Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Hoyl <hr/> Contributor address; City; State; Zip Code 2900 McKinnon Suite 603 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swede Hanson <hr/> Contributor address; City; State; Zip Code 9925 Lakedale Drive Dallas, TX 75218	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitaly Lunev <hr/> Contributor address; City; State; Zip Code 623 Haines Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/25/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Barry Hancock

**7** Amount of contribution (\$)

1000.00

**6** Contributor address;

4514 Travis Street Suite 326

City;

Dallas, TX 75205

State;

Zip Code

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

**9** Employer (See Instructions)

Date

12/27/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chuck Norcross

Amount of contribution (\$)

100.00

Contributor address;

506 Woolsey Drive

City;

Dallas, TX 75224

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heather Butterfield

Amount of contribution (\$)

100.00

Contributor address;

3254 Purdue Avenue

City;

Los Angeles, CA 90066

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kathy Hewitt

Amount of contribution (\$)

50.00

Contributor address;

1410 Yakimo Drive

City;

Dallas, TX 75208

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 55 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/27/2024	5 Full name of contributor Laurence Vineyard <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... 6 Contributor address; City; State; Zip Code 11436 Strait Lane Dallas, TX 75229	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/27/2024	Full name of contributor Roland Leal <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 414 North Casa Grande Circle Duncanville, TX 75116	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/2024	Full name of contributor Temple Anderson <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 1921 Mayflower Drive Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2024	Full name of contributor Alice Zaccarelli <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code 2243 Lawndale Drive Dallas, TX 75211	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 56 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Moffett <hr/> <b>6</b> Contributor address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 400.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Moffett <hr/> Contributor address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Kapioltas <hr/> Contributor address; City; State; Zip Code 5304 Middleton Drive Parker, TX 75002	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Coffee <hr/> Contributor address; City; State; Zip Code 2752 Gaston Avenue Suite 1232 Dallas, TX 75226	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 57 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Orr ..... <b>6</b> Contributor address; City; State; Zip Code 518 N Manus Drive Dallas, TX 75224	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny Guzman ..... Contributor address; City; State; Zip Code 306 S Montreal Dallas, TX 75208	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Bowling ..... Contributor address; City; State; Zip Code 457 San Clemente El Paso, TX 79912	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon Luke ..... Contributor address; City; State; Zip Code 1520 Elm Street Suite 201 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 58 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Brooks <hr/> <b>6</b> Contributor address; City; State; Zip Code 735 Rainbow Drive Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chad Dolezal <hr/> Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Culak <hr/> Contributor address; City; State; Zip Code 1223 Kings Highway Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claudia Huerta <hr/> Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 59 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David de la Fuente <hr/> <b>6</b> Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Lin <hr/> Contributor address; City; State; Zip Code 4323 Highlander Dr Dallas, TX 75287	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique MacGregor <hr/> Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fred Pena <hr/> Contributor address; City; State; Zip Code 410 E 5th Street Dallas, TX 75203	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 60 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hailee Joy <hr/> <b>6</b> Contributor address; City; State; Zip Code 701 Melba Street Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrod Jackson <hr/> Contributor address; City; State; Zip Code 5301 Montrose Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Jennings <hr/> Contributor address; City; State; Zip Code 1823 Naylor Street Dallas, TX 75228	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joy Dolezal <hr/> Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 61 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JR Huerta <hr/> <b>6</b> Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	<b>7</b> Amount of contribution (\$) 200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Parra <hr/> Contributor address; City; State; Zip Code 15 Stonebriar Court Dallas, TX 75206	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Wick <hr/> Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Niermann <hr/> Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 62 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Cook 6 Contributor address; City; State; Zip Code 1942 Malone Cliff View Dallas, TX 75208	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Kay de la Fuente Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Kingston Contributor address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Brooks Contributor address; City; State; Zip Code 735 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 63 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Noorani ..... <b>6</b> Contributor address; City; State; Zip Code 3009 Hallwell Dr Dallas, TX 75093	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Sims ..... Contributor address; City; State; Zip Code 8811 Antrim Dr. Dallas, TX 75218	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter Jacobsen ..... Contributor address; City; State; Zip Code 419 W 9th Street Suite 104 Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Philip Kingston ..... Contributor address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 64 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Wick <hr/> <b>6</b> Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taryl Sherman <hr/> Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor de la Fuente <hr/> Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinnie Sherman <hr/> Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 65 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waylon Longino <hr/> <b>6</b> Contributor address; City; State; Zip Code 4619 Insurance Lane Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Joy <hr/> Contributor address; City; State; Zip Code 701 Melba Street Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Zimmerman <hr/> Contributor address; City; State; Zip Code 105 S Willomet Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yasmine Payma <hr/> Contributor address; City; State; Zip Code 812 N Bishop Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 66 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREpac Texas Realtors PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768	<b>7</b> Amount of contribution (\$) 2500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HBA of Greater Dallas HOMEPAC <hr/> Contributor address; City; State; Zip Code 5816 W Plano Parkway Dallas, TX 75093	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Assoc of Greater Dallas <hr/> Contributor address; City; State; Zip Code 2100 West Walnut Hill Lane Suite 1000 Irving, TX 75038	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 51.02	7 Payee address; 1222 North Bishop Avenue, Suite 1200, Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name JW Mariott	
Amount (\$) 126.14	Payee address; 110 East 2nd Street Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name Austin Barton Spring	
Amount (\$) 70.39	Payee address; 1500 Barton Springs Road, Austin, TX 78704	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	Description Meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/24/2024	5 Payee name Vespaio	
6 Amount (\$) 128.26	7 Payee address; City; State; Zip Code 1610 South Congress Avenue Austin, TX 78704	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/25/2024	Payee name MAILCHIMP	
Amount (\$) 171.63	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/26/2024	Payee name Austin Airport	
Amount (\$) 15.02	Payee address; City; State; Zip Code 3600 Presidential Boulevard Austin, TX 78719	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/29/2024	<b>5</b> Payee name Tribal All Day Café	
<b>6</b> Amount (\$) 73.68	<b>7</b> Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Meal with Commissioner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Cheesecake Factory	
Amount (\$) 127.72	Payee address; City; State; Zip Code 7700 West Northwest Highway, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Meal with Board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/01/2024	Payee name Chad West	
Amount (\$) 181.50	Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Mileage Reimbursement	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/05/2024	<b>5</b> Payee name Walgreens	
<b>6</b> Amount (\$) 69.13	<b>7</b> Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing costs	<b>(b)</b> Description Printing costs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Amazon	
Amount (\$) 265.24	Payee address; City; State; Zip Code 325 9th Avenue North Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/05/2024	Payee name Extra Space	
Amount (\$) 98.00	Payee address; City; State; Zip Code 1931 Fort Worth Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 5 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/07/2024	<b>5</b> Payee name Wayward Coffee	
<b>6</b> Amount (\$) 34.90	<b>7</b> Payee address; 1318 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Coffee with new residents
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/07/2024	Payee name Cox Farms Market	
Amount (\$) 57.76	Payee address; 778 Fort Worth Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Supplies for meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/09/2024	Payee name Cretias Bakery	
Amount (\$) 86.00	Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Supporters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 6 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/12/2024	<b>5</b> Payee name Taco Deli	
<b>6</b> Amount (\$) 35.28	<b>7</b> Payee address; City; State; Zip Code 1878 Sylvan Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Volunteer Expense	<b>(b)</b> Description Food for volunteers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Tribal All Day Café	
Amount (\$) 49.18	Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with neighborhood advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Tribal All Day Café	
Amount (\$) 33.29	Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with community member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/13/2024	5 Payee name Paradiso	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 308 North Bishop Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Gift card for community event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/14/2024	Payee name Veracruz Café	
Amount (\$) 100.00	Payee address; City; State; Zip Code 408 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Donation for neighborhood event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Toulouse Knox	
Amount (\$) 60.56	Payee address; City; State; Zip Code 3314 Knox Street Dallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Meal with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 8 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/20/2024	<b>5</b> Payee name Uchiba Dallas	
<b>6</b> Amount (\$) 93.94	<b>7</b> Payee address; City; State; Zip Code 2817 Maple Avenue Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Meal with Commissioner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name La Condesa	
Amount (\$) 250.56	Payee address; City; State; Zip Code 400 West Second Street Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Meal with City Staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name Chad West	
Amount (\$) 1404.00	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Hotel cost
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2024	5 Payee name Chad West	
6 Amount (\$) 402.32	7 Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Travel Out Of District	(b) Description Travel Reimbursement - flight
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Chad West	
Amount (\$) 186.88	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel Reimbursement meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/22/2024	Payee name Susana Jaimes	
Amount (\$) 325.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor for holiday cards and gifts	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/23/2024	5 Payee name The Kessler School	
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 1822 W 10th Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/26/2024	Payee name Hunkys	
Amount (\$) 100.00	Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/26/2024	Payee name MAILCHIMP	
Amount (\$) 171.63	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024	5 Payee name Chips Hamburgers	
6 Amount (\$) 58.96	7 Payee address; City; State; Zip Code 4530 West Lovers Lane Dallas, TX 75225	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with Board Member
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/29/2024	Payee name R+D Dallas	
Amount (\$) 87.73	Payee address; City; State; Zip Code 8300 Preston Center Plaza Dallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with home builder
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Stevens Park Golf Course	
Amount (\$) 50.89	Payee address; City; State; Zip Code 1005 North Montclair Ave Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel in district	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/30/2024	5 Payee name Parking Management	
6 Amount (\$) 20.00	7 Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Travel out of district	(b) Description Non Profit Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Dr Delphinium	
Amount (\$) 173.77	Payee address; City; State; Zip Code 5806 West Lovers Lane Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for supporter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Beverleys	
Amount (\$) 132.59	Payee address; City; State; Zip Code 3215 North Fitzhugh Avenue Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with Board
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Elmwood Coffee	
6 Amount (\$) 5.25	7 Payee address; City; State; Zip Code 1805 South Edgefield Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Stevens Park Golf Course	
Amount (\$) 8.71	Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel in district	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Lucky Dog Saloon	
Amount (\$) 14.07	Payee address; City; State; Zip Code 2701 Cedar Springs Road Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Volunteer Expense	Description Meal with volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Katy Trail Ice House	
6 Amount (\$) 41.01	7 Payee address; City; State; Zip Code 3127 Routh Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Meal with volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Extra Space Storage	
Amount (\$) 98.00	Payee address; City; State; Zip Code 1931 Fort Worth AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name R+D Dallas	
Amount (\$) 101.98	Payee address; City; State; Zip Code 8300 Preston Center PlazaDallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meal with former CM
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Hudson House Lake	
6 Amount (\$) 114.72	7 Payee address; City; State; Zip Code 4040 Abrams Road Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with association leadership
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Maison Chinoise	
Amount (\$) 171.98	Payee address; City; State; Zip Code 4152 Cole Avenue Suite 100 Dallas, TX 75204	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with eco dev advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name American Airlines	
Amount (\$) 710.03	Payee address; City; State; Zip Code 3200 E Airfield Drive DFW Airport, TX 75261	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel for conference
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 16 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/04/2024	<b>5</b> Payee name Honor Bar	
<b>6</b> Amount (\$) 47.33	<b>7</b> Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Meeting with TIF Board representative
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/05/2024	Payee name R+D Dallas	
Amount (\$) 198.71	Payee address; City; State; Zip Code 8300 Preston Center PlazaDallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Dinner with former elected official
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/05/2024	Payee name Written By The Seasons	
Amount (\$) 271.30	Payee address; City; State; Zip Code 380 Melba Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Dinner with community advocates
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/09/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 13.20	7 Payee address; City; State; Zip Code 228 West Davis Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gift	(b) Description Gift for volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Birdies East	
Amount (\$) 117.36	Payee address; City; State; Zip Code 6221 East Mockingbird Dallas, TX 75214	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meal with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Waterman - Central DFW	
Amount (\$) 1135.50	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Expense	Description Computer equipmt and install
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/10/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 24.00	7 Payee address; City; State; Zip Code 228 West Davis Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for councilmembers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Ascension Coffee	
Amount (\$) 26.51	Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with housing advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Katy Trail Ice House	
Amount (\$) 31.95	Payee address; City; State; Zip Code 3127 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/11/2024	5 Payee name Rally House	
6 Amount (\$) 153.68	7 Payee address; City; State; Zip Code 5500 Greenville Avenue Dallas, TX 75206	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Gift for community volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Greater Dallas Chamber	
Amount (\$) 200.00	Payee address; City; State; Zip Code 909 Lake Carolyn Parkway Irving, TX 76041	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/16/2024	Payee name The Pour House	
Amount (\$) 24.68	Payee address; City; State; Zip Code 1919 Skillman Street Dallas, TX 75206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 20 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/16/2024	<b>5</b> Payee name Shinsei Restaurant	
<b>6</b> Amount (\$) 130.45	<b>7</b> Payee address; City; State; Zip Code 7713 Inwood Road Dallas, TX 75209	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Meeting with housing advocate
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/17/2024	Payee name Tepa Bar & Grill	
Amount (\$) 63.31	Payee address; City; State; Zip Code 428 South Hampton Road Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/18/2024	Payee name The UPS Store 78	
Amount (\$) 125.01	Payee address; City; State; Zip Code 1222 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing costs	Description Printing costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/18/2024	5 Payee name Mirador	
6 Amount (\$) 85.45	7 Payee address; City; State; Zip Code 1608 Elm Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Meeting with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name Teleflora	
Amount (\$) 108.22	Payee address; City; State; Zip Code 11444 West Olympic Boulevard Los Angeles, CA 90064	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for staff mbr family funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name National Anthem	
Amount (\$) 164.16	Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 22 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/19/2024	<b>5</b> Payee name The Salty Donut	
<b>6</b> Amount (\$) 65.08	<b>7</b> Payee address; City; State; Zip Code 414 West Davis Street Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gifts	<b>(b)</b> Description Gifts for councilmembers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/20/2024	Payee name NTX The Kessler	
Amount (\$) 115.00	Payee address; City; State; Zip Code 1230 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Hunkys	
Amount (\$) 41.64	Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meals with BADMA member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 23 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/23/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 39.20	7 Payee address; City; State; Zip Code 228 West Davis Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Gifts for community volunteers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/23/2024	Payee name The Dallas Assembly	
Amount (\$) 2560.00	Payee address; City; State; Zip Code 12900 Preston Road Suite 1110 Dallas, TX 75230	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel Out of District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/25/2024	Payee name Taco y Vino	
Amount (\$) 66.76	Payee address; City; State; Zip Code 213 West Eighth Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 24 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/25/2024	<b>5</b> Payee name MAILCHIMP	
<b>6</b> Amount (\$) 171.63	<b>7</b> Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising	<b>(b)</b> Description E newsletter
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Bullzerk	
Amount (\$) 33.56	Payee address; City; State; Zip Code 332 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for retiring neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Apple Store	
Amount (\$) 433.99	Payee address; City; State; Zip Code 100 Knox Street Dallas, TX 75214	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Officeholder phone accessories
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 25 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/27/2024	<b>5</b> Payee name Bishop Street Market	
<b>6</b> Amount (\$) 45.47	<b>7</b> Payee address; City; State; Zip Code 401 N Bishop Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gifts	<b>(b)</b> Description Gift for city employee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Adamson High Band	
Amount (\$) 255.00	Payee address; City; State; Zip Code 309 East Ninth Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name The Adolphus	
Amount (\$) 353.18	Payee address; City; State; Zip Code 1321 Commerce Street Dallas, TX 75202	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Council meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 26 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/28/2024	<b>5</b> Payee name Elena Guzman	
<b>6</b> Amount (\$) 260.00	<b>7</b> Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor storage	<b>(b)</b> Description Contract Labor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Go Daddy	
Amount (\$) 74.32	Payee address; City; State; Zip Code 813 N 1st Avenue Tempe, AZ 40021	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Domain
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Well Community	
Amount (\$) 500.00	Payee address; City; State; Zip Code 125 Sunset Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 27 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/02/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 65.39	7 Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Meeting with commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Amazon	
Amount (\$) 224.10	Payee address; City; State; Zip Code 325 9th Avenue North Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Home Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Ace Parking	
Amount (\$) 20.00	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Parking	Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 28 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/03/2024	5 Payee name Ascension	
6 Amount (\$) 22.44	7 Payee address; City; State; Zip Code 1621 Oak Lawn Avenue Dallas, TX 75207	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting Expense	(b) Description Breakfast with housing advocate
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Extra Space	
Amount (\$) 98.00	Payee address; City; State; Zip Code 1931 Fort Worth AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Beverleys	
Amount (\$) 180.46	Payee address; City; State; Zip Code 3215 North Fitzhugh Avenue Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with restaurant assoc leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 29 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 60.08	7 Payee address; City; State; Zip Code 1222 North Bishop Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name BBBop Seoul	
Amount (\$) 81.83	Payee address; City; State; Zip Code 828 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Lunch with Non-Profit Board Members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Gonzalez Restaurant	
Amount (\$) 154.27	Payee address; City; State; Zip Code 416 West Jefferson Boulevard Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Dinner with neighborhood leaders
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 30 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/04/2024	5 Payee name Primal Fundraising	
6 Amount (\$) 3416.52	7 Payee address; City; State; Zip Code 5706 East Mockingbird IDallas, TX 75206	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Costs	(b) Description Consulting Costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/07/2024	Payee name State Fair	
Amount (\$) 50.00	Payee address; City; State; Zip Code 925 South Haskell AvenueDallas, TX 75223	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description State Fair Gift for volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/07/2024	Payee name Bistro 31	
Amount (\$) 54.16	Payee address; City; State; Zip Code 87 Highland Park VillageDallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Lunch with home builder
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 31 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/07/2024	<b>5</b> Payee name Honor Bar	
<b>6</b> Amount (\$) 75.51	<b>7</b> Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Dinner with Richardson CM
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Ascension	
Amount (\$) 27.16	Payee address; City; State; Zip Code 200 Crescent Court Suite 200Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with potential council candidate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Maggianos North Park	
Amount (\$) 291.87	Payee address; City; State; Zip Code 205 NorthPark Center Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Dinner with neighborhood leaders
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 32 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/08/2024	<b>5</b> Payee name The 23rd Senatorial District Tejano	
<b>6</b> Amount (\$) 60.00	<b>7</b> Payee address; 10432 High Hollow Drive Dallas, TX 75230 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Dues	<b>(b)</b> Description Member Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name North Oak Cliff Greenspace	
Amount (\$) 1250.00	Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Walgreens	
Amount (\$) 22.40	Payee address; 1306 North Beckley Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 33 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2024	5 Payee name The USPS	
6 Amount (\$) 47.18	7 Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Wayward Coffee	
Amount (\$) 15.00	Payee address; City; State; Zip Code 1318 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Coffee meeting with advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Ascension	
Amount (\$) 22.09	Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with arts advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 34 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024	<b>5</b> Payee name Walgreens	
<b>6</b> Amount (\$) 54.11	<b>7</b> Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office supplies	<b>(b)</b> Description Office decorations
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Ace Parking	
Amount (\$) 25.00	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Parking	Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Dallas Fair	
Amount (\$) 38.00	Payee address; City; State; Zip Code 1300 Robert B Cullum Boulevard Dallas, TX 75210	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Lunch with Donors
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 35 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 40.72	7 Payee address; City; State; Zip Code 263 North Bishop Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Breakfast meeting with envt advocate
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Stevens Park Golf Course	
Amount (\$) 183.92	Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with golf course advocates
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name American Airlines	
Amount (\$) 208.95	Payee address; City; State; Zip Code 3200 E Airfield Drive DFW Airport, TX 75261	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel expense flight changes
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 36 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/16/2024	<b>5</b> Payee name DFW Airport Park	
<b>6</b> Amount (\$) 52.00	<b>7</b> Payee address; City; State; Zip Code 3200 E Airfield Drive Dallas, TX 65261	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Parking	<b>(b)</b> Description Parking
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Stevens Park Golf Course	
Amount (\$) 90.00	Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with Rosemont Dads group
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Tribal All Day Café	
Amount (\$) 48.74	Payee address; City; State; Zip Code 263 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Breakfast meeting with skate park donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 37 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/16/2024	<b>5</b> Payee name Las Palmas	
<b>6</b> Amount (\$) 160.65	<b>7</b> Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Dinner with former Councilmember
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Ascension	
Amount (\$) 44.50	Payee address; City; State; Zip Code 1621 Oak Lawn Avenue Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with arts advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/22/2024	Payee name Fort Worth Avenue Development	
Amount (\$) 300.00	Payee address; City; State; Zip Code P.O. Box 225120 Fort Worth , TX 75222	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 38 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/24/2024	<b>5</b> Payee name Lucky Dog Saloon	
<b>6</b> Amount (\$) 1464.07	<b>7</b> Payee address; City; State; Zip Code 2701 Cedar Springs RoadDallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising	<b>(b)</b> Description Fundraising event
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/24/2024	Payee name MAILCHIMP	
Amount (\$) 171.63	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/24/2024	Payee name Primal Fundraising	
Amount (\$) 4135.00	Payee address; City; State; Zip Code 5706 East Mockingbird Dallas, TX 75206	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Costs	Description Consulting Costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 39 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/29/2024	5 Payee name Rosemont Dads Club	
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 911 North Morocco Avenue Dallas, TX 75211	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Ascension	
Amount (\$) 51.70	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Breakfast mtg w housing advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Barnes and Nobles	
Amount (\$) 64.95	Payee address; City; State; Zip Code 7700 West Northwest Highway Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 40 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/04/2024	5 Payee name Tribal All Day Café	
6 Amount (\$) 38.28	7 Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Volunteer Expense	(b) Description Breakfast meeting with volunteer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Hunkys Old Fashioned	
Amount (\$) 150.00	Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75218	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift Card for neighborhood event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name ABC Party	
Amount (\$) 85.66	Payee address; City; State; Zip Code 1414 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Event supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 41 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Oak Cliff Lions Club	
<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Member Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Oak Cliff Lions Club	
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Extra Space	
Amount (\$) 98.00	Payee address; City; State; Zip Code 1931 Fort Worth AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 42 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Simply To Impress	
<b>6</b> Amount (\$) 1154.45	<b>7</b> Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description Community cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/06/2024	Payee name Village Buger	
Amount (\$) 32.19	Payee address; City; State; Zip Code 3699 McKinney Avenue Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch meeting with city staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Cretias Bakery	
Amount (\$) 38.00	Payee address; City; State; Zip Code 228 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for retiring board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 43 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/07/2024	<b>5</b> Payee name Ascension	
<b>6</b> Amount (\$) 42.33	<b>7</b> Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Meeting with Commissioner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/08/2024	Payee name The UPS Store 78	
Amount (\$) 167.67	Payee address; City; State; Zip Code 1222 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Postage and Mailing	Description Stamps
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Victoria Perez	
Amount (\$) 36.99	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Reimbursement for donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 44 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/12/2024	5 Payee name Parking	
6 Amount (\$) 34.35	7 Payee address; City; State; Zip Code 2506 Northwest 2nd Avenue Miami Beach, FL 33127	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Out of district travel - parking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Joeys Italian	
Amount (\$) 30.24	Payee address; City; State; Zip Code 2506 Northwest 2nd Avenue Miami Beach, FL 33127	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Out of district travel - meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Giannis Restaurant	
Amount (\$) 31.08	Payee address; City; State; Zip Code 1116 Ocean Drive Miami Beach, FL 33139	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Out of district travel - meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 45 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/12/2024	5 Payee name Standard Miami	
6 Amount (\$) 691.23	7 Payee address; City; State; Zip Code 40 Island Avenue Miami Beach, FL 33139	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Out of district travel - hotel
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name The Spelled Milk	
Amount (\$) 75.00	Payee address; City; State; Zip Code 712 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift cards for board members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Legends Concession	
Amount (\$) 108.56	Payee address; City; State; Zip Code 2045 East Division StreetArlington, TX 76011	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with sports advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 46 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/18/2024	<b>5</b> Payee name National Anthem	
<b>6</b> Amount (\$) 72.98	<b>7</b> Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Meal with city staff
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ace Parking	
Amount (\$) 20.00	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Out of district travel	Description Out of district travel - parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ascension	
Amount (\$) 30.68	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with activist
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 47 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Chad West	
<b>6</b> Amount (\$) 191.90	<b>7</b> Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Reimbursement for mileage	<b>(b)</b> Description Travel in District
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Susana Jaimes	
Amount (\$) 325.00	Payee address; City; State; Zip Code 3606 N Bishop Avenue Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Moxies Grill and Bar	
Amount (\$) 137.99	Payee address; City; State; Zip Code 100 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Dinner meeting with LIHTC developer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 48 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/21/2024	5 Payee name Oddfellows	
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 316 West Seventh Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Gift for neighborhood fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Family Gateway	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 1421 West Mockingbird Dallas, TX 75247	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Michaels	
Amount (\$) 102.76	Payee address; City; State; Zip Code 751 Highway 67 Cedar Hill , TX 75104	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 49 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2024	5 Payee name MAILCHIMP	
6 Amount (\$) 171.63	7 Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description E newsletter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Qualigraphics	
Amount (\$) 347.42	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Marketing materials
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name USPS	
Amount (\$) 727.80	Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 50 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/27/2024	<b>5</b> Payee name Benihana	
<b>6</b> Amount (\$) 84.32	<b>7</b> Payee address; City; State; Zip Code 7775 Banner Drive Dallas, TX 75251	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Discussion with police assoc rep
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Elena Guzman	
Amount (\$) 785.00	Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Help with community card mailer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Skate Parks for Dallas	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 100 Bachman Lake Park Dallas, TX 75220	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 51 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/29/2024	5 Payee name BBBop Seoul	
6 Amount (\$) 55.51	7 Payee address; City; State; Zip Code 828 West Davis Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Lunch with bus assoc member
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Taco y Vino	
Amount (\$) 150.00	Payee address; City; State; Zip Code 213 West Eighth Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift card for neighborhood
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name USPS	
Amount (\$) 49.20	Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Postage	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 52 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/02/2024	<b>5</b> Payee name Legends Concession	
<b>6</b> Amount (\$) 133.86	<b>7</b> Payee address; City; State; Zip Code 2045 East Division StreetArlington, TX 76011	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising	<b>(b)</b> Description Dinner with donors
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Aris Pantry	
Amount (\$) 189.22	Payee address; City; State; Zip Code 1307 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for neighborhood volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Target	
Amount (\$) 149.20	Payee address; City; State; Zip Code 2418 North Haskell AvenueDallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Supplies for campaign office
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 53 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/02/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 96.73	7 Payee address; 1222 North Bishop Avenue Dallas, TX 75208 City; State; Zip Code	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Katy Seitzler	
Amount (\$) 210.00	Payee address; 217 Sycamore Creek Road Allen, TX 75002 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor - Graphics
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Eatzi's Oak Lawn	
Amount (\$) 110.93	Payee address; 3403 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Meal train for Oak Cliff family
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 54 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/03/2024	<b>5</b> Payee name Stevens Park Golf Course	
<b>6</b> Amount (\$) 150.71	<b>7</b> Payee address; 1005 North Montclair Avenue City; Dallas, TX 75208 State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meeting	<b>(b)</b> Description Community meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Extra Space	
Amount (\$) 113.00	Payee address; 1931 Fort Worth Avenue City; Dallas, TX 75208 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Flowers By Legacy	
Amount (\$) 210.79	Payee address; P.O. Box 1442 City; Evanston, IL 60201 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 55 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/05/2024	<b>5</b> Payee name Chad West	
<b>6</b> Amount (\$) 1950.00	<b>7</b> Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Rent	<b>(b)</b> Description Office Rent Reimbursement Jul - Dec 24
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Chad West	
Amount (\$) 726.00	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office I-net reimbursement Jul - Dec 24
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Chad West	
Amount (\$) 1080.00	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Phone Expense Reimbursement Jul - Dec 24
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 56 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/06/2024	<b>5</b> Payee name Qualigraphics	
<b>6</b> Amount (\$) 66.94	<b>7</b> Payee address; 934 Stevens Woods Court City; Dallas, TX 75208 State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising	<b>(b)</b> Description Marketing materials
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/09/2024	Payee name American Airlines	
Amount (\$) 697.40	Payee address; 3200 E Airfield Drive City; DFW Airport, TX 75261 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of District	Description Travel out of district - site visit
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Dallas Morning News	
Amount (\$) 52.23	Payee address; 1954 Commerce Street City; Dallas, TX 75201 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Subscription	Description Subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 57 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/11/2024	<b>5</b> Payee name La Comida Mexican	
<b>6</b> Amount (\$) 913.63	<b>7</b> Payee address; City; State; Zip Code 1101 North Beckley AveDallas, TX 75203	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising	<b>(b)</b> Description Campaign Launch Party
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name La Comida Mexican	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1101 North Beckley AveDallas, TX 75203	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Community volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Amazon	
Amount (\$) 159.90	Payee address; City; State; Zip Code 325 9th Avenue North Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 58 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024	5 Payee name Mammogram Poster Girls	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 408 West 8th Street Suite 1010 Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Mammogram Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Taco y Vino	
Amount (\$) 61.93	Payee address; City; State; Zip Code 213 West Eighth Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch with neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Chad West	
Amount (\$) 223.22	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Reimbursement for mileage Oct - Dec	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/11/2024	<b>5</b> Payee name Victoria Perez	
<b>6</b> Amount (\$) 37.45	<b>7</b> Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Reimbursement	<b>(b)</b> Description Meals
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/12/2024	Payee name Dallas Morning News	
Amount (\$) 84.42	Payee address; City; State; Zip Code 1954 Commerce Street Dallas, TX 75203	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Subscription	Description Subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name The Kessler School PTO	
Amount (\$) 500.00	Payee address; City; State; Zip Code 1822 W 10th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Event Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 60 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2024	5 Payee name Bishop Street Market	
6 Amount (\$) 43.30	7 Payee address; City; State; Zip Code 419 N Bishop Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gift for senior neighbor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Enos Pizza	
Amount (\$) 100.00	Payee address; City; State; Zip Code 407 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift card for office staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Las Palmas	
Amount (\$) 118.22	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with former CM Mark Clayton
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 61 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/16/2024	5 Payee name Hunkys Old Fashioned	
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for Supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Dallas Youth Sports	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 2524 West Ledbetter DriveDallas, TX 75233	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Holiday Level Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/23/2024	Payee name Victoria Perez	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 810 Rutherford Road Dallas, TX 76065	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 62 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/23/2024	<b>5</b> Payee name Benny Guzman	
<b>6</b> Amount (\$) 200.00	<b>7</b> Payee address; 306 S Montreal Avenue Dallas, TX 75208 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Contract Labor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/24/2024	Payee name The 23rd Senatorial District Tejano	
Amount (\$) 50.00	Payee address; 10432 High Hollow Drive Dallas, TX 75230 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Member Dues	Description Member Dues
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# Supplemental Report Officeholder

# FORM Cover Sheet SR

1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Chad</b>	MI		2. Total Pages Filed: <b>129</b>
	NICKNAME	LAST <b>West</b>	SUFFIX		3. Office Held <b>Council District 1</b>
4. SUPPLEMENTAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report				
5. PERIOD / COVERED	7/1/2024    THROUGH    12/31/2024				
6. ELECTION	Month    Day    Year <b>5/3/2025</b> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> 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
			2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 36,050.00
	EXPENDITURE TOTALS		3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
			4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 36,227.62
8. POLITICAL (Campaign)	CONTRIBUTION TOTALS		5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
			6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 94,250.00
	EXPENDITURE TOTALS		7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
			8. TOTAL POLITICAL EXPENDITURES		\$ 14,784.45
9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES			9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD		\$ 0.00
<div style="display: flex; justify-content: space-between;"> <div> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="text-align: center;"> <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code.</p> <p>***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div>					
Sworn to and subscribed before me, by the said <u>Chad West</u> , this the <u>16th</u> day of <u>January</u> , 20 <u>25</u> , to certify which, witness my hand and seal of office.					
<div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div>					

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
1 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/09/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeff Carey

7 Amount of contribution (\$)

1000.00

6 Contributor address; City; State; Zip Code  
300 E Round Grove Road Suite 621 Lewisville, TX 75067

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/12/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ryan Behring

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
1044 Burlington Blvd Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/24/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Gair

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code  
2200 Ross Avenue Suite 2800 Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/25/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bruce Reid

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code  
71 S Wacker Drive Suite 2750 Chicago, IL 60606

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
2 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

07/29/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Daniel Huerta

7 Amount of contribution (\$)

250.00

6 Contributor address;

1414 Cedar Hill Avenue

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/29/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dominic Perry

Amount of contribution (\$)

100.00

Contributor address;

12801 N Central Expressway Suite 1075 Dallas, TX 75243

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

James Mathis

Amount of contribution (\$)

250.00

Contributor address;

2029 W Colorado Blvd

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2024

Officeholder  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jane Weempe

Amount of contribution (\$)

1000.00

Contributor address;

1316 Canterbury Court

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 07/29/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Pitchford ..... 6 Contributor address; City; State; Zip Code 742 Midbury Dallas, TX 75230	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/29/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Andres ..... Contributor address; City; State; Zip Code 2800 N Henderson Ave Suite 200 Dallas, TX 75206	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Neil Jr ..... Contributor address; City; State; Zip Code 2727 LBJ Freeway Suite 600 Dallas, TX 75234	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Ann Jenkins ..... Contributor address; City; State; Zip Code 744 S Manus Drive Dallas, TX 75224	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
4 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/08/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tyler Woodruff

Campaign  
Contribution

6 Contributor address;

4848 Lemmon Ave

City;

Dallas, TX 75219

State; Zip Code

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/09/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Hargrave

Campaign  
Contribution

Contributor address;

4201 Spring Valley Road Suite 1210 Dallas, TX 75244

City;

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Elisa Goodwin

Campaign  
Contribution

Contributor address;

2310 Broken Point

City;

McKinney, TX 75072

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/11/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joseph Dingman

Campaign  
Contribution

Contributor address;

13223 Glad Acres Drive

City;

Dallas, TX 75234

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
5 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/12/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Hurst

7 Amount of contribution (\$)

100.00

6 Contributor address;

2100 Ross Avenue Suite 2700

City;

Dallas, TX 75201

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/14/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Samuel Herskovits

Amount of contribution (\$)

1000.00

Contributor address;

6214 Prestoncrest Lane

City;

Dallas, TX 75230

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/16/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jennifer Marrinucci

Amount of contribution (\$)

500.00

Contributor address;

2217 Ivan Street Suite 201

City;

Dallas, TX 75201

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/17/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bob Meckfessel

Amount of contribution (\$)

250.00

Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/17/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam McDonald ..... 6 Contributor address; City; State; Zip Code 5484 State Highway 276 Point, TX 75472	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tim Attlee ..... Contributor address; City; State; Zip Code 8751 Collin McKinney Parkway Suite 1405 McKinney, TX 75070	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex Pace ..... Contributor address; City; State; Zip Code 400 N Ervay Suite 230 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/21/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Love ..... Contributor address; City; State; Zip Code 4911 W Lovers Lane Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 7 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/22/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aris Tsiakos ..... <b>6</b> Contributor address; City; State; Zip Code 5224 Springmeadow Drive Dallas, TX 75229	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/23/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford Braly ..... Contributor address; City; State; Zip Code 300 Throckmorton Street Suite 1500 Fort Worth, TX 76102	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/25/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Banerjee ..... Contributor address; City; State; Zip Code 6911 Ellsworth Avenue Dallas, TX 75214	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/26/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Gurney ..... Contributor address; City; State; Zip Code 6001 Windhaven Parkway Suite 100 Plano, TX 75093	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
8 of 66

**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

08/26/2024

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chris Bragg

Campaign  
Contribution

**6** Contributor address;  
6401 Widgeon Drive

City; State; Zip Code  
Plano, TX 75024

**7** Amount of contribution (\$)

100.00

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

**9** Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Preziosi

Campaign  
Contribution

Contributor address;  
2229 Lawndale Drive

City; State; Zip Code  
Dallas, TX 75211

Amount of contribution (\$)

150.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hudson Henley

Officeholder  
Contribution

Contributor address; City; State; Zip Code  
2520 Fairmount Street Suite 200 Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/26/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kim Henley

Officeholder  
Contribution

Contributor address; City; State; Zip Code  
2520 Fairmount Street Suite 200 Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
9 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/26/2024

Officeholder  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kim Henley

6 Contributor address;

City;

State;

Zip Code

2520 Fairmount Street Suite 200 Dallas, TX 75208

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/26/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Valerie Weatherwax

Contributor address;

City;

State;

Zip Code

1000 Oak Hill Park Kennedale, TX 76060

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alfred Crozier

Contributor address;

City;

State;

Zip Code

517 Beacon Hill Drive CoppeCoppell, TX 75019

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ariel Marin

Contributor address;

City;

State;

Zip Code

3134 Ross Avenue Suite 2 Dallas, TX 75201

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 10 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Campos ..... <b>6</b> Contributor address; City; State; Zip Code 428 W Davis St Suite 3 Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 08/27/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Hartnett ..... <b>Contributor address; City; State; Zip Code</b> 5848 Prospect Avenue Dallas, TX 75206	<b>Amount of contribution (\$)</b> 500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/27/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave Rendon ..... <b>Contributor address; City; State; Zip Code</b> 4565 Claire Chennault St Suite 204 Addison, TX 75001	<b>Amount of contribution (\$)</b> 500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/27/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayna Moser ..... <b>Contributor address; City; State; Zip Code</b> 4231 Ridge Dallas, TX 75229	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Shugart ..... 6 Contributor address; City; State; Zip Code 8891 Southwestern Blvd Suite 235 Dallas, TX 75206	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/27/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don Weempe ..... Contributor address; City; State; Zip Code 1316 Canterbury Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed Gough ..... Contributor address; City; State; Zip Code 2021 Olive Street Suite 798 Dallas, TX 75201	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geoffrey Henley ..... Contributor address; City; State; Zip Code 4304 Beverly Drive Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
12 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

08/27/2024

Officeholder  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Geoffrey Henley

7 Amount of contribution (\$)

1500.00

6 Contributor address;  
4304 Beverly Drive

City; State; Zip Code  
Dallas, TX 75205

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

08/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jody Bland

Amount of contribution (\$)

100.00

Contributor address;  
5556 Richard Avenue

City; State; Zip Code  
Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Joel Elony

Amount of contribution (\$)

100.00

Contributor address;  
60001 Windhaven Parkway Suite 100

City; State; Zip Code  
Plano, TX 75093

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Paul Carden

Amount of contribution (\$)

200.00

Contributor address;  
2007 Harlandale Avenue

City; State; Zip Code  
Dallas, TX 75216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 13 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/27/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wright ..... <b>6</b> Contributor address; City; State; Zip Code 2361 Allen Street Dallas, TX 75204	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/27/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow ..... Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Patterson ..... Contributor address; City; State; Zip Code 1215 Stafford Street Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veronica Attlee ..... Contributor address; City; State; Zip Code 8751 Collin McKinney Parkway Suite 1405 McKinney, TX 75070	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfred Sardar ..... 6 Contributor address; City; State; Zip Code 7000 Nueces Drive Irving, TX 75029	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/28/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Ebert ..... Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Helstowski ..... Contributor address; City; State; Zip Code 5209 Heritage Avenue Suite 510 Colleyville, TX 76034	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/05/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Dilling ..... Contributor address; City; State; Zip Code 13208 Meandering Way Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 15 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/08/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pam Gerber ..... <b>6</b> Contributor address; City; State; Zip Code 4435 Holland Avenue Dallas, TX 75219	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Huth ..... Contributor address; City; State; Zip Code 13455 Noel Road Suite 400 Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Huth ..... Contributor address; City; State; Zip Code 13455 Noel Road Suite 400 Dallas, TX 75240	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Pitchford ..... Contributor address; City; State; Zip Code 7422 Midbury Dallas, TX 75230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
16 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

09/25/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Roger Wedell

6 Contributor address;

1318 Elmwood Blvd

City;

Dallas, TX 75224

State; Zip Code

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/02/2024

Officeholder  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

John Moritz

Contributor address;

P.O. Box 490

City;

Arlington, TX 76004

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/03/2024

Officeholder  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Harold Ginsburg

Contributor address;

2610 Fairmount Street

City;

Dallas, TX 75201

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/03/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mitchell Voss

Contributor address;

300 Crescent Court Suite 1800

City;

Dallas, TX 75201

State; Zip Code

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 17 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/04/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Scovell ..... <b>6</b> Contributor address; City; State; Zip Code 7034 Alexander Drive Dallas, TX 75214	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/06/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Rohrman ..... Contributor address; City; State; Zip Code 3720 Marquette Street Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Enzler ..... Contributor address; City; State; Zip Code 6027 Goliad Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen Davis ..... Contributor address; City; State; Zip Code 1218 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 18 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/13/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Princeton ..... <b>6</b> Contributor address; City; State; Zip Code 2816 Southwood Drive Dallas, TX 75233	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/14/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feargal McKinney ..... Contributor address; City; State; Zip Code 5722 Oram Street Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marilee OConnell ..... Contributor address; City; State; Zip Code 634 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Segrest ..... Contributor address; City; State; Zip Code 6935 Meadow Lake Ave Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/14/2024  Campaign Contribution	5 Full name of contributor Roger Wedell ..... 6 Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224 <input type="checkbox"/> out-of-state PAC (ID#:_____)	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2024  Campaign Contribution	Full name of contributor Wade Johns ..... Contributor address; City; State; Zip Code 6964 Westlake Avenue Dallas, TX 75214 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024  Campaign Contribution	Full name of contributor Warren Andres ..... Contributor address; City; State; Zip Code 3710 Rawlins Street Dallas, TX 75219 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor Bradley Olmstead ..... Contributor address; City; State; Zip Code 7110 Olmstead Drive Dallas, TX 75254 <input type="checkbox"/> out-of-state PAC (ID#:_____)	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 20 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Guerrero ..... 6 Contributor address; City; State; Zip Code 2915 Skylark San Antonio, TX 78210	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz ..... Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edith Diaz ..... Contributor address; City; State; Zip Code 1639 Junior Drive Dallas, TX 75208	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Effie Dennison ..... Contributor address; City; State; Zip Code 1303 Woodlawn Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 21 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow ..... <b>6</b> Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingrid Crow ..... Contributor address; City; State; Zip Code 11834 Harry Hines Blvd Suite 135 Dallas, TX 75234	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Weempe ..... Contributor address; City; State; Zip Code 1316 W Canterbury Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Arechinga ..... Contributor address; City; State; Zip Code 22603 Impala Bend San Antonio, TX 78259	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 22 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/15/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Heller ..... <b>6</b> Contributor address; City; State; Zip Code 2165 East Maya Palm Drive Boca Raton, FL 33432	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newt Walker ..... Contributor address; City; State; Zip Code 2519 Thomas Avenue Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Walsh ..... Contributor address; City; State; Zip Code 3200 McKinney Avenue Suite 701 Dallas, TX 75204	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasha Heidari ..... Contributor address; City; State; Zip Code 3020 Greenville Avenue Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
23 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

10/15/2024

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Pasha Heidari

Officeholder  
Contribution

6 Contributor address;

3020 Greenville Avenue

City;

Dallas, TX 75206

State; Zip Code

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/15/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Robert Wright

Campaign  
Contribution

Contributor address;

2361 Allen Street

City;

Dallas, TX 75204

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Syd Hurley

Officeholder  
Contribution

Contributor address;

2227 Vantage Street

City;

Dallas, TX 75207

State; Zip Code

Amount of contribution (\$)

5000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/2024

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tony Shidid

Campaign  
Contribution

Contributor address;

6208 Copperhill Drive

City;

Dallas, TX 75248

State; Zip Code

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 24 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/16/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Santa Maria ..... <b>6</b> Contributor address; City; State; Zip Code 785 Huntingdon Street Coppel, TX 75019	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/16/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Goldstein ..... Contributor address; City; State; Zip Code 10115 Kirkhaven Drive Dallas, TX 75238	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Petty ..... Contributor address; City; State; Zip Code 2808 Fairmount Street Suite 100 Dallas, TX 75201	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrea Mayes ..... Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 25 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/18/2024  Officeholder Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Conrad ..... <b>6</b> Contributor address; City; State; Zip Code 411 W 24th Street New York, NY 10011	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbert Weitzman ..... Contributor address; City; State; Zip Code 3102 Maple Avenue Suite 500 Dallas, TX 75201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy ..... Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy ..... Contributor address; City; State; Zip Code 1207 Eldorado Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 26 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/18/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payton Mayes ..... <b>6</b> Contributor address; City; State; Zip Code 206 Park Ridge Blvd Southlake, TX 76092	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/23/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez ..... Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Suarez ..... Contributor address; City; State; Zip Code 907 Stevens Wood Court Dallas, TX 75208	Amount of contribution (\$) 4000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Lamkin ..... Contributor address; City; State; Zip Code 6201 W Plano Pkwy Suite 100 Plano, TX 75092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 27 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mariam Andersen ..... 6 Contributor address; City; State; Zip Code 903 Stevens Woods Court Dallas, TX 75208	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/29/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Blewett ..... Contributor address; City; State; Zip Code 6228 Vickery Blvd Dallas, TX 75214	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phil Wise ..... Contributor address; City; State; Zip Code 4514 Travis Street Suite 326 Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feargal McKinney ..... Contributor address; City; State; Zip Code 5722 Oram Street Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 28 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/14/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Meisel ..... <b>6</b> Contributor address; City; State; Zip Code 3637 Haynie Avenue Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 11/15/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullen Finnegan ..... <b>Contributor address; City; State; Zip Code</b> 8117 Preston Road Suite 600 Dallas, TX 75225	<b>Amount of contribution (\$)</b> 500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/15/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan Holloway ..... <b>Contributor address; City; State; Zip Code</b> 8906 Stanwood Drive Dallas, TX 75228	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/18/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Jones ..... <b>Contributor address; City; State; Zip Code</b> 20238 Marimac Trinidad, TX 75163	<b>Amount of contribution (\$)</b> 200.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 29 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/18/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adrian Iglesias ..... <b>6</b> Contributor address; City; State; Zip Code 5822 Gallant Run Suite 120 Frisco, TX 75033	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannon Albritton ..... Contributor address; City; State; Zip Code 6941 Dalhart Lane Dallas, TX 75214	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson Elvis ..... Contributor address; City; State; Zip Code 2500 Bennett Avenue Suite 1314 Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole Wade ..... Contributor address; City; State; Zip Code 3326 Conroe Street Dallas, TX 75212	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 30 of 66
2 FILER NAME Chad West			3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Brown ..... 6 Contributor address; City; State; Zip Code 6316 Brimwood Drive Plano, TX 75093		7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris McKay ..... Contributor address; City; State; Zip Code 5949 Sherry Lane Suite 1500 Dallas, TX 75225		Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamie Walk ..... Contributor address; City; State; Zip Code 6327 Brook Lake Drive Dallas, TX 75248		Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeremiah Dover ..... Contributor address; City; State; Zip Code 10014 Estacado Drive Dallas, TX 75228		Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 31 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Merrick Egan ..... 6 Contributor address; City; State; Zip Code 3420 Rosedale Avenue Suite 7 Dallas, TX 75205	7 Amount of contribution (\$)  100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Altschuler ..... Contributor address; City; State; Zip Code 1601 Elm Street Suite 3130 Dallas, TX 75201	Amount of contribution (\$)  25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Leach ..... Contributor address; City; State; Zip Code 300 S Pearl Street Suite 200 Dallas, TX 75201	Amount of contribution (\$)  100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Dixon ..... Contributor address; City; State; Zip Code 4654 Beverly Drive Dallas, TX 75209	Amount of contribution (\$)  500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 32 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Black ..... 6 Contributor address; City; State; Zip Code 751 Kessler Lake Drive Dallas, TX 75208	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perren Gasc ..... Contributor address; City; State; Zip Code 6716 Churchill way Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler Simmons ..... Contributor address; City; State; Zip Code 2500 McKinney Avenue Suite 734 Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Breunig ..... Contributor address; City; State; Zip Code 9900 N Central Expressway Suite 570 Dallas, TX 75238	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

11/19/2024

Officeholder  
Contribution

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Benjamin Breunig

**7** Amount of contribution (\$)

1500.00

**6** Contributor address;

City;

State;

Zip Code

9900 N Central Expressway Suite 570 Dallas, TX 75238

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

**9** Employer (See Instructions)

Date

11/19/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Charles Adams

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

4213 Caruth Blvd

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/19/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jacobe Chandler

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

4718 Firewheel Drive

Garland, TX 75044

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Brenda Garza

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

223 E 6th Street

Dallas, TX 75203

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 34 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/20/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Thornton ..... <b>6</b> Contributor address; City; State; Zip Code 431 E 6th Street Dallas, TX 75203	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Kepner ..... Contributor address; City; State; Zip Code 940 Emmett Ave Suite 200 Belmont, CA 94002	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schafer Smartt ..... Contributor address; City; State; Zip Code 5426 Martel Ave Dallas, TX 75206	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Page ..... Contributor address; City; State; Zip Code 3210 Carlisle Street Suite 1 Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 35 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/22/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sue Alvarez ..... <b>6</b> Contributor address; City; State; Zip Code 1327 Walter Street Dallas, TX 75211	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 11/24/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jude Akpunku ..... <b>Contributor address; City; State; Zip Code</b> 512 Avenue L Dallas, TX 75203	<b>Amount of contribution (\$)</b> 250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/25/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Felts ..... <b>Contributor address; City; State; Zip Code</b> 3997 FM 3211 Caddo Mills, TX 75135	<b>Amount of contribution (\$)</b> 25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/25/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Steven Camp ..... <b>Contributor address; City; State; Zip Code</b> 611 Kessler Springs Avenue Dallas, TX 75208	<b>Amount of contribution (\$)</b> 1000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 36 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/26/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Taylor ..... <b>6</b> Contributor address; City; State; Zip Code 1403 Hollywood Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/26/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Reid ..... Contributor address; City; State; Zip Code 71 S Wacker Drive Chicago, IL 60606	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Cobb ..... Contributor address; City; State; Zip Code 1717 Arts Plaza Suite 2311 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leland Burk ..... Contributor address; City; State; Zip Code 8215 Westchester Drive Suite 207 Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 37 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/30/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alencia Deanda Gregg ..... <b>6</b> Contributor address; City; State; Zip Code 6108 Teresa Lane Rowlett, TX 75089	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/30/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy Prewitt ..... Contributor address; City; State; Zip Code 1601 Elm Street Suite 3110 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Collier ..... Contributor address; City; State; Zip Code 1600 Arbor Ridge Drive Fort Worth, TX 76112	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter Abrahamsen ..... Contributor address; City; State; Zip Code 821 Haines Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/03/2024

Campaign  
Contribution

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bob Meckfessel

**7** Amount of contribution (\$)

100.00

**6** Contributor address;

1427 Haines Avenue

City;

Dallas, TX 75208

State; Zip Code

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

**9** Employer (See Instructions)

Date

12/03/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Mullally

Amount of contribution (\$)

250.00

Contributor address;

922 N Edgefield Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Gay Revi

Amount of contribution (\$)

100.00

Contributor address;

908 N Bishop Avenue Suite 102

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/03/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mike Rawlings

Amount of contribution (\$)

1000.00

Contributor address;

3879 Maple Avenue Suite 400

City;

Dallas, TX 75219

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 39 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/04/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Heinbaugh ..... 6 Contributor address; City; State; Zip Code 1801 Annex Ave Suite 507 Dallas, TX 75204	7 Amount of contribution (\$)  100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/04/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence ..... Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$)  1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024  Officeholder Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence ..... Contributor address; City; State; Zip Code 408 W 8th Street Suite 103 Dallas, TX 75208	Amount of contribution (\$)  1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veletta Forsythe Lill ..... Contributor address; City; State; Zip Code 622 Blair Blvd Dallas, TX 75223	Amount of contribution (\$)  250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 40 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/06/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady Wood ..... <b>6</b> Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/06/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason Moser ..... Contributor address; City; State; Zip Code 600 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Megan Wood ..... Contributor address; City; State; Zip Code 5121 Southbrook Drive Dallas, TX 75209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anne Hagan ..... Contributor address; City; State; Zip Code 204 S Willomet Avenue Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 41 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/09/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Homan ..... <b>6</b> Contributor address; City; State; Zip Code 1629 Handley Drive Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/09/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Wolf ..... Contributor address; City; State; Zip Code 3918 Fairfax Avenue Dallas, TX 75209	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Schaffner ..... Contributor address; City; State; Zip Code 1622 Oak Knoll Street Dallas, TX 75208	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Connatser ..... Contributor address; City; State; Zip Code 815 W Greenbriar Lane Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 42 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/10/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Taylor ..... <b>6</b> Contributor address; City; State; Zip Code 1403 Hollywood Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton Williams ..... Contributor address; City; State; Zip Code 832 Blaylock Drive Suite 3 Dallas, TX 75203	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks Johnson ..... Contributor address; City; State; Zip Code 929 N Windomere Avenue Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Hawkins ..... Contributor address; City; State; Zip Code 2126 Kessler Court Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/10/2024

Campaign  
Contribution

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Clinton Haley

**7** Amount of contribution (\$)

500.00

**6** Contributor address;

6311 Club Lake Drive

City;

Dallas, TX 75214

State; Zip Code

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

**9** Employer (See Instructions)

Date

12/10/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cynthia Michaels

Amount of contribution (\$)

250.00

Contributor address;

519 Woolsey Drive

City;

Dallas, TX 75224

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

David Preziosi

Amount of contribution (\$)

100.00

Contributor address;

2229 Lawndale Drive

City;

Dallas, TX 75211

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/10/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lisa Taylor

Amount of contribution (\$)

50.00

Contributor address;

923 Salmon Drive

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 44 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/10/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell ..... <b>6</b> Contributor address; City; State; Zip Code 1318 Elmwood Blvd Dallas, TX 75224	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russ Aikman ..... Contributor address; City; State; Zip Code 225 S Windomere Ave Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Buss ..... Contributor address; City; State; Zip Code 653 Culpepper Place Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Tibbitts ..... Contributor address; City; State; Zip Code 8580 County Road 167 McKinney, TX 75071	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 45 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Williams ..... 6 Contributor address; City; State; Zip Code 4323 Lorraine Avenue Dallas, TX 75205	7 Amount of contribution (\$) 1000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon Hetzel ..... Contributor address; City; State; Zip Code 7002 Vivian Avenue Dallas, TX 75223	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Williams ..... Contributor address; City; State; Zip Code 4323 Lorraine Avenue Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiffany Hicks ..... Contributor address; City; State; Zip Code 740 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 46 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/13/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Garner ..... <b>6</b> Contributor address; City; State; Zip Code P.O. Box 180188 Dallas, TX 75218	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Taylor ..... Contributor address; City; State; Zip Code 1147 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Walker ..... Contributor address; City; State; Zip Code 1010 N Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Reese ..... Contributor address; City; State; Zip Code 8625 Douglas Avenue Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 49 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/18/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Payma ..... <b>6</b> Contributor address; City; State; Zip Code 812 N Bishop Avenue Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Wingo ..... Contributor address; City; State; Zip Code 1227 Woodlawn Avenue Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paula Larsen ..... Contributor address; City; State; Zip Code 665 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/18/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Larsen ..... Contributor address; City; State; Zip Code 665 Kessler Reserve Court Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 50 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/19/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beverly Mendoza ..... <b>6</b> Contributor address; City; State; Zip Code 520 E 5th Street Dallas, TX 75203	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/19/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol Hagler ..... Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack Hagler ..... Contributor address; City; State; Zip Code 417 N Montclair Avenue Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tino Jalomo ..... Contributor address; City; State; Zip Code 607 W Canty Street Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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1 Total pages Schedule A1:  
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2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/19/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Vipin Nambiar

7 Amount of contribution (\$)

1000.00

6 Contributor address;

5534 W Hanover Avenue

City;

Dallas, TX 75209

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/19/2024

Officeholder  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Vipin Nambiar

Amount of contribution (\$)

1500.00

Contributor address;

5534 W Hanover Avenue

City;

Dallas, TX 75209

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anthony Cuevas

Amount of contribution (\$)

100.00

Contributor address;

1619 Sylvan Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Austin Schenkel

Amount of contribution (\$)

500.00

Contributor address;

3317 Purdue Avenue

City;

Dallas, TX 75225

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 52 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/20/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Scherrieb ..... <b>6</b> Contributor address; City; State; Zip Code 5877 Bayside Drive Fort Worth, TX 76132	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Luna ..... Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent Mecklenburg ..... Contributor address; City; State; Zip Code 4033 Prescott Avenue Dallas, TX 75210	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leo Cusimano ..... Contributor address; City; State; Zip Code 1619 Sylvan Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 53 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/20/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lupe Valdez ..... 6 Contributor address; City; State; Zip Code 707 N Edgefield Avenue Dallas, TX 75208	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Hoyl ..... Contributor address; City; State; Zip Code 2900 McKinnon Suite 603 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swede Hanson ..... Contributor address; City; State; Zip Code 9925 Lakedale Drive Dallas, TX 75218	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/20/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitaly Lunev ..... Contributor address; City; State; Zip Code 623 Haines Avenue Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
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**2** FILER NAME

Chad West

**3** Filer ID (Ethics Commission Filers)

**4** Date

12/25/2024

Officeholder  
Contribution

**5** Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Barry Hancock

**7** Amount of contribution (\$)

1000.00

**6** Contributor address;

4514 Travis Street Suite 326

City;

Dallas, TX 75205

State; Zip Code

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

**9** Employer (See Instructions)

Date

12/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Chuck Norcross

Amount of contribution (\$)

100.00

Contributor address;

506 Woolsey Drive

City;

Dallas, TX 75224

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heather Butterfield

Amount of contribution (\$)

100.00

Contributor address;

3254 Purdue Avenue

City;

Los Angeles, CA 90066

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/27/2024

Officeholder  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kathy Hewitt

Amount of contribution (\$)

50.00

Contributor address;

1410 Yakimo Drive

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 55 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/27/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurence Vineyard ..... <b>6</b> Contributor address; City; State; Zip Code 11436 Strait Lane Dallas, TX 75229	<b>7</b> Amount of contribution (\$) 200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/27/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Leal ..... <b>Contributor address; City; State; Zip Code</b> 414 North Casa Grande Circle Duncanville, TX 75116	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/27/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Temple Anderson ..... <b>Contributor address; City; State; Zip Code</b> 1921 Mayflower Drive Dallas, TX 75208	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/30/2024  Campaign Contribution	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Alice Zaccarelo ..... <b>Contributor address; City; State; Zip Code</b> 2243 Lawndale Drive Dallas, TX 75211	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/30/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Becky Moffett

7 Amount of contribution (\$)

400.00

6 Contributor address;

934 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/30/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lauren Moffett

Amount of contribution (\$)

100.00

Contributor address;

934 Stevens Woods Court

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/30/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tom Kapioltas

Amount of contribution (\$)

250.00

Contributor address;

5304 Middleton Drive

City;

Parker, TX 75002

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ben Coffee

Amount of contribution (\$)

25.00

Contributor address;

2752 Gaston Avenue Suite 1232

City;

Dallas, TX 75226

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 57 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Orr ..... 6 Contributor address; City; State; Zip Code 518 N Manus Drive Dallas, TX 75224	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny Guzman ..... Contributor address; City; State; Zip Code 306 S Montreal Dallas, TX 75208	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Bowling ..... Contributor address; City; State; Zip Code 457 San Clemente El Paso, TX 79912	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon Luke ..... Contributor address; City; State; Zip Code 1520 Elm Street Suite 201 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 58 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Brooks ..... <b>6</b> Contributor address; City; State; Zip Code 735 Rainbow Drive Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chad Dolezal ..... Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Culak ..... Contributor address; City; State; Zip Code 1223 Kings Highway Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claudia Huerta ..... Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 59 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David de la Fuente ..... 6 Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diana Lin ..... Contributor address; City; State; Zip Code 4323 Highlander Dr Dallas, TX 75287	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique MacGregor ..... Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fred Pena ..... Contributor address; City; State; Zip Code 410 E 5th Street Dallas, TX 75203	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 60 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hailee Joy ..... 6 Contributor address; City; State; Zip Code 701 Melba Street Dallas, TX 75208	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarrod Jackson ..... Contributor address; City; State; Zip Code 5301 Montrose Dallas, TX 75209	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Jennings ..... Contributor address; City; State; Zip Code 1823 Naylor Street Dallas, TX 75228	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joy Dolezal ..... Contributor address; City; State; Zip Code 101 S Winnetka Avenue Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 61 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JR Huerta ..... <b>6</b> Contributor address; City; State; Zip Code 2125 Elmwood Blvd Dallas, TX 75224	<b>7</b> Amount of contribution (\$) 200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan Parra ..... Contributor address; City; State; Zip Code 15 Stonebriar Court Dallas, TX 75206	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle Wick ..... Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Niermann ..... Contributor address; City; State; Zip Code 845 N Oak Cliff Blvd Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 62 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Cook ..... <b>6</b> Contributor address; City; State; Zip Code 1942 Malone Cliff View Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Kay de la Fuente ..... Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Kingston ..... Contributor address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelle Brooks ..... Contributor address; City; State; Zip Code 735 Rainbow Drive Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 63 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024  Campaign Contribution	5 Full name of contributor Nick Noorani out-of-state PAC (ID#: ) Contributor address; City; State; Zip Code 3009 Hallwell Dr Dallas, TX 75093	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor Paul Sims out-of-state PAC (ID#: ) Contributor address; City; State; Zip Code 8811 Antrim Dr Dallas, TX 75218	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor Peter Jacobsen out-of-state PAC (ID#: ) Contributor address; City; State; Zip Code 419 W 9th Street Suite 104 Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor Philip Kingston out-of-state PAC (ID#: ) Contributor address; City; State; Zip Code 5901 Palo Pinto Dallas, TX 75206	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 64 of 66
<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2024  Campaign Contribution	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Wick ..... <b>6</b> Contributor address; City; State; Zip Code 1212 N Oak Cliff Blvd Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taryl Sherman ..... Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor de la Fuente ..... Contributor address; City; State; Zip Code 106 S Clinton Dallas, TX 75208	Amount of contribution (\$) 10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinnie Sherman ..... Contributor address; City; State; Zip Code 1743 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
65 of 66

2 FILER NAME

Chad West

3 Filer ID (Ethics Commission Filers)

4 Date

12/31/2024

Campaign  
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Waylon Longino

7 Amount of contribution (\$)

500.00

6 Contributor address;

4619 Insurance Lane

City;

Dallas, TX 75205

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/31/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Joy

Amount of contribution (\$)

50.00

Contributor address;

701 Melba Street

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

William Zimmerman

Amount of contribution (\$)

25.00

Contributor address;

105 S Willomet Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/31/2024

Campaign  
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Yasmine Payma

Amount of contribution (\$)

50.00

Contributor address;

812 N Bishop Avenue

City;

Dallas, TX 75208

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 66 of 66
2 FILER NAME Chad West		3 Filer ID (Ethics Commission Filers)
4 Date 08/07/2024  Campaign Contribution	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREpac Texas Realtors PAC ..... 6 Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768	7 Amount of contribution (\$) 2500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HBA of Greater Dallas HOMEPAC ..... Contributor address; City; State; Zip Code 5816 W Plano Parkway Dallas, TX 75093	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2024  Campaign Contribution	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Assoc of Greater Dallas ..... Contributor address; City; State; Zip Code 2100 West Walnut Hill Lane Suite 1000 Irving, TX 75038	Amount of contribution (\$) 2500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 07/15/2024	5 Payee name The UPS Store 78	
6 Amount (\$) 51.02 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name JW Mariott	
Amount (\$) 126.14 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 110 East 2nd Street Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/24/2024	Payee name Austin Barton Spring	
Amount (\$) 70.39 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1500 Barton Springs Road Austin, TX 78704	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	Description Meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/24/2024	<b>5</b> Payee name Vespaio	
<b>6</b> Amount (\$) 128.26 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 1610 South Congress Avenue Austin, TX 78704 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meal with Affordable Housing advocates	<b>(b)</b> Description Meals
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/25/2024	Payee name MAILCHIMP	
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/26/2024	Payee name Austin Airport	
Amount (\$) 15.02 Officeholder Funds for Officeholder Expenditures	Payee address; 3600 Presidential Boulevard Austin, TX 78719 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Travel out of district
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/29/2024	<b>5</b> Payee name Tribal All Day Café	
<b>6</b> Amount (\$) 73.68 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Meal with Commissioner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Cheesecake Factory	
Amount (\$) 127.72 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 7700 West Northwest Highway Dallas , TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Meal with Board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/01/2024	Payee name Chad West	
Amount (\$) 181.50 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Mileage Reimbursement	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/05/2024	<b>5</b> Payee name Walgreens	
<b>6</b> Amount (\$) 69.13 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 1306 North Beckley Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing costs	<b>(b)</b> Description Printing costs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Amazon	
Amount (\$) 265.24 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 325 9th Avenue North Seattle, WA 98109	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/05/2024	Payee name Extra Space	
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 1931 Fort Worth Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 5 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/07/2024	<b>5</b> Payee name Wayward Coffee	
<b>6</b> Amount (\$) 34.90 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 1318 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Coffee with new residents
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/07/2024	Payee name Cox Farms Market	
Amount (\$) 57.76 Officeholder Funds for Officeholder Expenditures	Payee address; 778 Fort Worth Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Supplies for meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/09/2024	Payee name Cretias Bakery	
Amount (\$) 86.00 Officeholder Funds for Officeholder Expenditures	Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Supporters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 6 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/12/2024	<b>5</b> Payee name Taco Deli	
<b>6</b> Amount (\$) 35.28 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 1878 Sylvan Avenue Dallas, TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Volunteer Expense	<b>(b)</b> Description Food for volunteers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Tribal All Day Café	
Amount (\$) 49.18 Officeholder Funds for Officeholder Expenditures	Payee address; 263 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with neighborhood advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Tribal All Day Café	
Amount (\$) 33.29 Officeholder Funds for Officeholder Expenditures	Payee address; 263 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with community member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/13/2024	5 Payee name Paradiso	
6 Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 308 North Bishop AvenueDallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description Gift card for community event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/14/2024	Payee name Veracruz Café	
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 408 North Bishop Avenue Suite 107 Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Donation for neighborhood event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Toulouse Knox	
Amount (\$) 60.56 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3314 Knox Street Dallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising	Description Meal with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2024	5 Payee name Uchiba Dallas	
6 Amount (\$) 93.94 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2817 Maple Avenue Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with Commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name La Condesa	
Amount (\$) 250.56 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 400 West Second Street Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of district	Description Meal with City Staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/20/2024	Payee name Chad West	
Amount (\$) 1404.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Hotel cost
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/20/2024	5 Payee name Chad West	
6 Amount (\$) 402.32 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Travel Out Of District	(b) Description Travel Reimbursement - flight
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Chad West	
Amount (\$) 186.88 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 810 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel Reimbursement meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/22/2024	Payee name Susana Jaimes	
Amount (\$) 325.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor for holiday cards and gifts	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 10 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/23/2024		<b>5</b> Payee name The Kessler School			
<b>6</b> Amount (\$) 2000.00 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 1822 W 10th Street      Dallas, TX 75208 City;      State;      Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation		<b>(b)</b> Description Donation		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/26/2024		Payee name Hunkys			
Amount (\$) 100.00 Campaign Funds for Campaign Expenditures		Payee address; 3930 Cedar Springs RoadDallas, TX 75219 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts		Description Gift for Donor		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/26/2024		Payee name MAILCHIMP			
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures		Payee address; 405 N Angier Ave NE      Atlanta, GA 30308 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description E newsletter		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 08/27/2024	5 Payee name Chips Hamburgers	
6 Amount (\$) 58.96 Officeholder Funds for Officeholder Expenditures	7 Payee address; 4530 West Lovers Lane Dallas, TX 75225 City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with Board Member
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/29/2024	Payee name R+D Dallas	
Amount (\$) 87.73 Officeholder Funds for Officeholder Expenditures	Payee address; 8300 Preston Center Plaza Dallas, TX 75205 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with home builder
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Stevens Park Golf Course	
Amount (\$) 50.89 Officeholder Funds for Officeholder Expenditures	Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel in district	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 12 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/30/2024		<b>5</b> Payee name Parking Management			
<b>6</b> Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel out of district		<b>(b)</b> Description Non Profit Meeting	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/30/2024		Payee name Dr Delphinium			
Amount (\$) 173.77 Officeholder Funds for Officeholder Expenditures		Payee address; 5806 West Lovers Lane Dallas, TX 75225 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Gifts		Description Flowers for supporter	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 08/30/2024		Payee name Beverleys			
Amount (\$) 132.59 Officeholder Funds for Officeholder Expenditures		Payee address; 3215 North Fitzhugh Avenue Dallas, TX 75204 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meal with Board	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Elmwood Coffee	
6 Amount (\$) 5.25 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1805 South Edgefield Avenue Dallas, TX 75208 City; State; Zip Code	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meals
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Stevens Park Golf Course	
Amount (\$) 8.71 Officeholder Funds for Officeholder Expenditures	Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel in district	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Lucky Dog Saloon	
Amount (\$) 14.07 Officeholder Funds for Officeholder Expenditures	Payee address; 2701 Cedar Springs RoadDallas, TX 75201 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Volunteer Expense	Description Meal with volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 14 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/03/2024		<b>5</b> Payee name Katy Trail Ice House			
<b>6</b> Amount (\$) 41.01 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 3127 Routh Street      Dallas, TX 75201 City;      State;      Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Volunteer Expense		<b>(b)</b> Description Meal with volunteer	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/03/2024		Payee name Extra Space Storage			
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures		Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Storage		Description Storage Fees	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/03/2024		Payee name R+D Dallas			
Amount (\$) 101.98 Officeholder Funds for Officeholder Expenditures		Payee address; 8300 Preston Center PlazaDallas, TX 75225 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Meals		Description Meal with former CM	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/03/2024	5 Payee name Hudson House Lake	
6 Amount (\$) 114.72 Officeholder Funds for Officeholder Expenditures	7 Payee address; 4040 Abrams Road      Dallas, TX 75214 City;      State;      Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with association leadership
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/03/2024	Payee name Maison Chinoise	
Amount (\$) 171.98 Officeholder Funds for Officeholder Expenditures	Payee address; 4152 Cole Avenue Suite 106 Dallas, TX 75204 City;      State;      Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with eco dev advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/03/2024	Payee name American Airlines	
Amount (\$) 710.03 Officeholder Funds for Officeholder Expenditures	Payee address; 3200 E Airfield Drive      DFW Airport, TX 75261 City;      State;      Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out Of District	Description Travel for conference
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 16 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/04/2024		<b>5</b> Payee name Honor Bar			
<b>6</b> Amount (\$) 47.33 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description Meeting with TIF Board representative		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/05/2024		Payee name R+D Dallas			
Amount (\$) 198.71 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 8300 Preston Center PlazaDallas, TX 75225			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Dinner with former elected official		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/05/2024		Payee name Written By The Seasons			
Amount (\$) 271.30 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 380 Melba Street Dallas, TX 75208			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Dinner with community advocates		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 17 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/09/2024	<b>5</b> Payee name Cretias Bakery	
<b>6</b> Amount (\$) 13.20 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Gift for volunteer
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Birdies East	
Amount (\$) 117.36 Officeholder Funds for Officeholder Expenditures	Payee address; 6221 East Mockingbird Lane Dallas, TX 75214 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meal with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Waterman - Central DFW	
Amount (\$) 1135.50 Officeholder Funds for Officeholder Expenditures	Payee address; 3606 S Tyler Street Dallas, TX 75225 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Expense	Description Computer equipmt and install
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/10/2024	5 Payee name Cretias Bakery	
6 Amount (\$) 24.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 228 West Davis Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for councilmembers
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Ascension Coffee	
Amount (\$) 26.51 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Suite 40 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with housing advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Katy Trail Ice House	
Amount (\$) 31.95 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 3127 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Meeting with board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/11/2024		<b>5</b> Payee name Rally House			
<b>6</b> Amount (\$) 153.68 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 5500 Greenville Avenue Suite 203 Dallas, TX 75206 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		<b>(b)</b> Description Gift for community volunteer	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 09/13/2024		Payee name Greater Dallas Chamber			
Amount (\$) 200.00 Officeholder Funds for Officeholder Expenditures		Payee address; 909 Lake Carolyn Parkway Suite 320 Irving, TX 74111 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Donation		Description Sponsorship	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 09/16/2024		Payee name The Pour House			
Amount (\$) 24.68 Campaign Funds for Campaign Expenditures		Payee address; 1919 Skillman Street Dallas, TX 75206 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Meeting		Description Meeting with volunteers	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 20 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/16/2024	5 Payee name Shinsei Restaurant	
6 Amount (\$) 130.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; 7713 Inwood Road      Dallas, TX 75209 City;      State;      Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with housing advocate
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/17/2024	Payee name Tepa Bar & Grill	
Amount (\$) 63.31 Officeholder Funds for Officeholder Expenditures	Payee address; 428 South Hampton Road      Dallas, TX 75208 City;      State;      Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Community Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 09/18/2024	Payee name The UPS Store 78	
Amount (\$) 125.01 Officeholder Funds for Officeholder Expenditures	Payee address; 1222 North Bishop Avenue Suite 200 Dallas , TX 75208 City;      State;      Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing costs	Description Printing costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 21 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/18/2024	5 Payee name Mirador	
6 Amount (\$) 85.45 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 1608 Elm Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Meeting with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name Teleflora	
Amount (\$) 108.22 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 11444 West Olympic Boulevard Los Angeles, CA 90064	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for staff mbr family funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/18/2024	Payee name National Anthem	
Amount (\$) 164.16 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 22 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/19/2024		<b>5</b> Payee name The Salty Donut			
<b>6</b> Amount (\$) 65.08 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 414 West Davis Street Dallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Gifts		<b>(b)</b> Description Gifts for councilmembers	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/20/2024		Payee name NTX The Kessler			
Amount (\$) 115.00 Officeholder Funds for Officeholder Expenditures		Payee address; 1230 West Davis Street Dallas, TX 75208 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Description Sponsorship	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/23/2024		Payee name Hunkys			
Amount (\$) 41.64 Officeholder Funds for Officeholder Expenditures		Payee address; 3930 Cedar Springs RoadDallas, TX 75219 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meals with BADMA member	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 23 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 09/23/2024		<b>5</b> Payee name Cretias Bakery			
<b>6</b> Amount (\$) 39.20 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 228 West Davis Street Dallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Volunteer Expense		<b>(b)</b> Description Gifts for community volunteers	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/23/2024		Payee name The Dallas Assembly			
Amount (\$) 2560.00 Officeholder Funds for Officeholder Expenditures		Payee address; 12900 Preston Road Suite 1210 Dallas, TX 75230 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel out of district		Description Travel Out of District	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 09/25/2024		Payee name Taco y Vino			
Amount (\$) 66.76 Officeholder Funds for Officeholder Expenditures		Payee address; 213 West Eighth Street Dallas, TX 75208 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Meeting		Description Meeting with board member	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 24 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/25/2024	5 Payee name MAILCHIMP	
6 Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description E newsletter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Bullzerk	
Amount (\$) 33.56 Officeholder Funds for Officeholder Expenditures	Payee address; 332 West Davis Street Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for retiring neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Apple Store	
Amount (\$) 433.99 Officeholder Funds for Officeholder Expenditures	Payee address; 100 Knox Street Dallas, TX 75214 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Supplies	Description Officeholder phone accessories
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 25 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/27/2024	5 Payee name Bishop Street Market	
6 Amount (\$) 45.47 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 401 N Bishop Avenue Dallas, TX 75208	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gift for city employee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Adamson High Band	
Amount (\$) 255.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 309 East Ninth Street Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/27/2024	Payee name The Adolphus	
Amount (\$) 353.18 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1321 Commerce Street Dallas, TX 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Meals	Description Council meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 26 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 09/28/2024	5 Payee name Elena Guzman	
6 Amount (\$) 260.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; 306 S Montreal Avenue Dallas, TX 75208 City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor storage	(b) Description Contract Labor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Go Daddy	
Amount (\$) 74.32 Campaign Funds for Campaign Expenditures	Payee address; 813 N 1st Avenue Tempe, AZ 40021 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Domain
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Well Community	
Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures	Payee address; 125 Sunset Avenue Dallas, TX 75208 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 27 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/02/2024		<b>5</b> Payee name Tribal All Day Café			
<b>6</b> Amount (\$) 65.39 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 263 North Bishop AvenueDallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meeting		<b>(b)</b> Description Meeting with commissioner		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/02/2024		Payee name Amazon			
Amount (\$) 224.10 Officeholder Funds for Officeholder Expenditures		Payee address; 325 9th Avenue North Seattle, WA 98109 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies		Description Home Office Supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/03/2024		Payee name Ace Parking			
Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures		Payee address; 200 Crescent Court Dallas, TX 75201 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Parking		Description Parking		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 28 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/03/2024		<b>5</b> Payee name Ascension			
<b>6</b> Amount (\$) 22.44 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 1621 Oak Lawn Avenue Dallas, TX 75207 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Meeting Expense		<b>(b)</b> Description Breakfast with housing advocate	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/03/2024		Payee name Extra Space			
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures		Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Storage		Description Storage Fees	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/03/2024		Payee name Beverleys			
Amount (\$) 180.46 Officeholder Funds for Officeholder Expenditures		Payee address; 3215 North Fitzhugh Avenue Dallas, TX 75204 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with restaurant assoc leader	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 29 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/04/2024	<b>5</b> Payee name The UPS Store 78	
<b>6</b> Amount (\$) 60.08 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 1222 North Bishop Avenue Suite 200 Dallas , TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing costs	<b>(b)</b> Description Printing costs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name BBBop Seoul	
Amount (\$) 81.83 Officeholder Funds for Officeholder Expenditures	Payee address; 828 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Lunch with Non-Profit Board Members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Gonzalez Restaurant	
Amount (\$) 154.27 Officeholder Funds for Officeholder Expenditures	Payee address; 416 West Jefferson Boulevard Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Dinner with neighborhood leaders
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 30 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/04/2024	<b>5</b> Payee name Primal Fundraising	
<b>6</b> Amount (\$) 3416.52 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 5706 East Mockingbird Lane Dallas, TX 75206 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Costs	<b>(b)</b> Description Consulting Costs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/07/2024	Payee name State Fair	
Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures	Payee address; 925 South Haskell Avenue Dallas, TX 75223 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description State Fair Gift for volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Bistro 31	
Amount (\$) 54.16 Officeholder Funds for Officeholder Expenditures	Payee address; 87 Highland Park Village Suite 200 Dallas, TX 75205 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Lunch with home builder
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 31 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/07/2024	<b>5</b> Payee name Honor Bar	
<b>6</b> Amount (\$) 75.51 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 26 Highland Park VillageDallas, TX 75205	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Dinner with Richardson CM
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Ascension	
Amount (\$) 27.16 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Suite 40 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with potential council candidate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Maggianos North Park	
Amount (\$) 291.87 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 205 NorthPark Center Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Dinner with neighborhood leaders
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 32 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/08/2024	<b>5</b> Payee name The 23rd Senatorial District Tejano	
<b>6</b> Amount (\$) 60.00 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 10432 High Hollow Drive Suite 141 Dallas, TX 75230 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Dues	<b>(b)</b> Description Member Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/08/2024	Payee name North Oak Cliff Greenspace	
Amount (\$) 1250.00 Officeholder Funds for Officeholder Expenditures	Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Walgreens	
Amount (\$) 22.40 Officeholder Funds for Officeholder Expenditures	Payee address; 1306 North Beckley Avenue Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 33 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2024	5 Payee name The USPS	
6 Amount (\$) 47.18 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing costs	(b) Description Printing costs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Wayward Coffee	
Amount (\$) 15.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1318 West Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Coffee meeting with advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Ascension	
Amount (\$) 22.09 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Suite 40 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with arts advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 34 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/15/2024		<b>5</b> Payee name Walgreens			
<b>6</b> Amount (\$) 54.11 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 1306 North Beckley Avenue, Dallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office supplies		<b>(b)</b> Description Office decorations		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name Ace Parking			
Amount (\$) 25.00 Officeholder Funds for Officeholder Expenditures		Payee address; 200 Crescent Court Dallas, TX 75201 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Parking		Description Parking		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name Dallas Fair			
Amount (\$) 38.00 Officeholder Funds for Officeholder Expenditures		Payee address; 1300 Robert B Cullum Boulevard Dallas, TX 75210 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals		Description Lunch with Donors		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 35 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 10/15/2024		<b>5</b> Payee name Tribal All Day Café			
<b>6</b> Amount (\$) 40.72 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 263 North Bishop Avenue City; State; Zip Code Dallas, TX 75208			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Meeting		<b>(b)</b> Description Breakfast meeting with envt advocate	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name Stevens Park Golf Course			
Amount (\$) 183.92 Officeholder Funds for Officeholder Expenditures		Payee address; 1005 North Montclair Avenue City; State; Zip Code Dallas, TX 75208			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Meeting with golf course advocates	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/15/2024		Payee name American Airlines			
Amount (\$) 208.95 Officeholder Funds for Officeholder Expenditures		Payee address; 3200 E Airfield Drive DFW Airport, TX 75261 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel out of district		Description Travel expense flight changes	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 36 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name DFW Airport Park	
6 Amount (\$) 52.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 3200 E Airfield Drive Dallas, TX 65261	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Parking	(b) Description Parking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Stevens Park Golf Course	
Amount (\$) 90.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1005 North Montclair Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with Rosemont Dads group
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Tribal All Day Café	
Amount (\$) 48.74 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting Expense	Description Breakfast meeting with skate park donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 37 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name Las Palmas	
6 Amount (\$) 160.65 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Dinner with former Councilmember
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Ascension	
Amount (\$) 44.50 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1621 Oak Lawn Avenue Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Meeting with arts advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/22/2024	Payee name Fort Worth Avenue Development	
Amount (\$) 300.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code P.O. Box 225120 Fort Worth , TX 75222	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 38 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 10/24/2024	5 Payee name Lucky Dog Saloon	
6 Amount (\$) 1464.07 Campaign Funds for Campaign Expenditures	7 Payee address; 2701 Cedar Springs Road City; State; Zip Code Dallas, TX 75201	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising	(b) Description Fundraising event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/24/2024	Payee name MAILCHIMP	
Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	Payee address; 405 N Angier Ave NE Atlanta, GA 30308 City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description E newsletter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/24/2024	Payee name Primal Fundraising	
Amount (\$) 4135.00 Campaign Funds for Campaign Expenditures	Payee address; 5706 East Mockingbird Lane City; State; Zip Code Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Costs	Description Consulting Costs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 39 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/29/2024	<b>5</b> Payee name Rosemont Dads Club	
<b>6</b> Amount (\$) 1500.00 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 911 North Morocco Avenue, Dallas, TX 75211 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Sponsor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Ascension	
Amount (\$) 51.70 Officeholder Funds for Officeholder Expenditures	Payee address; 2708 Routh Street Dallas, TX 75201 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Breakfast mtg w housing advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Barnes and Nobles	
Amount (\$) 64.95 Officeholder Funds for Officeholder Expenditures	Payee address; 7700 West Northwest Highway Dallas, TX 75225 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift for board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 40 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11/04/2024		<b>5</b> Payee name Tribal All Day Café			
<b>6</b> Amount (\$) 38.28 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; City; State; Zip Code 263 North Bishop AvenueDallas, TX 75208			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Volunteer Expense		<b>(b)</b> Description Breakfast meeting with volunteer		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/04/2024		Payee name Hunkys Old Fashioned			
Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75218			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts		Description Gift Card for neighborhood event		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/04/2024		Payee name ABC Party			
Amount (\$) 85.66 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1414 West Davis Street Dallas, TX 75208			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies		Description Event supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 41 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Oak Cliff Lions Club	
<b>6</b> Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; P.O. Box 4445      Dallas, TX 75208 City;      State;      Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Member Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/04/2024	Payee name Oak Cliff Lions Club	
Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures	Payee address; P.O. Box 4445      Dallas, TX 75208 City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/04/2024	Payee name Extra Space	
Amount (\$) 98.00 Campaign Funds for Campaign Expenditures	Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 42 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Simply To Impress	
<b>6</b> Amount (\$) 1154.45 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 3606 S Tyler Street      Dallas, TX 75224 City;      State;      Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description Community cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/06/2024	Payee name Village Buger	
Amount (\$) 32.19 Officeholder Funds for Officeholder Expenditures	Payee address; 3699 McKinney Avenue Suite C325 Dallas, TX 75204 City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch meeting with city staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 11/07/2024	Payee name Cretias Bakery	
Amount (\$) 38.00 Officeholder Funds for Officeholder Expenditures	Payee address; 228 West Davis Street      Dallas, TX 75208 City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for retiring board member
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 43 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/07/2024	5 Payee name Ascension	
6 Amount (\$) 42.33 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with Commissioner
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/08/2024	Payee name The UPS Store 78	
Amount (\$) 167.67 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 1222 North Bishop Avenue Suite 200 Dallas , TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Postage and Mailing	Description Stamps
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/12/2024	Payee name Victoria Perez	
Amount (\$) 36.99 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Reimbursement for donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 44 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11/12/2024		<b>5</b> Payee name Parking			
<b>6</b> Amount (\$) 34.35 Campaign Funds for Campaign Expenditures		<b>7</b> Payee address; 2506 Northwest 2nd AveMiami Beach, FL 33127 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising		<b>(b)</b> Description Out of district travel - parking	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/12/2024		Payee name Joeys Italian			
Amount (\$) 30.24 Campaign Funds for Campaign Expenditures		Payee address; 2506 Northwest 2nd AveMiami Beach, FL 33127 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Fundraising		Description Out of district travel - meals	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/12/2024		Payee name Giannis Restaurant			
Amount (\$) 31.08 Campaign Funds for Campaign Expenditures		Payee address; 1116 Ocean Drive Miami Beach, FL 33139 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Fundraising		Description Out of district travel - meals	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 45 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/12/2024	<b>5</b> Payee name Standard Miami	
<b>6</b> Amount (\$) 691.23 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 40 Island Avenue Miami Beach, FL 33139 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising	<b>(b)</b> Description Out of district travel - hotel
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name The Spelled Milk	
Amount (\$) 75.00 Officeholder Funds for Officeholder Expenditures	Payee address; 712 West Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift cards for board members
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Legends Concession	
Amount (\$) 108.56 Officeholder Funds for Officeholder Expenditures	Payee address; 2045 East Division StreetArlington, TX 76011 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Meal with sports advocate
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 46 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024	5 Payee name National Anthem	
6 Amount (\$) 72.98 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 2130 Commerce Street Dallas, TX 75201	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meals	(b) Description Meal with city staff
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ace Parking	
Amount (\$) 20.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 200 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Out of district travel	Description Out of district travel - parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Ascension	
Amount (\$) 30.68 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Breakfast meeting with activist
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 47 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/19/2024	<b>5</b> Payee name Chad West	
<b>6</b> Amount (\$) 191.90 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 810 North Bishop Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Reimbursement for mileage	<b>(b)</b> Description Travel in District
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Susana Jaimes	
Amount (\$) 325.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3606 N Bishop Avenue Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Moxies Grill and Bar	
Amount (\$) 137.99 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 100 Crescent Court Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Dinner meeting with LIHTC developer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 48 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11/21/2024		<b>5</b> Payee name Oddfellows			
<b>6</b> Amount (\$) 200.00 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; 316 West Seventh Street Dallas, TX 75208 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation		<b>(b)</b> Description Gift for neighborhood fundraiser		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/21/2024		Payee name Family Gateway			
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures		Payee address; 1421 West Mockingbird Lane Dallas, TX 75247 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation		Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/25/2024		Payee name Michaels			
Amount (\$) 102.76 Officeholder Funds for Officeholder Expenditures		Payee address; 751 Highway 67 Cedar Hill, TX 75104 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies		Description Office supplies		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 49 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2024	5 Payee name MAILCHIMP	
6 Amount (\$) 171.63 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description E newsletter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name Qualigraphics	
Amount (\$) 347.42 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Marketing materials
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2024	Payee name USPS	
Amount (\$) 727.80 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 50 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 11/27/2024	5 Payee name Benihana	
6 Amount (\$) 84.32 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 7775 Banner Drive Dallas, TX 75251	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Discussion with police assoc rep
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Elena Guzman	
Amount (\$) 785.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Help with community card mailer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/2024	Payee name Skate Parks for Dallas	
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 100 Bachman Lake Park Loop Trail Dallas, TX 75220	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 51 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/29/2024	<b>5</b> Payee name BBBop Seoul	
<b>6</b> Amount (\$) 55.51 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; City; State; Zip Code 828 West Davis Street Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Meals	<b>(b)</b> Description Lunch with bus assoc member
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/30/2024	Payee name Taco y Vino	
Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 213 West Eighth Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift card for neighborhood
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name USPS	
Amount (\$) 49.20 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 515 Centre Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Postage	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 52 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/02/2024		<b>5</b> Payee name Legends Concession			
<b>6</b> Amount (\$) 133.86 Campaign Funds for Campaign Expenditures		<b>7</b> Payee address; 2045 East Division StreetArlington, TX 76011 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising		<b>(b)</b> Description Dinner with donors	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/02/2024		Payee name Aris Pantry			
Amount (\$) 189.22 Officeholder Funds for Officeholder Expenditures		Payee address; 1307 West Davis Street Dallas, TX 75208 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Gifts		Description Gifts for neighborhood volunteers	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/02/2024		Payee name Target			
Amount (\$) 149.20 Campaign Funds for Campaign Expenditures		Payee address; 2418 North Haskell AvenueDallas, TX 75204 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Supplies		Description Supplies for campaign office	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 53 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/02/2024	<b>5</b> Payee name The UPS Store 78	
<b>6</b> Amount (\$) 96.73 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 1222 North Bishop Avenue Suite 200 Dallas , TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing costs	<b>(b)</b> Description Printing
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Katy Seitzler	
Amount (\$) 210.00 Campaign Funds for Campaign Expenditures	Payee address; 217 Sycamore Creek Road Allen, TX 75002 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor - Graphics
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Eatzi's Oak Lawn	
Amount (\$) 110.93 Officeholder Funds for Officeholder Expenditures	Payee address; 3403 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Meal train for Oak Cliff family
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 54 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/03/2024	5 Payee name Stevens Park Golf Course	
6 Amount (\$) 150.71 Officeholder Funds for Officeholder Expenditures	7 Payee address; 1005 North Montclair Avenue Dallas, TX 75208 City; State; Zip Code	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Meeting	(b) Description Community meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Extra Space	
Amount (\$) 113.00 Campaign Funds for Campaign Expenditures	Payee address; 1931 Fort Worth AvenueDallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Storage	Description Storage Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Flowers By Legacy	
Amount (\$) 210.79 Officeholder Funds for Officeholder Expenditures	Payee address; P.O. Box 1442 Evanston, IL 60201 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 55 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/05/2024	<b>5</b> Payee name Chad West	
<b>6</b> Amount (\$) 1950.00 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 810 North Bishop Avenue City; Dallas, TX 75208 State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Rent	<b>(b)</b> Description Office Rent Reimbursement Jul - Dec 24
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Chad West	
Amount (\$) 726.00 Officeholder Funds for Officeholder Expenditures	Payee address; 810 North Bishop Avenue City; Dallas, TX 75208 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Office I-net reimbursement Jul - Dec 24
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/05/2024	Payee name Chad West	
Amount (\$) 1080.00 Officeholder Funds for Officeholder Expenditures	Payee address; 810 North Bishop Avenue City; Dallas, TX 75208 State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Supplies	Description Phone Expense Reimbursement Jul - Dec 24
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 56 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/06/2024	<b>5</b> Payee name Qualigraphics	
<b>6</b> Amount (\$) 66.94 Campaign Funds for Campaign Expenditures	<b>7</b> Payee address; 934 Stevens Woods Court City; Dallas, TX 75208 State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising	<b>(b)</b> Description Marketing materials
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/09/2024	Payee name American Airlines	
Amount (\$) 697.40 Officeholder Funds for Officeholder Expenditures	Payee address; 3200 E Airfield Drive DFW Airport, TX 75261 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel out of District	Description Travel out of district - site visit
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/10/2024	Payee name Dallas Morning News	
Amount (\$) 52.23 Officeholder Funds for Officeholder Expenditures	Payee address; 1954 Commerce Street Dallas, TX 75201 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Subscription	Description Subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 57 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/11/2024		<b>5</b> Payee name La Comida Mexican			
<b>6</b> Amount (\$) 913.63 Campaign Funds for Campaign Expenditures		<b>7</b> Payee address; 1101 North Beckley AveDallas, TX 75203 City; State; Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising		<b>(b)</b> Description Campaign Launch Party	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/11/2024		Payee name La Comida Mexican			
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures		Payee address; 1101 North Beckley AveDallas, TX 75203 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Gifts		Description Gifts for Community volunteer	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/11/2024		Payee name Amazon			
Amount (\$) 159.90 Officeholder Funds for Officeholder Expenditures		Payee address; 325 9th Avenue North Seattle, WA 98109 City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Supplies		Description Office Supplies	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 58 of 62	<b>2</b> FILER NAME Chad West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/11/2024	<b>5</b> Payee name Mammogram Poster Girls	
<b>6</b> Amount (\$) 250.00 Officeholder Funds for Officeholder Expenditures	<b>7</b> Payee address; 408 West 8th Street Suite 103 Dallas, TX 75208 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Mammogram Sponsor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Taco y Vino	
Amount (\$) 61.93 Officeholder Funds for Officeholder Expenditures	Payee address; 213 West Eighth Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meeting	Description Lunch with neighborhood leader
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/11/2024	Payee name Chad West	
Amount (\$) 223.22 Officeholder Funds for Officeholder Expenditures	Payee address; 810 North Bishop AvenueDallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Reimbursement for mileage Oct - Dec	Description Travel in District
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/11/2024		<b>5</b> Payee name Victoria Perez			
<b>6</b> Amount (\$) 37.45 Officeholder Funds for Officeholder Expenditures		<b>7</b> Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Reimbursement		<b>(b)</b> Description Meals		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/12/2024		Payee name Dallas Morning News			
Amount (\$) 84.42 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1954 Commerce Street Dallas, TX 75203			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Subscription		Description Subscription		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/13/2024		Payee name The Kessler School PTO			
Amount (\$) 500.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 1822 W 10th Street Dallas, TX 75208			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation		Description Event Sponsorship		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 60 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/13/2024	5 Payee name Bishop Street Market	
6 Amount (\$) 43.30 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 419 N Bishop Avenue Dallas, TX 75208	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gift for senior neighbor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Enos Pizza	
Amount (\$) 100.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 407 North Bishop AvenueDallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gift card for office staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Las Palmas	
Amount (\$) 118.22 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2708 Routh Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Meals	Description Dinner with former CM Mark Clayton
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 61 of 62	2 FILER NAME Chad West	3 Filer ID (Ethics Commission Filers)
4 Date 12/16/2024	5 Payee name Hunkys Old Fashioned	
6 Amount (\$) 150.00 Officeholder Funds for Officeholder Expenditures	7 Payee address; City; State; Zip Code 3930 Cedar Springs RoadDallas, TX 75219	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Gifts	(b) Description Gifts for Supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Dallas Youth Sports	
Amount (\$) 1000.00 Officeholder Funds for Officeholder Expenditures	Payee address; City; State; Zip Code 2524 West Ledbetter DriveDallas, TX 75233	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Holiday Level Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/23/2024	Payee name Victoria Perez	
Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 810 Rutherford Road Dallas, TX 76065	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Contract Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 62 of 62		<b>2</b> FILER NAME Chad West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/23/2024		<b>5</b> Payee name Benny Guzman			
<b>6</b> Amount (\$) 200.00 Campaign Funds for Campaign Expenditures		<b>7</b> Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor		<b>(b)</b> Description Contract Labor	
		<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 12/24/2024		Payee name The 23rd Senatorial District Tejano			
Amount (\$) 50.00 Officeholder Funds for Officeholder Expenditures		Payee address; City; State; Zip Code 10432 High Hollow Drive Suite 141 Dallas, TX 75230			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Member Dues		Description Member Dues	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					