

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

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

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

23

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	Tennell					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	NICKNAME	LAST	SUFFIX	Date Received		
	Atkins					
5 CANDIDATE/ OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE	
	2717 Meadow stone lane		Dallas TX 75237			
6 CAMPAIGN TREASURER NAME	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
	(469)	417 8939				
7 CAMPAIGN TREASURER ADDRESS	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$	
	Mrs Velma			Date Processed		
8 CAMPAIGN TREASURER PHONE	NICKNAME	LAST	SUFFIX	Date Imaged		
	Milliner					
9 REPORT TYPE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE					
	1407 Laura Lane Dallas TX 75241					
10 PERIOD COVERED	(Residence or Business)					
11 ELECTION	AREA CODE	PHONE NUMBER	EXTENSION			
	(214)	371 7482				
12 OFFICE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
13 OFFICE SOUGHT (if known)	Month	Day	Year	Month	Day	Year
	03	26	2019	04	24	2019
14 ELECTION DATE	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
15 OFFICE HELD (if any)	05	04	2019	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME

Tennell Atkins

15 Filer ID (Ethics Commission Filers)

**16 NOTICE FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

**17 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. **TOTAL POLITICAL CONTRIBUTIONS**
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 17095.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$ 0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$ 17186.67

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 27164.18

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 30181.00

18 AFFIDAVIT

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tennell Atkins, this the 26th
day of April, 2019, 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

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Tennell Atkins

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,095.00
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	\$ 17,186.67
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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 5

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
03/28/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Dallas Firefighters Association Public Safety Committee

6 Contributor address; City; State; Zip Code
10956 Audelia Rd Dallas, TX 75243-8204

7 Amount of contribution (\$)
1500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/26/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Linebarger Goggan Blair & Sampson

Contributor address; City; State; Zip Code
P.O. Box 17428 Austin, TX 78760

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/26/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Timothy Pannell

Contributor address; City; State; Zip Code
4361 Cedar Lake Drive Dallas, TX 75227

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

The Real Estate Council Political Action Committee

Contributor address; City; State; Zip Code
3100 McKinnon St Suite 1150 Dallas, TX 75201

Amount of contribution (\$)
2500.00

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 5

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
03/27/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
dallas police officer pac

6 Contributor address; City; State; Zip Code
1412 griffin st Dallas, TX 75215

7 Amount of contribution (\$)
250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/26/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Lois D Young

Contributor address; City; State; Zip Code
1925 Southside Terrace Dallas, TX 75232

Amount of contribution (\$)
20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Barbara D Abbott

Contributor address; City; State; Zip Code
2709 Meadow Gate Dallas, TX 75237

Amount of contribution (\$)
75.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
03/28/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Maria A Bonilla

Contributor address; City; State; Zip Code
5006 Canyon Blanco Dr Houston, TX 77045

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 5**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

04/02/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Donald W Phillips

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4503 Equestrian Way

Flower Mound, TX 75028

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

04/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

JUDY H PHILLIPS

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4503 EQUESTRIAN WAY

FLOWER MOUND, TX 75028

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/03/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lance T White

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

147 Garth Lane

Hickory Creek, TX 75065

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/03/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carmen White

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

147 Garth Lane

Hickory Creek, TX 75065

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 5

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
04/03/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Colton Bryers

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

147 Garth Lane

Hickory Creek, TX 75065

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

04/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan T Phillips

Amount of contribution (\$)

750.00

Contributor address;

City; State; Zip Code

10543 Inwood Road

Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Volney

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

7047 Westlake Ave

Dallas, TX 75214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Samantha Burris

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

7104 Wright Ct

Denton, TX 76210

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 5

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
04/02/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chase Burris

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

7104 Wright Ct

Denton, TX 76210

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03/26/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Williams

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1005 Lake Ridge Circle

Colleyville, TX 76033

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/19/2019		5 Payee name Brenda Scott			
6 Amount (\$) 115.00		7 Payee address; City; State; Zip Code 2600 Bolton Boone Dr Suite 500, TX 75115			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/19/2019		Payee name Lakisha Grandy			
Amount (\$) 135.00		Payee address; City; State; Zip Code 1414 Bellevue St Suite 101, Dallas, TX 75215			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/19/2019		Payee name Lucy Cain			
Amount (\$) 35.00		Payee address; City; State; Zip Code 4308 Spring Ave Dallas, TX 75210			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2019	5 Payee name Gail Turner	
6 Amount (\$) 130.00	7 Payee address; City; State; Zip Code 524 Sumac Pl Suite 524, Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/17/2019	Payee name Judy Williams	
Amount (\$) 130.00	Payee address; City; State; Zip Code 4311 Lou Ave Duncanville, TX 75137	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/03/2019	Payee name Gail Terrell	
Amount (\$) 740.00	Payee address; City; State; Zip Code 1445 Firebird Dr Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense wages
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 3 of 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2019	5 Payee name Gail Terrell	
6 Amount (\$) 650.00	7 Payee address; City; State; Zip Code 1445 Firebird Dr Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/10/2019	Payee name Gail Terrell	
Amount (\$) 600.00	Payee address; City; State; Zip Code 1445 Firebird Dr Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/14/2019	Payee name Gail Terrell	
Amount (\$) 600.00	Payee address; City; State; Zip Code 524 Sumac Pl Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 4 of 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2019	5 Payee name Ruth Dade	
6 Amount (\$) 273.00	7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 03/31/2019	Payee name Ruth Dade	
Amount (\$) 168.00	Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/19/2019	Payee name Robernetta Jones	
Amount (\$) 97.50	Payee address; City; State; Zip Code 4210 Elsie Faye Heggins Dallas, TX 75210	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 5 of 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2019	5 Payee name Cheryne Washington	
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 2310 N Henderson Ave Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held: Council District 8		
Date 04/19/2019	Payee name Eula Grant	
Amount (\$) 130.00	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held: Council District 8		
Date 04/12/2019	Payee name Saltgrass Steak House	
Amount (\$) 37.50	Payee address; City; State; Zip Code 747 N Hwy 67 Cedar Hill, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name: Tennell Atkins Office sought: Council District 8 Office held: Council District 8		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 6 of 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/15/2019		5 Payee name Colters Bar B Que			
6 Amount (\$) 23.22		7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rd, Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/16/2019		Payee name Sams Club			
Amount (\$) 84.31		Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/18/2019		Payee name Dallas Tortillas			
Amount (\$) 39.31		Payee address; City; State; Zip Code 309 N Marsalis Dallas, TX 75203			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 03/26/2019		5 Payee name La Calle Doce Oar Cli			
6 Amount (\$) 15.70		7 Payee address; City; State; Zip Code 415 W 12th St Dallas, TX 75208			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 03/26/2019		Payee name Rice Garden			
Amount (\$) 20.50		Payee address; City; State; Zip Code 4016 W Camp Wisdom Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/02/2019		Payee name Joe Pool Mail Station			
Amount (\$) 106.00		Payee address; City; State; Zip Code 5521 S Hampton Road Dallas, TX 75232			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2019	5 Payee name The Order Desk Inc	
6 Amount (\$) 2862.60	7 Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/10/2019	Payee name The Order Desk Inc	
Amount (\$) 2862.60	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 04/16/2019	Payee name The Order Desk Inc	
Amount (\$) 2862.60	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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
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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 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/13/2019	5 Payee name Wireless Stop	
6 Amount (\$) 206.00	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held Council District 8
Date 04/22/2019	Payee name Shell Gas	
Amount (\$) 675.00	Payee address; City; State; Zip Code P.O. Box 6811 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held Council District 8
Date 04/11/2019	Payee name ATT	
Amount (\$) 722.00	Payee address; City; State; Zip Code P.O. Box 5014 Carol Stream, IL 60197	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8 Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/18/2019		5 Payee name JAPP Marketing			
6 Amount (\$) 2000.00		7 Payee address; City; State; Zip Code P.O. Box 764351 Dallas, IL 75376			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 03/30/2019		Payee name The Home Depot			
Amount (\$) 109.83		Payee address; City; State; Zip Code 2901 W Wheatland Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/20/2019		Payee name Office Depot			
Amount (\$) 10.81		Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 39759 Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description	
				<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 03/26/2019		5 Payee name Shell Gas			
6 Amount (\$) 25.00		7 Payee address; City; State; Zip Code 7027 S R L Thornton Fwy Dallas, TX 75232			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 03/27/2019		Payee name Edible Arrangements			
Amount (\$) 104.97		Payee address; City; State; Zip Code 407 N Lamar St Suite 180 Dallas, TX 75202			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gift	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 03/26/2019		Payee name Popeyes			
Amount (\$) 16.23		Payee address; City; State; Zip Code 2972 W Wheatland Dallas, TX 75232			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 03/27/2019		5 Payee name Colters BBQ			
6 Amount (\$) 23.71		7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
				Office held Council District 8	
Date 03/27/2019		Payee name Lubys			
Amount (\$) 31.13		Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75232			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
				Office held Council District 8	
Date 03/30/2019		Payee name Lisa Soul Food			
Amount (\$) 33.28		Payee address; City; State; Zip Code 2550 W Redbird Lane Dallas, TX 75237			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	
				Office held Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/05/2019		5 Payee name Lisa Soul Food			
6 Amount (\$) 51.15		7 Payee address; City; State; Zip Code 2550 W Redbird Lane Suite 1250, Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 03/31/2019		Payee name Chubbys			
Amount (\$) 23.93		Payee address; City; State; Zip Code 7474 S Cockrell Hill Rd Suite 47X, Dallas, TX 75236			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/07/2019		Payee name Boston Market			
Amount (\$) 25.79		Payee address; City; State; Zip Code 735 E Pleasant Run Rd Desoto, TX 75115			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
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Consulting Expense
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Candidate/Officeholder/Political Committee
Credit Card Payment

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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 15		2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 04/06/2019		5 Payee name Ojeda Family Restuarant			
6 Amount (\$) 12.50		7 Payee address; City; State; Zip Code 2109 N Hampton Rd Desoto, TX 75115			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/10/2019		Payee name Connie Buford			
Amount (\$) 30.00		Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75241			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8
Date 04/10/2019		Payee name Detra Reeves			
Amount (\$) 115.00		Payee address; City; State; Zip Code 10005 S Muskogee Dr Dallas, TX 75217			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Tennell Atkins		Office sought Council District 8	Office held Council District 8

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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Food/Beverage Expense
Gift/Awards/Memorials Expense
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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 15	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2019	5 Payee name Detra Reeves	
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date 03/31/2019	Payee name Detra Reeves	
Amount (\$) 97.50	Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 worker	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	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 worker	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Tennell Atkins Office sought Council District 8 Office held Council District 8 </div>		

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