Signature of officer administering oath

#### Supplemental Report Officeholder FORM SR Cover Sheet SR MS / MRS / MR FIRST MI 1. CANDIDATE / 2. Total Pages Filed: **OFFICEHOLDER** Gay 43 NAME NICKNAME LAST SUFFIX 3. Office Held Willis Dallas City Council District 13 4. SUPPLEMENTAL c January 15 c 30th day before election c Runoff c 15th day after campaign REPORT TYPE treasurer appointment (officeholder only) c July 15 🗶 8th day before election c Exceeded \$500 c Final Report limit 5. PERIOD / COVERED 3/28/2023 THROUGH 4/26/2023 6. ELECTION Month Day Year 5/6/2023 X N/A c Runoff c Primary c Special c General 7. OFFICE-CONTRIBUTION 1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN \$0.00 **HOLDER** PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED TOTALS 2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$0.00 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **EXPENDITURE** \$0.00 **TOTALS** \$0.00 4. TOTAL OFFICEHOLDER EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES 8. POLITICAL CONTRIBUTION \$0.00 TOTALS LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (Campaign) 6. TOTAL POLITICAL CONTRIBUTIONS \$47,320.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED **EXPENDITURE** TOTALS \$34,214.15 8. TOTAL POLITICAL EXPENDITURES 9. OFFICEHOLDER FUNDS USED 9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR \$0.00 CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD FOR CAMPAIGN PURPOSES 10. 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\*\*\* AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder Gay Willis 28th Sworn to and subscribed before me, by the said \_ , this the day \_, to certify which, witness my hand and seal of office. Title of officer administering oath

Printed name of officer administering oath

#### SCHEDULE A1

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| The                            | Instruction Guide explains how to c                   | omplete this     | form.                       | 1 Total pages Schedule A1:<br>1 of 29 |
|--------------------------------|---|------------------|-----------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |   |                  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor                            | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/23/2023                     | Nicole Small  |                  |                             | 250.00                                |
| Campaign<br>Contribution       | 6 Contributor address;<br>10210 GAYWOOD RD            | City;<br>Dallas, | State; Zip Code<br>TX 75229 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)                 |                  | 9 Employer (See Instruct    | ions)                                 |
| Date                           | Full name of contributor                              | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/24/2023                     | Buddy Apple   |                  |                             | 250.00                                |
| Campaign<br>Contribution       | Contributor address;<br>821 N. Windomere Ave          | City;            | State; Zip Code<br>TX 75208 |                                       |
| Principal occup                | pation / Job title (See Instructions)                 |                  | Employer (See Instructi     | ions)                                 |
| Date                           | Full name of contributor                              | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/22/2023                     | Mary & Steve Nix                                      |                  |                             | 750.00                                |
| Campaign<br>Contribution       | Contributor address;<br>8511 Blue Bonnet Rd           | City;<br>Dallas, | State; Zip Code<br>TX 75209 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                 |                  | Employer (See Instruct      | ions)                                 |
| Date 04/21/2023                | Full name of contributor  Frank Mihalopoulos          | out-of-state PAC | (ID#:)                      | Amount of contribution (\$) 500.00    |
| Campaign<br>Contribution       | Contributor address;<br>4645 North Central Expressway | City; Dallas,    | State: Zip Code<br>TX 75205 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                 |                  | Employer (See Instruct      | ions)                                 |
|                                |   |                  |                             |                                       |

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#### SCHEDULE A1

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| 2 FILER NAME Gay Wills  4 Date 5 Full name of contributor Contribution 6 Contributor address: 3233 Altman Dr Contribution  5 Principal occupation / Job title (See Instructions)  Date Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contributor Contrib   |   |   | 2 of 29  |
|--|---|---|--|
| O4/20/2023  Gregory Hurt  Campaign Contribution  8 Principal occupation / Job title (See Instructions)  Date O4/20/2023 Doric Cranshaw  Doric Cranshaw  Campaign Contributor address; City; Dallas, TX 75376  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of contribution (\$)  Amount of contribution (\$)  Date O4/20/2023 Doric Cranshaw  Campaign Contributor address; A722 Stanford Avenue  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (\$)  Date O4/20/2023  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Campaign Contribution  Cantibutor address: City; Dallas, TX 75209  Amount of contribution (\$)  10.00   |   |   | 3 Filer ID (Ethics Commission Filers)  |
| Campaign Contribution  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  Date Pull name of contributor O4/20/2023 Demetris Sampson Contribution Principal occupation / Job title (See Instructions)  Date Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (S) 500.00  Campaign Contributor address; P.O. Box 763834  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date O4/20/2023 Dorie Cranshaw Contributor address; City; State: Zip Code O4/20/2023 Dorie Cranshaw Contributor address; City; Dallas, TX 75209  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (S) 100.00  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of contribution (S) 10.00  Campaign Contribution Gout-of-state PAC (ID#:   | 5 Full name of contributor ☐ out-of-state                 | e PAC (ID#:)  | 7 Amount of contribution (\$)  |
| Date   Full name of contributor   Out-of-state PAC (ID#:   | Gregory Hurt  |   | 50.00  |
| Date   Full name of contributor   out-of-state PAC (ID#:   |   |   |  |
| O4/20/2023 Demetris Sampson 500.00  Campaign Contributor address; P.O. Box 763834 Dallas, TX 75376  Principal occupation / Job title (See Instructions)  Date O4/20/2023 Dorie Cranshaw Contributor O4/20 Stanford Avenue City; State: Zip Code Dallas, TX 75209  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of contribution (\$) 100.00  Campaign Contributor address; A722 Stanford Avenue Dallas, TX 75209  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Campaign Contributor Out-of-state PAC (ID#: Amount of contribution (\$) 10.00  Campaign Contributor Date O4/20/2023 Bo Minic O4/20/2023 Bo Minic Dallas, TX 75231 Dall | pation / Job title (See Instructions)                     | 9 Employer (See Instruc   | l<br>tions)  |
| Campaign Contribution  Contribution  Contribution  Contribution  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date Pull name of contributor Od/20/2023  Dorie Cranshaw  Contributor address; Od/20 Campaign Contributor Principal occupation / Job title (See Instructions)  Employer (See Instructions)  City: Dallas, TX 75209  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  City: Dallas, TX 75209  Amount of contribution (\$)  Od/20/2023  Bo Minic  Contributor Contribut  | Full name of contributor                                  | ⇒ PAC (ID#:)  | Amount of contribution (\$)  |
| Campaign Contribution  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (\$) 100.00  Campaign Contribution  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of contribution (\$) 100.00  Campaign Contribution  Contribution ddress; 4722 Stanford Avenue  City; Dallas, TX 75209  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Campaign Contribution / Job title (See Instructions)  Employer (See Instructions)  Campaign Contributor ddress; City; Dallas, TX 75231  City; Dallas, TX 75231   |   |   | 500.00   |
| Date   Full name of contributor   out-of-state PAC (ID#:   | Contributor address; City;                                | State; Zip Code   |  |
| Date O4/20/2023  Date O4/20/2023  Date O4/20/2023  Date O4/20/2023  Campaign Contributor Avenue  Date O4/20/2023  Bo Minic  Contributor Avenue  City; State; Zip Code Dallas, TX 75209  Employer (See Instructions)  Amount of contribution (\$) 10.00  Campaign Contributor Address; City; State: Zip Code Dallas, TX 75231  Contribution  City; State: Zip Code Dallas, TX 75231   | eation / Job title (See Instructions)                     | Employer (See Instruc   | tions)   |
| Campaign Contribution  Contributor address; A722 Stanford Avenue  City; Dallas, TX 75209  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date 04/20/2023  Bo Minic  Contributor Dallas, TX 75231  Amount of contribution (\$)  Campaign Contributor address; City; Dallas, TX 75231   |   | ⇒ PAC (ID#:)  |  |
| Contribution 4722 Stanford Avenue Dallas, TX 75209  Principal occupation / Job title (See Instructions) Employer (See Instructions)  Date O4/20/2023 Bo Minic Out-of-state PAC (ID#:   | Dorie Cranshaw  |   | 100.00   |
| Date 04/20/2023 Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Campaign Contributor address; City; State: Zip Code Contribution 6152 Summer Creek Circle Dallas, TX 75231  | Contributor address; City; 4722 Stanford Avenue Da        | State; Zip Code<br>Illas, TX 75209  |  |
| 04/20/2023 Bo Minic 10.00  Campaign Contribution Contribution City; State: Zip Code City; Dallas, TX 75231   | pation / Job title (See Instructions)                     | Employer (See Instruc   | tions)   |
| Contribution 6152 Summer Creek Circle Dallas, TX 75231   | Uti-oi-state  | e PAC (ID#:)  |  |
| Principal occupation / Job title (See Instructions)  Employer (See Instructions)   | Contributor address; City;<br>6152 Summer Creek Circle Da | State: Zip Code<br>Illas, TX 75231  |  |
|  | pation / Job title (See Instructions)                     | Employer (See Instruc   | tions)   |
|  |   | Gregory Hurt  6 Contributor address; 3233 Altman Dr Da  pation / Job title (See Instructions)  Full name of contributor | Gregory Hurt  6 Contributor address; 3233 Altman Dr  Full name of contributor Demetris Sampson  Contributor address; P.O. Box 763834  Pation / Job title (See Instructions)  Full name of contributor Demetris Sampson  Contributor address; City; State; Zip Code Dallas, TX 75376  Pation / Job title (See Instructions)  Full name of contributor Dorie Cranshaw  Contributor address; City; State; Zip Code Dallas, TX 75376  City; State; Zip Code Dallas, TX 75376  Employer (See Instructions)  Full name of contributor Dorie Cranshaw  Contributor address; City; State; Zip Code Dallas, TX 75209  Pation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Full name of contributor Dout-of-state PAC (ID#: |

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### SCHEDULE A1

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|--------------------------------|--|-------------------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |  |                                     | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor out-of-si                     | tate PAC (ID#:)                     | 7 Amount of contribution (\$)         |
| 04/19/2023                     | Carolyn Ennis  |                                     | 50.00                                 |
| Campaign<br>Contribution       | 6 Contributor address; City; 3746 Weeburn Drive I        | State; Zip Code<br>Dallas, TX 75229 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)                    | 9 Employer (See Instruc             | ctions)                               |
| Date                           | Full name of contributor                                 | tate PAC (ID#:)                     | Amount of contribution (\$)           |
| 04/19/2023                     | Heidi & Jon Dahlander                                    |                                     | 200.00                                |
| Campaign<br>Contribution       | Contributor address; City;                               | State; Zip Code<br>Dallas, TX 75229 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                    | Employer (See Instruc               | ctions)                               |
| Date                           | Full name of contributor                                 | tate PAC (ID#:)                     | Amount of contribution (\$)           |
| 04/18/2023                     | Chris Wallace  |                                     | 250.00                                |
| Campaign<br>Contribution       | Contributor address; City;<br>4235 Castle Rock Court I   | State; Zip Code<br>RVING, TX 75038  |                                       |
| Principal occu                 | oation / Job title (See Instructions)                    | Employer (See Instruc               | l<br>etions)                          |
| Date 04/18/2023                | Full name of contributor                                 | tate PAC (ID#:)                     | Amount of contribution (\$) 100.00    |
| Campaign<br>Contribution       | Contributor address; City;<br>4241 Cochran Chapel Road I | State: Zip Code<br>Dallas, TX 75209 |                                       |
| Principal occu                 | Dation / Job title (See Instructions)                    | Employer (See Instruc               | etions)                               |
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|-----------------------------------|--|-----------------------------|---------------------------------------|
| <b>2</b> FILER NAME<br>Gay Willis |  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                            | 5 Full name of contributor out-of-state PAC (I                     | D#:)                        | 7 Amount of contribution (\$)         |
| 04/18/2023                        | Lucy Billingsley   |                             | 1000.00                               |
| Campaign<br>Contribution          | 6 Contributor address; City; 1722 Routh Street Suite 770 Dallas, T | State; Zip Code<br>"X 75201 |                                       |
| 8 Principal occu                  | pation / Job title (See Instructions)                              | Employer (See Instructi     | ons)                                  |
| Date                              | Full name of contributor   | D#:)                        | Amount of contribution (\$)           |
| 04/18/2023                        | Holly Hope   |                             | 100.00                                |
| Campaign<br>Contribution          | Contributor address; City; 3847 Princess Ln Dallas, T              | State; Zip Code             |                                       |
| Principal occu                    | pation / Job title (See Instructions)                              | Employer (See Instructi     | ons)                                  |
| Date                              | Full name of contributor   | D#:)                        | Amount of contribution (\$)           |
| 04/18/2023                        | Nancy Best   |                             | 500.00                                |
| Campaign<br>Contribution          | Contributor address; City; 9762 Audubon Place Dallas, T            | State; Zip Code<br>X 75220  |                                       |
| Principal occu                    | pation / Job title (See Instructions)                              | Employer (See Instructi     | ons)                                  |
| Date 04/17/2023                   | Full name of contributor   | D#:)                        | Amount of contribution (\$) 25.00     |
| Campaign<br>Contribution          | Contributor address; City; 7853 Marquette Street Dallas, T         | State: Zip Code<br>X 75225  |                                       |
| Principal occu                    | pation / Job title (See Instructions)                              | Employer (See Instructi     | ons)                                  |
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|--------------------------------|---|------------------|-----------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |   |                  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor                        | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/17/2023                     | Niles Illich                                      |                  |                             | 250.00                                |
| Campaign<br>Contribution       | 6 Contributor address;<br>12535 High Meadow Drive | City;<br>Dallas, | State; Zip Code<br>TX 75244 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)             |                  | 9 Employer (See Instruct    | ions)                                 |
| Date                           | Full name of contributor                          | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/16/2023                     | Jeffrey Robinson                                  |                  |                             | 1000.00                               |
| Campaign<br>Contribution       | Contributor address;<br>5323 FALLS RD             | City;            | State; Zip Code<br>TX 75220 |                                       |
| Principal occu                 | pation / Job title (See Instructions)             |                  | Employer (See Instructi     | ions)                                 |
| Date                           | Full name of contributor                          | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/15/2023                     | Garrett Vogel                                     |                  |                             | 1000.00                               |
| Campaign<br>Contribution       | Contributor address;<br>5955 Alpha Road           | City; Dallas,    | State; Zip Code<br>TX 75240 |                                       |
| Principal occu                 | pation / Job title (See Instructions)             |                  | Employer (See Instruct      | ions)                                 |
| Date 04/14/2023                | Full name of contributor Jill Tananbaum           | out-of-state PAC | (ID#:)                      | Amount of contribution (\$) 250.00    |
| Campaign<br>Contribution       | Contributor address;<br>4324 Livingston Ave       | City; Dallas,    | State: Zip Code<br>TX 75205 |                                       |
| Principal occu                 | Dation / Job title (See Instructions)             |                  | Employer (See Instruct      | ions)                                 |
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|--------------------------------|--|---------------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |  |                                 | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor out-of-state P            | PAC (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/14/2023                     | Stonewall Democrats of Dallas                        |                                 | 500.00                                |
| Campaign<br>Contribution       | 6 Contributor address; City;                         | State; Zip Code<br>as, TX 75219 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)                | 9 Employer (See Instruc         | tions)                                |
| Date                           | Full name of contributor                             | PAC (ID#:)                      | Amount of contribution (\$)           |
| 04/14/2023                     | Jill Magnuson  |                                 | 100.00                                |
| Campaign<br>Contribution       | Contributor address; City; 4318 Beechwood Lane Dalla | State; Zip Code as, TX 75220    |                                       |
| Principal occup                | pation / Job title (See Instructions)                | Employer (See Instruct          | tions)                                |
| Date                           | Full name of contributor                             | PAC (ID#:)                      | Amount of contribution (\$)           |
| 04/12/2023                     | Michael Arnold                                       |                                 | 1000.00                               |
| Campaign<br>Contribution       | Contributor address: Citv:                           | State; Zip Code<br>as, TX 75220 |                                       |
| Principal occu                 | oation / Job title (See Instructions)                | Employer (See Instruc           | tions)                                |
| Date 04/11/2023                | Full name of contributor                             | PAC (ID#:)                      | Amount of contribution (\$) 100.00    |
| Campaign<br>Contribution       | Contributor address; City;<br>3226 Oliver St Dalla   | State: Zip Code<br>as, TX 75205 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                | Employer (See Instruc           | tions)                                |
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| The                        | Instruction Guide explains how to             | complete this    | form.                       | 1 Total pages Schedule A1:<br>7 of 29 |
|----------------------------|---|------------------|-----------------------------|---------------------------------------|
| 2 FILER NAME<br>Gay Willis |   |                  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                     | 5 Full name of contributor                    | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/11/2023                 | Joe Atkins                                    |                  |                             | 100.00                                |
| Campaign<br>Contribution   | 6 Contributor address;<br>6416 Kenwood Avenue | City;<br>Dallas, | State; Zip Code<br>TX 75214 |                                       |
| 8 Principal occu           | pation / Job title (See Instructions)         |                  | 9 Employer (See Instruct    | ions)                                 |
| Date                       | Full name of contributor                      | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/11/2023                 | Alan Engstrom                                 |                  |                             | 1000.00                               |
| Campaign<br>Contribution   | Contributor address;<br>5744 DeLoache Ave     | City;            | State; Zip Code<br>TX 75225 |                                       |
| Principal occu             | pation / Job title (See Instructions)         |                  | Employer (See Instruct      | ions)                                 |
| Date                       | Full name of contributor                      | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/10/2023                 | Suellen & Ken Murchison                       |                  |                             | 250.00                                |
| Campaign<br>Contribution   | Contributor address;<br>6346 Northwood Rd.    | City;            | State; Zip Code<br>TX 75225 |                                       |
| Principal occu             | pation / Job title (See Instructions)         |                  | Employer (See Instruct      | ions)                                 |
| Date 04/10/2023            | Full name of contributor peter malouf         | out-of-state PAC | (ID#:)                      | Amount of contribution (\$) 250.00    |
| Campaign<br>Contribution   | Contributor address;<br>P.O. Box 12745        | City; Dallas,    | State: Zip Code<br>TX 75201 |                                       |
| Principal occu             | l<br>pation / Job title (See Instructions)    |                  | Employer (See Instruct      | ions)                                 |
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|--------------------------------|---|----------------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |   |                                  | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor out-of-state                           | PAC (ID#:)                       | 7 Amount of contribution (\$)         |
| 04/10/2023                     | Gerald Stool  |                                  | 1000.00                               |
| Campaign<br>Contribution       | 6 Contributor address; City; 2808 Fairmount Street Suite 100 Dall | State; Zip Code<br>las, TX 75201 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)                             | 9 Employer (See Instruc          | tions)                                |
| Date                           | Full name of contributor  | PAC (ID#:)                       | Amount of contribution (\$)           |
| 04/10/2023                     | Duncan Fulton   |                                  | 250.00                                |
| Campaign<br>Contribution       | Contributor address; City;  | State; Zip Code<br>las, TX 75205 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                             | Employer (See Instruc            | tions)                                |
| Date                           | Full name of contributor  | PAC (ID#:)                       | Amount of contribution (\$)           |
| 04/09/2023                     | Randy Engstrom  |                                  | 1000.00                               |
| Campaign<br>Contribution       | Contributor address; City; 5744 DELOACHE AVE Dali                 | State; Zip Code<br>las, TX 75229 |                                       |
| Principal occu                 | pation / Job title (See Instructions)                             | Employer (See Instruc            | tions)                                |
| Date 04/09/2023                | Full name of contributor out-of-state Robert Swartz               | PAC (ID#:)                       | Amount of contribution (\$) 250.00    |
| Campaign<br>Contribution       | Contributor address; City; 10856 Strait Lane Circle Dall          | Ias, TX 75225                    |                                       |
| Principal occu                 | pation / Job title (See Instructions)                             | Employer (See Instruc            | tions)                                |
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|--------------------------------|--|------------------|-----------------------------|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |  |                  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor                     | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/08/2023                     | Hannah Strom                                   |                  |                             | 100.00                                |
| Campaign<br>Contribution       | 6 Contributor address;<br>3926 Duchess Cir     | City;<br>Dallas, | State; Zip Code<br>TX 75229 |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)          |                  | 9 Employer (See Instruct    | ions)                                 |
| Date                           | Full name of contributor                       | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/08/2023                     | Harianne Wallenstein                           |                  |                             | 200.00                                |
| Campaign<br>Contribution       | Contributor address;<br>10122 Gaywood Road     | City;            | State; Zip Code<br>TX 75229 |                                       |
| Principal occu                 | pation / Job title (See Instructions)          |                  | Employer (See Instruct      | ions)                                 |
| Date                           | Full name of contributor                       | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)           |
| 04/08/2023                     | Mark Blaskovich                                |                  |                             | 50.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>5339 W University Blvd | City;<br>Dallas, | State; Zip Code<br>TX 75209 |                                       |
| Principal occu                 | pation / Job title (See Instructions)          |                  | Employer (See Instruct      | ions)                                 |
| Date 04/08/2023                | Full name of contributor<br>Robert Book        | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$) 250.00    |
| Campaign<br>Contribution       | Contributor address;<br>7191 Kendallwood Drive | City; Dallas,    | State: Zip Code<br>TX 75240 |                                       |
| Principal occu                 | pation / Job title (See Instructions)          |                  | Employer (See Instruct      | ions)                                 |
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|--------------------------------|--|--|---------------------------------------|
| <b>2</b> FILER NAME Gay Willis |  |  | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                         | 5 Full name of contributor out                   | -of-state PAC (ID#:)                     | 7 Amount of contribution (\$)         |
| 04/07/2023                     | Chris Luna                                       |  | 250.00                                |
| Campaign<br>Contribution       | 6 Contributor address; Ci<br>P.O. Box 1523       | ty; State; Zip Code<br>Dallas, TX 75201  |                                       |
| 8 Principal occu               | pation / Job title (See Instructions)            | 9 Employer (See Instruc                  | tions)                                |
| Date                           | Full name of contributor                         | -of-state PAC (ID#:)                     | Amount of contribution (\$)           |
| 04/06/2023                     | Catherine MacMahon                               |  | 1000.00                               |
| Campaign<br>Contribution       |  | ity; State; Zip Code<br>Dallas, TX 75209 |                                       |
| Principal occup                | ation / Job title (See Instructions)             | Employer (See Instruc                    | tions)                                |
| Date                           | Full name of contributor out                     | -of-state PAC (ID#:)                     | Amount of contribution (\$)           |
| 04/06/2023                     | Douglas MacMahon                                 |  | 1000.00                               |
| Campaign<br>Contribution       | Contributor address; Ci<br>4605 Watauga Road     | ty; State; Zip Code<br>Dallas, TX 75229  |                                       |
| Principal occu                 | eation / Job title (See Instructions)            | Employer (See Instruc                    | tions)                                |
| Date 04/06/2023                | Full name of contributor □ out Juli Black        | -of-state PAC (ID#:)                     | Amount of contribution (\$) 125.00    |
| Campaign<br>Contribution       | Contributor address; Cit<br>6704 Deloache Avenue | Dallas, TX 75225                         |                                       |
| Principal occu                 | ation / Job title (See Instructions)             | Employer (See Instruc                    | tions)                                |
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| <b>2</b> FILER NAME Gay Willis |  |                  |                             | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor                         | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)          |
| 04/05/2023                     | Reagan Cartwright, Jr.                             |                  |                             | 50.00                                  |
| Campaign<br>Contribution       | 6 Contributor address;<br>6361 Diamond Head Circle | City;<br>Dallas, | State; Zip Code<br>TX 75225 |  |
| 8 Principal occu               | pation / Job title (See Instructions)              |                  | 9 Employer (See Instruct    | ions)                                  |
| Date                           | Full name of contributor                           | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)            |
| 04/05/2023                     | Diana Dutton                                       |                  |                             | 250.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>4649 College Park Drive    | City;            | State; Zip Code<br>TX 75229 |  |
| Principal occup                | ation / Job title (See Instructions)               |                  | Employer (See Instruct      | ions)                                  |
| Date                           | Full name of contributor                           | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)            |
| 04/05/2023                     | Christy Bednar                                     |                  |                             | 50.00                                  |
| Campaign<br>Contribution       | Contributor address;<br>12242 Montego Plaza        | City;<br>Dallas, | State; Zip Code<br>TX 75230 |  |
| Principal occu                 | pation / Job title (See Instructions)              |                  | Employer (See Instruct      | ions)                                  |
| Date 04/04/2023                | Full name of contributor<br>Angela Medrano         | out-of-state PAC | (ID#:)                      | Amount of contribution (\$) 25.00      |
| Campaign<br>Contribution       | Contributor address;<br>2331 Douglas Avenue        | City; Dallas,    | State: Zip Code<br>TX 75219 |  |
| Principal occu                 | pation / Job title (See Instructions)              |                  | Employer (See Instruct      | ions)                                  |
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| <b>2</b> FILER NAME Gay Willis |   |  | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor out                  | t-of-state PAC (ID#:                     | 7 Amount of contribution (\$)          |
| 04/04/2023                     | Clay Young                                      |  | 100.00                                 |
| Campaign<br>Contribution       | 6 Contributor address; C<br>4905 Mill Run Rd    | ity; State; Zip Code<br>Dallas, TX 75244 |  |
| 8 Principal occu               | oation / Job title (See Instructions)           | 9 Employer (See Insti                    | ructions)                              |
| Date                           | Full name of contributor                        | i-of-state PAC (ID#:                     | Amount of contribution (\$)            |
| 04/04/2023                     | Jennifer Altabef                                |  | 1000.00                                |
| Campaign<br>Contribution       |   | ity; State; Zip Code<br>Dallas, TX 75229 |  |
| Principal occup                | ation / Job title (See Instructions)            | Employer (See Insti                      | ructions)                              |
| Date                           | Full name of contributor ou                     | t-of-state PAC (ID#:                     | _) Amount of contribution (\$)         |
| 04/04/2023                     | Julie Young                                     |  | 50.00                                  |
| Campaign<br>Contribution       | Contributor address; C<br>4905 Mill Run Rd      | ity; State; Zip Code<br>Dallas, TX 75244 |  |
| Principal occup                | nation / Job title (See Instructions)           | Employer (See Insti                      | ructions)                              |
| Date 04/03/2023                | Full name of contributor our our                | t-of-state PAC (ID#:                     | Amount of contribution (\$) 110.00     |
| Campaign<br>Contribution       | Contributor address; Ci<br>3455 Whitehall Drive | ty; Dallas, TX 75229 Zip Code            |  |
| Principal occup                | vation / Job title (See Instructions)           | Employer (See Inst                       | ructions)                              |
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|                          |  |                  |                               | 13 of 29                              |
| 2 FILER NAME Gay Willis  |  |                  |                               | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                   | 5 Full name of contributor                     | out-of-state PAC | C (ID#:)                      | 7 Amount of contribution (\$)         |
| 04/03/2023               | Charlene Wilson Howell                         |                  |                               | 250.00                                |
| Campaign<br>Contribution | 6 Contributor address;<br>5455 La Sierra Drive | City;<br>Dallas, | State; Zip Code<br>, TX 75231 |                                       |
| 8 Principal occu         | pation / Job title (See Instructions)          |                  | 9 Employer (See Instruc       | tions)                                |
| Date                     | Full name of contributor                       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$)           |
| 04/03/2023               | Kevin Moriarty                                 |                  |                               | 100.00                                |
| Campaign<br>Contribution | Contributor address;<br>400 North Ervay Street | City;            | State; Zip Code<br>,TX 75201  |                                       |
| Principal occup          | pation / Job title (See Instructions)          |                  | Employer (See Instruc         | tions)                                |
| Date                     | Full name of contributor                       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$)           |
| 04/03/2023               | Nancy Kenty                                    |                  |                               | 200.00                                |
| Campaign<br>Contribution | Contributor address;<br>8723 Canyon Dr         | City;<br>Dallas, | State; Zip Code<br>, TX 75206 |                                       |
| Principal occu           | oation / Job title (See Instructions)          |                  | Employer (See Instruc         | tions)                                |
| Date 03/30/2023          | Full name of contributor<br>Larry Offutt       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$) 200.00    |
| Campaign<br>Contribution | Contributor address;<br>6038 Bryan Pkwy        | City; Dallas,    | State: Zip Code<br>TX 75209   |                                       |
|                          |  |                  |                               |                                       |

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| <b>2</b> FILER NAME<br>Gay Willis |  |                  |                             | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                            | 5 Full name of contributor                   | out-of-state PAC | (ID#:)                      | 7 Amount of contribution (\$)          |
| 03/30/2023                        | Elizabeth Winslow                            |                  |                             | 250.00                                 |
| Campaign<br>Contribution          | 6 Contributor address;<br>10111 Gaywood      | City;<br>Dallas, | State; Zip Code<br>TX 75229 |  |
| 8 Principal occu                  | pation / Job title (See Instructions)        |                  | 9 Employer (See Instruct    | ions)                                  |
| Date                              | Full name of contributor                     | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)            |
| 03/29/2023                        | Marguerite Hoffman                           |                  |                             | 1000.00                                |
| Campaign<br>Contribution          | Contributor address;<br>9963 Rockbrook Dr    | City;            | State; Zip Code<br>TX 75220 |  |
| Principal occu                    | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | ions)                                  |
| Date                              | Full name of contributor                     | out-of-state PAC | (ID#:)                      | Amount of contribution (\$)            |
| 03/29/2023                        | Julie Saqueton                               |                  |                             | 100.00                                 |
| Campaign<br>Contribution          | Contributor address;<br>5830 Meaders Lane    | City;<br>Dallas, | State; Zip Code<br>TX 75230 |  |
| Principal occu                    | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | ions)                                  |
| Date 03/29/2023                   | Full name of contributor<br>Deedie Rose      | out-of-state PAC | (ID#:)                      | Amount of contribution (\$) 1000.00    |
| Campaign<br>Contribution          | Contributor address;<br>5 Willow Wood Circle | City; Dallas,    | State: Zip Code<br>TX 75205 |  |
| Principal occu                    | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | ions)                                  |
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| <b>2</b> FILER NAME Gay Willis |   |                                | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor ☐ out-of-state PA          | C (ID#:)                       | 7 Amount of contribution (\$)          |
| 03/28/2023                     | Joan Clark  |                                | 100.00                                 |
| Campaign<br>Contribution       | 6 Contributor address; City;                          | State; Zip Code<br>s, TX 75244 |  |
| 8 Principal occu               | pation / Job title (See Instructions)                 | 9 Employer (See Instruct       | ions)                                  |
| Date                           | Full name of contributor                              | .C (ID#:)                      | Amount of contribution (\$)            |
| 03/28/2023                     | Tom and Sally Perryman                                |                                | 50.00                                  |
| Campaign<br>Contribution       | Contributor address; City; 6138 Woodland Drive Dallas | State; Zip Code<br>s, TX 75225 |  |
| Principal occu                 | vation / Job title (See Instructions)                 | Employer (See Instruct         | ions)                                  |
| Date                           | Full name of contributor                              | .C (ID#:)                      | Amount of contribution (\$)            |
| 03/28/2023                     | Chad Hinkson  |                                | 100.00                                 |
| Campaign<br>Contribution       | Contributor address; City;<br>4031 Myerwood Ln Dallas | State; Zip Code<br>s, TX 75244 |  |
| Principal occu                 | pation / Job title (See Instructions)                 | Employer (See Instruct         | ions)                                  |
| Date 03/29/2023                | Full name of contributor                              |                                | Amount of contribution (\$) 2500.00    |
| Campaign<br>Contribution       | Contributor address; City;<br>P.O. Box 2246 Austin    | State: Zip Code<br>n, TX 78768 |  |
| Principal occu                 | pation / Job title (See Instructions)                 | Employer (See Instruct         | ions)                                  |
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| 2 FILER NAME<br>Gay Willis |   |  | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                     |   | t-of-state PAC (ID#:)                    | 7 Amount of contribution (\$)          |
| 04/03/2023                 | Diane & Stuart Bumpas                           |  | 100.00                                 |
| Campaign<br>Contribution   | 6 Contributor address; C 5306 Surrey Circle     | ity; State; Zip Code<br>Dallas, TX 75209 |  |
| 8 Principal occi           | pation / Job title (See Instructions)           | 9 Employer (See Instru                   | ictions)                               |
| Date                       | Full name of contributor                        | t-of-state PAC (ID#:)                    | Amount of contribution (\$)            |
| 04/04/2023                 | Margaret & Thomas Chambers                      |  | 500.00                                 |
| Campaign<br>Contribution   | Contributor address; C 4657 Mockingbird Lane    | ity; State; Zip Code<br>Dallas, TX 75209 |  |
| Principal occu             | pation / Job title (See Instructions)           | Employer (See Instru                     | ctions)                                |
| Date                       | Full name of contributor 🔲 ou                   | t-of-state PAC (ID#:)                    | Amount of contribution (\$)            |
| 04/06/2023                 | Bo Slaughter                                    |  | 250.00                                 |
| Campaign<br>Contribution   | Contributor address; C<br>2759 Meadow Dawn Lane | ity; State; Zip Code<br>Dallas, TX 75237 |  |
| Principal occu             | Dation / Job title (See Instructions)           | Employer (See Instru                     | ictions)                               |
| Date 04/08/2023            | Full name of contributor                        | t-of-state PAC (ID#:)                    | Amount of contribution (\$) 500.00     |
| Campaign<br>Contribution   | Contributor address: Ci<br>4803 Shadywood Lane  | ty; Dallas, TX 75209 Zip Code            |  |
| Principal occu             | oation / Job title (See Instructions)           | Employer (See Instru                     | ctions)                                |
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| O4/07/2023 Donal  Campaign Contribution 6 Contrib 3829  8 Principal occupation / Job  Date Full nat 04/08/2023 Jan B  Campaign Contrib  | me of contributor  | City;<br>Dallas,           | State; Zip Code TX 75229  9 Employer (See Instruction)        | <ul> <li>Filer ID (Ethics Commission Filers)</li> <li>7 Amount of contribution (\$)</li> <li>50.00</li> <li>Amount of contribution (\$)</li> <li>50.00</li> </ul> |
|---|--|----------------------------|---|---|
| O4/07/2023 Donal Campaign Contribution 6 Contrib 3829  8 Principal occupation / Job  Date Full nate 04/08/2023 Jan B  Campaign Contribution 4563  | d Maynard  outor address; Cedarbrush Drive  title (See Instructions)  me of contributor lack  outor address; | City; Dallas,              | State; Zip Code TX 75229  9 Employer (See Instruction (ID#:)) | 50.00 tions)  Amount of contribution (\$)   |
| Campaign Contribution  8 Principal occupation / Job  Date Date 04/08/2023 Campaign Contribution  Contribution  Contribution  G Contribution  Full national Contribution  Contribution  Contribution | utor address; Cedarbrush Drive title (See Instructions) me of contributor lack outor address;                | Dallas, □ out-of-state PAC | TX 75229  9 Employer (See Instruc                             | tions)  Amount of contribution (\$)   |
| 8 Principal occupation / Job  Date Full nate 04/08/2023 Jan B  Campaign Contribution 4563   | title (See Instructions)  me of contributor lack  butor address;   | Dallas, □ out-of-state PAC | TX 75229  9 Employer (See Instruc                             | Amount of contribution (\$)   |
| Date Full nar 04/08/2023 Jan B Campaign Contribution 4563   | me of contributor<br>lack<br>outor address;  |                            | (ID#:)  | Amount of contribution (\$)   |
| 04/08/2023 Jan B  Campaign Contribution 4563  | lack<br>outor address;   |                            |   | •   |
| Campaign Contribution 4563  | outor address;   |                            |   | 50.00   |
| Contribution 4563   | outor address;   |                            |   |   |
| Principal occupation / Job  |  | Dallas,                    | State; Zip Code<br>TX 75229                                   |   |
|   | title (See Instructions)   |                            | Employer (See Instruct  | tions)  |
| Date Full nar   | me of contributor  | out-of-state PAC           | (ID#:)  | Amount of contribution (\$)   |
| 04/11/2023 Thom   | as Stewart   |                            |   | 1000.00   |
| Campaign Contribution 3213  | utor address;<br>Marquette Street  | City;<br>Dallas,           | State; Zip Code<br>TX 75229                                   |   |
| Principal occupation / Job  | title (See Instructions)   |                            | Employer (See Instruc   | tions)  |
|   | me of contributor<br>k Hamner  | out-of-state PAC           | (ID#:)  | Amount of contribution (\$) 100.00  |
| Campaign Contribution 7327  | butor address;<br>Centenary Avenue   | City; Dallas,              | State: Zip Code<br>TX 75225                                   |   |
| Principal occupation / Job  | title (See Instructions)   |                            | Employer (See Instruc   | tions)  |

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|--------------------------------|--|------------------|-------------------------------|--|
| <b>2</b> FILER NAME Gay Willis |  |                  |                               | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor                       | out-of-state PAC | C (ID#:)                      | 7 Amount of contribution (\$)          |
| 04/14/2023                     | Brian McGovern                                   |                  |                               | 50.00                                  |
| Campaign<br>Contribution       | 6 Contributor address;<br>4364 Royal Ridge Drive | City;            | State; Zip Code<br>, TX 75229 |  |
| 8 Principal occu               | pation / Job title (See Instructions)            |                  | 9 Employer (See Instruc       | tions)                                 |
| Date 04/14/2023                | Full name of contributor  Katherine McGovern     | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$) 250.00     |
| Campaign<br>Contribution       | Contributor address; 4364 Royal Ridge Drive      | City;<br>Dallas, | State; Zip Code<br>, TX 75229 | 230.00                                 |
| Principal occup                | pation / Job title (See Instructions)            |                  | Employer (See Instruc         | tions)                                 |
| Date 04/11/2023                | Full name of contributor Joan & Alan Walne       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$) 250.00     |
| Campaign<br>Contribution       | Contributor address;<br>10020 Caribou Trail      | City;<br>Dallas, | State; Zip Code<br>, TX 75238 |  |
| Principal occup                | ation / Job title (See Instructions)             |                  | Employer (See Instruc         | tions)                                 |
| Date 04/11/2023                | Full name of contributor<br>Pete Schenkel        |                  | C (ID#:)                      | Amount of contribution (\$) 500.00     |
| Campaign<br>Contribution       | Contributor address; 814.186xs3iop               |                  | State: Zip Code<br>TX 75208   |  |
| Principal occup                | pation / Job title (See Instructions)            |                  | Employer (See Instruc         | tions)                                 |
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| <b>2</b> FILER NAME Gay Willis |  |                  |                                    | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor                         | out-of-state PAC | (ID#:)                             | 7 Amount of contribution (\$)          |
| 04/11/2023                     | Robert Kelsoe                                      |                  |                                    | 1000.00                                |
| Campaign<br>Contribution       | 6 Contributor address; F323 Boxing(Walley Road     | City;            | State; Zip Code<br>TX 75254        |  |
| 8 Principal occu               | pation / Job title (See Instructions)              |                  | 9 Employer (See Instruct           | tions)                                 |
| Date                           | Full name of contributor                           | out-of-state PAC | (ID#:)                             | Amount of contribution (\$)            |
| 04/15/2023                     | John Weber   |                  |                                    | 1000.00                                |
| Campaign<br>Contribution       | Contributor address;<br>5630 Kemper Court          | City;            | State; Zip Code<br>TX 75220        |  |
| Principal occup                | pation / Job title (See Instructions)              |                  | Employer (See Instruct             | ions)                                  |
| Date                           | Full name of contributor                           | out-of-state PAC | (ID#:)                             | Amount of contribution (\$)            |
| 04/14/2023                     | Steven Cotton                                      |                  |                                    | 200.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>10909 Candelight Lane      | Citv:            | State; Zip Code<br>TX 75229        |  |
| Principal occu <sub>l</sub>    | pation / Job title (See Instructions)              |                  | Employer (See Instruc              | tions)                                 |
| Date 04/13/2023                | Full name of contributor<br>Kingston Hill Partners | out-of-state PAC | (ID#:)                             | Amount of contribution (\$) 150.00     |
| Campaign<br>Contribution       | Contributor address;<br>73 Talmage Hill Road       | City; New C      | State: Zip Code<br>aanan, CT 68400 |  |
| Principal occu                 | pation / Job title (See Instructions)              |                  | Employer (See Instruc              | tions)                                 |
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|--------------------------|--|------------------|-----------------------------|---------------------------------------|
| 2 FILER NAME Gay Willis  |  |                  |                             | 3 Filer ID (Ethics Commission Filers) |
| 4 Date                   | 5 Full name of contributor                   | out-of-state PAC | ; (ID#:)                    | 7 Amount of contribution (\$)         |
| 04/10/2023               | George Crow                                  |                  |                             | 1000.00                               |
| Campaign<br>Contribution | 6 Contributor address;<br>4560 LORRAINE AVE  | City;            | State; Zip Code<br>TX 75205 |                                       |
| 8 Principal occup        | pation / Job title (See Instructions)        |                  | 9 Employer (See Instruc     | tions)                                |
| Date                     | Full name of contributor                     | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$)           |
| 04/12/2023               | Nathan Schubert                              |                  |                             | 150.00                                |
| Campaign<br>Contribution | Contributor address;<br>4560 Lorraine Avenue | City;            | State; Zip Code<br>TX 75205 |                                       |
| Principal occupa         | ation / Job title (See Instructions)         |                  | Employer (See Instruct      | cions)                                |
| Date                     | Full name of contributor                     | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$)           |
| 04/10/2023               | Stuart Crow                                  |                  |                             | 1000.00                               |
| Campaign<br>Contribution | Contributor address;<br>6310 Mercedes Ave    | City;<br>Dallas, | State; Zip Code<br>TX 75214 |                                       |
| Principal occup          | ation / Job title (See Instructions)         |                  | Employer (See Instruc       | tions)                                |
| Date 04/13/2023          | Full name of contributor<br>Sean Rae         | out-of-state PAC | · (ID#:)                    | Amount of contribution (\$) 150.00    |
| Campaign<br>Contribution | Contributor address;<br>4512 Lorraine Avenue | City; Dallas,    | State: Zip Code<br>TX 75205 |                                       |
|                          | ation / Job title (See Instructions)         |                  | Employer (See Instruc       | tions)                                |

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|---------------------------------------|--|------------------|-----------------------------|--|
| 2 FILER NAME<br>Gay Willis            |  |                  |                             | 3 Filer ID (Ethics Commission Filers)        |
| <b>4</b> Date 04/10/2023              | 5 Full name of contributor                   |                  | : (ID#:)                    | <b>7</b> Amount of contribution (\$) 1000.00 |
| Campaign<br>Contribution              |  | City;            | State; Zip Code<br>TX 75209 |  |
| 8 Principal occ                       | upation / Job title (See Instructions)       |                  | 9 Employer (See Instruct    | tions)                                       |
| Date 04/12/2023 Campaign Contribution | Robert McClain                               | City;            | State; Zip Code TX 75219    | Amount of contribution (\$) 350.00           |
| Principal occu                        | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | ions)  |
| Date 04/20/2023                       | Full name of contributor   Kathryn Wilkinson | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$) 200.00           |
| Campaign<br>Contribution              |  | City; Dallas,    | State; Zip Code<br>TX 75209 |  |
| Principal occu                        | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | iions)                                       |
| Date 04/17/2023                       | J Dodge Carter                               | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$) 150.00           |
| Campaign<br>Contribution              | Contributor address:<br>3525 University Blvd | City; Dallas,    | State: Zip Code<br>TX 75205 |  |
| Principal occu                        | pation / Job title (See Instructions)        |                  | Employer (See Instruct      | tions)                                       |
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#### SCHEDULE A1

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| The                            | Instruction Guide explains how                  | to complete this | form.                             | 1 Total pages Schedule A1:<br>22 of 29      |
|--------------------------------|---|------------------|-----------------------------------|---|
| <b>2</b> FILER NAME Gay Willis |   |                  |                                   | 3 Filer ID (Ethics Commission Filers)       |
| <b>4</b> Date 04/13/2023       | 5 Full name of contributor Michael Levy         | out-of-state PAC | (ID#:)                            | <b>7</b> Amount of contribution (\$) 150.00 |
| Campaign<br>Contribution       | 6 Contributor address;<br>5 Vista Lane          | City;<br>Glen H  | State; Zip Code<br>fead, NY 11545 |   |
| 8 Principal occu               | pation / Job title (See Instructions)           |                  | 9 Employer (See Instruc           | tions)                                      |
| Date 04/10/2023                | Full name of contributor Shirley Crow           |                  | (ID#:)                            | Amount of contribution (\$) 1000.00         |
| Campaign<br>Contribution       | Contributor address;<br>6310 Mercedes Ave       | City; Dallas,    | State; Zip Code<br>TX 75214       |   |
| Principal occup                | ation / Job title (See Instructions)            |                  | Employer (See Instruct            | tions)                                      |
| Date 04/12/2023                | Full name of contributor<br>Cynthia Silverthorn |                  | (ID#:)                            | Amount of contribution (\$) 150.00          |
| Campaign<br>Contribution       | Contributor address;<br>2415 Grandview Drive    | City;            | State; Zip Code<br>dson, TX 75080 |   |
| Principal occup                | pation / Job title (See Instructions)           |                  | Employer (See Instruc             | tions)                                      |
| Date 04/12/2023                | Full name of contributor<br>Wiliam Mundinger    | out-of-state PAC | (ID#:)                            | Amount of contribution (\$) 150.00          |
| Campaign<br>Contribution       | Contributor address;<br>3413 Soutwestern        | City; Dallas,    | State: Zip Code<br>TX 75225       |   |
| Principal occup                | pation / Job title (See Instructions)           |                  | Employer (See Instruc             | tions)                                      |
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### SCHEDULE A1

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| The                            | Instruction Guide explains how                 | to complete this | form.                         | 1 Total pages Schedule A1:<br>23 of 29 |
|--------------------------------|--|------------------|-------------------------------|--|
| <b>2</b> FILER NAME Gay Willis |  |                  |                               | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor                     | out-of-state PAC | C (ID#:)                      | 7 Amount of contribution (\$)          |
| 04/10/2023                     | Stephen Bancroft                               |                  |                               | 150.00                                 |
| Campaign<br>Contribution       | 6 Contributor address;<br>2598 Middleton Drive | City;<br>Frisco, | State; Zip Code<br>TX 75033   |  |
| 8 Principal occu               | pation / Job title (See Instructions)          |                  | 9 Employer (See Instruc       | ctions)                                |
| Date                           | Full name of contributor                       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$)            |
| 04/12/2023                     | Cody Armbrister                                |                  |                               | 150.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>4045 Bryn Mawr         | City;            | State; Zip Code<br>, TX 75225 |  |
| Principal occup                | pation / Job title (See Instructions)          |                  | Employer (See Instruc         | tions)                                 |
| Date                           | Full name of contributor                       | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$)            |
| 04/12/2023                     | Stanley Mullikin                               |                  |                               | 150.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>3412 Harvard Avenue    | City;<br>Dallas, | State; Zip Code<br>, TX 75205 |  |
| Principal occup                | oation / Job title (See Instructions)          |                  | Employer (See Instruc         | tions)                                 |
| Date 04/10/2023                | Full name of contributor<br>Robert Crow        | out-of-state PAC | C (ID#:)                      | Amount of contribution (\$) 1000.00    |
| Campaign<br>Contribution       | Contributor address;<br>4612 Watauga Road      | City; Dallas,    | State: Zip Code<br>TX 75209   |  |
| Principal occup                | <br>pation / Job title (See Instructions)      |                  | Employer (See Instruc         | tions)                                 |
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#### SCHEDULE A1

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| The                            | Instruction Guide explains how                  | to complete this | form.                       | 1 Total pages Schedule A1:<br>24 of 29 |
| <b>2</b> FILER NAME Gay Willis |   |                  |                             | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor                      | out-of-state PAC | : (ID#:)                    | 7 Amount of contribution (\$)          |
| 04/19/2023                     | Pete Schenkel                                   |                  |                             | 400.00                                 |
| Campaign<br>Contribution       | 6 Contributor address;<br>4231 Belclaire Avenue | City;<br>Dallas, | State; Zip Code<br>TX 75205 |  |
| 8 Principal occu               | pation / Job title (See Instructions)           |                  | 9 Employer (See Instruct    | tions)                                 |
| Date                           | Full name of contributor                        | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$)            |
| 04/21/2023                     | Joeseph Werner                                  |                  |                             | 1000.00                                |
| Campaign<br>Contribution       | Contributor address;<br>6848 Bandera Avenue     | City;            | State; Zip Code<br>TX 75229 |  |
| Principal occu                 | pation / Job title (See Instructions)           |                  | Employer (See Instruct      | ions)                                  |
| Date                           | Full name of contributor                        | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$)            |
| 04/20/2023                     | Susan Gandy                                     |                  |                             | 250.00                                 |
| Campaign<br>Contribution       | Contributor address;<br>5217 Shadywood Lane     | City;<br>Dallas, | State; Zip Code<br>TX 75209 |  |
| Principal occu                 | pation / Job title (See Instructions)           |                  | Employer (See Instruct      | ions)                                  |
| Date 04/19/2023                | Full name of contributor<br>Claire Dewar        | out-of-state PAC | : (ID#:)                    | Amount of contribution (\$) 1000.00    |
| Campaign<br>Contribution       | Contributor address;<br>5359 Montrose Drive     | City; Dallas,    | State: Zip Code<br>TX 75209 |  |
| Principal occu                 | pation / Job title (See Instructions)           |                  | Employer (See Instruct      | iions)                                 |
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|-----------------------------------|--|---------------------------------|--|
| <b>2</b> FILER NAME<br>Gay Willis |  |                                 | 3 Filer ID (Ethics Commission Filers)  |
| <b>4</b> Date 04/18/2023          | 5 Full name of contributor out-of-state F                | AC (ID#:)                       | 7 Amount of contribution (\$) 100.00   |
| Campaign<br>Contribution          | 6 Contributor address; City; 5948 Meletio Dalla          | State; Zip Code<br>as, TX 75230 |  |
| 8 Principal occu                  | pation / Job title (See Instructions)                    | 9 Employer (See Instruc         | itions)                                |
| Date 04/20/2023                   | Full name of contributor out-of-state F                  | AC (ID#:)                       | Amount of contribution (\$) 200.00     |
| Campaign<br>Contribution          | Contributor address; City;                               | State; Zip Code<br>as, TX 75313 | 200000                                 |
| Principal occu                    | pation / Job title (See Instructions)                    | Employer (See Instruc           | tions)                                 |
| Date 04/10/2023                   | Full name of contributor out-of-state F                  | AC (ID#:)                       | Amount of contribution (\$) 250.00     |
| Campaign<br>Contribution          | Contributor address; City; 1940 1956 € 616 al Expy Dalla | State; Zip Code<br>as, TX 75206 |  |
| Principal occu                    | ation / Job title (See Instructions)                     | Employer (See Instruc           | tions)                                 |
| Date 04/22/2023                   | Full name of contributor out-of-state F                  | AC (ID#:)                       | Amount of contribution (\$) 100.00     |
| Campaign<br>Contribution          | Contributor address; City;<br>5411 Springmeadow Dr Dalla | State: Zip Code<br>as, TX 75229 |  |
| Principal occu                    | pation / Job title (See Instructions)                    | Employer (See Instruc           | tions)                                 |
|                                   |  |                                 |  |
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| ıne                        | Instruction Guide explains how to complete this f         | form.                       | 1 Total pages Schedule A1:<br>26 of 29 |
|----------------------------|---|-----------------------------|--|
| 2 FILER NAME<br>Gay Willis |   |                             | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                     | 5 Full name of contributor out-of-state PAC (             | (ID#:)                      | 7 Amount of contribution (\$)          |
| 04/20/2023                 | Amanda Beck   |                             | 1000.00                                |
| Campaign<br>Contribution   | 6 Contributor address; City; 6622 Aberdeen Ave Dallas, 7  | State; Zip Code<br>TX 75230 |  |
| 8 Principal occu           | pation / Job title (See Instructions)                     | 9 Employer (See Instructi   | ons)                                   |
| Date                       | Full name of contributor                                  | (ID#:)                      | Amount of contribution (\$)            |
| 04/20/2023                 | Scott Beck  |                             | 1000.00                                |
| Campaign<br>Contribution   | Contributor address; City; 6622 Aberdeen Ave Dallas, 7    | State; Zip Code<br>TX 75230 |  |
| Principal occu             | pation / Job title (See Instructions)                     | Employer (See Instructi     | ons)                                   |
| Date                       | Full name of contributor                                  | (ID#:)                      | Amount of contribution (\$)            |
| 04/15/2023                 | John Turner   |                             | 500.00                                 |
| Campaign<br>Contribution   | Contributor address; City; 6930 Desco Dallas, 7           | State; Zip Code<br>TX 75225 |  |
| Principal occu             | pation / Job title (See Instructions)                     | Employer (See Instructi     | ons)                                   |
| Date 04/17/2023            | Full name of contributor                                  | (ID#:)                      | Amount of contribution (\$) 250.00     |
| Campaign<br>Contribution   | Contributor address; City; 5147 Horseshoe Trail Dallas, 7 | State: Zip Code<br>TX 75209 |  |
|                            |   |                             |  |

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#### SCHEDULE A1

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| The                                    | Instruction Guide explains how to co      | complete this fo     | orm.                       | 1 Total pages Schedule A1:<br>27 of 29 |
|--|---|----------------------|----------------------------|--|
| <b>2</b> FILER NAME Gay Willis         |   |                      |                            | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                                 | 5 Full name of contributor Deborah Nugent | out-of-state PAC (ID | D#:)                       | 7 Amount of contribution (\$)          |
| 04/11/2023<br>Campaign<br>Contribution |   | City; Dallas, T      | State; Zip Code<br>X 75244 | 500.00                                 |
| 8 Principal occi                       | pation / Job title (See Instructions)     | 9                    | Employer (See Instructi    | ons)                                   |
| Date 04/13/2023                        | Full name of contributor                  | out-of-state PAC (ID | D#:)                       | Amount of contribution (\$) 1000.00    |
| Campaign<br>Contribution               | Contributor address; 4942 Crooked Lane    |                      | State; Zip Code            | 1000.00                                |
| Principal occu                         | pation / Job title (See Instructions)     |                      | Employer (See Instructi    | ons)                                   |
| Date 04/25/2023                        | Full name of contributor 🔲 o              | out-of-state PAC (IC | D#:)                       | Amount of contribution (\$) 50.00      |
| Campaign<br>Contribution               |   | City;<br>Dallas, T   | State; Zip Code<br>X 75225 |  |
| Principal occu                         | <br>pation / Job title (See Instructions) |                      | Employer (See Instructi    | ons)                                   |
| Date 04/24/2023                        | Full name of contributor and              | out-of-state PAC (IC | D#:)                       | Amount of contribution (\$) 1000.00    |
| Campaign<br>Contribution               | Contributor address;<br>6125 Luther Lane  | City; Dallas, T      | State: Zip Code<br>X 75220 |  |
| Principal occu                         | <br>pation / Job title (See Instructions) |                      | Employer (See Instructi    | ons)                                   |
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| monaction cause explains non                 | to complete this  | form.   | 1 Total pages Schedule A1: 28 of 29   |
|  |   |   | 3 Filer ID (Ethics Commission Filers)   |
| 5 Full name of contributor                   | out-of-state PAC  | (ID#:)  | 7 Amount of contribution (\$)   |
| Diane Frank                                  |   |   | 250.00  |
| 6 Contributor address;<br>4535 Manning Lane  | City;<br>Dallas,  | State; Zip Code<br>TX 75165   |   |
| pation / Job title (See Instructions)        |   | 9 Employer (See Instruct  | tions)  |
| Full name of contributor                     | out-of-state PAC  | (ID#:)  | Amount of contribution (\$)   |
| Clay Jenkins                                 |   |   | 1000.00   |
| Contributor address;<br>516 West Main Street | City;   | State; Zip Code   |   |
| ation / Job title (See Instructions)         |   | Employer (See Instruct  | ions)   |
| Full name of contributor                     | out-of-state PAC  | (ID#:)  | Amount of contribution (\$)   |
| Michael Wilson                               |   |   | 25.00   |
| Contributor address;<br>3509 Princess Ln     | City;<br>Dallas,  | State; Zip Code<br>TX 75219   |   |
| pation / Job title (See Instructions)        |   | Employer (See Instruct  | tions)  |
| Full name of contributor Don Glendenning     | out-of-state PAC  | (ID#:)  | Amount of contribution (\$) 500.00  |
| Contributor address;<br>B401 Box 504wy       | City; Dallas,   | State: Zip Code<br>TX 75208   |   |
| pation / Job title (See Instructions)        |   | Employer (See Instruct  | tions)  |
|  |   |   |   |
|  |   |   |   |
|  | Diane Frank  6 Contributor address; 4535 Manning Lane  pation / Job title (See Instructions)  Full name of contributor Clay Jenkins  Contributor address; 516 West Main Street  pation / Job title (See Instructions)  Full name of contributor Michael Wilson  Contributor address; 3509 Princess Ln  pation / Job title (See Instructions)  Full name of contributor Ontributor address; 3509 Princess Ln  Full name of contributor Don Glendenning | Diane Frank  6 Contributor address; 4535 Manning Lane Dallas,  pation / Job title (See Instructions)  Full name of contributor Out-of-state PAC Clay Jenkins  Contributor address; 516 West Main Street Dallas,  pation / Job title (See Instructions)  Full name of contributor Out-of-state PAC Michael Wilson  Contributor address; 3509 Princess Ln City; Dallas,  pation / Job title (See Instructions)  Full name of contributor Out-of-state PAC Dallas,  pation / Job title (See Instructions)  Full name of contributor Out-of-state PAC Don Glendenning  Contributor address; City; Dallas,  Contributor address; City; Dallas, | Diane Frank  6 Contributor address; 4535 Manning Lane  Pation / Job title (See Instructions)  Full name of contributor Clay Jenkins  Contributor address; 516 West Main Street  Pation / Job title (See Instructions)  Full name of contributor Diangle Frank  City; State; Zip Code Dallas, TX 75229  Dallas, TX 75229  Dallas, TX 75229  Dallas, TX 75219  Dallas, TX 75208 |

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#### SCHEDULE A1

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| The                            | Instruction Guide explains how to complete this       | form.                       | 1 Total pages Schedule A1:<br>29 of 29 |
|--------------------------------|---|-----------------------------|--|
| <b>2</b> FILER NAME Gay Willis |   |                             | 3 Filer ID (Ethics Commission Filers)  |
| 4 Date                         | 5 Full name of contributor  uut-of-state PAC          | (ID#:)                      | 7 Amount of contribution (\$)          |
| 04/26/2023                     | R Colhouer  |                             | 350.00                                 |
| Campaign<br>Contribution       | 6 Contributor address; City; #5006Bowdf%lLane Dallas, | State; Zip Code<br>TX 75225 |  |
| 8 Principal occu               | pation / Job title (See Instructions)                 | 9 Employer (See Instruc     | tions)                                 |
| Date                           | Full name of contributor                              | (ID#:)                      | Amount of contribution (\$)            |
| 04/26/2023                     | Riz Chand   |                             | 350.00                                 |
| Campaign<br>Contribution       | Contributor address; City; 4516 Lovers Lane Dallas,   | State; Zip Code<br>TX 75225 |  |
| Principal occup                | ation / Job title (See Instructions)                  | Employer (See Instruct      | tions)                                 |
| Date                           | Full name of contributor                              | (ID#:)                      | Amount of contribution (\$)            |
|                                | Contributor address; City;                            | State; Zip Code             |  |
| Principal occup                | ation / Job title (See Instructions)                  | Employer (See Instruc       | tions)                                 |
| Date                           | Full name of contributor                              | (ID#:)                      | Amount of contribution (\$)            |
|                                | Contributor address; City;                            | State; Zip Code             |  |
| Principal occup                | nation / Job title (See Instructions)                 | Employer (See Instruc       | tions)                                 |
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# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to                            | complete this form. |                                       |  |
|--|--|---------------------|---------------------------------------|--|
| <b>1</b> Total pages Schedule F1: 1 of 11                              | 2 FILER NAME<br>Gay Willis                                       |                     | 3 Filer ID (Ethics Commission Filers) |  |
| 4 Date   | 5 Payee name   |                     |                                       |  |
| 04/18/2023   | Graphics Management  |                     |                                       |  |
| <b>6</b> Amount (\$) 16507.30 Campaign Funds for Campaign Expenditures | 7 Payee address;<br>9322 Moss Trail Dallas, TX 75231             | City;               | State; Zip Code                       |  |
| 8  | (a) Category (See Categories listed at the top of this schedule) | (b) Description     |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Advertising  | Advertising         |                                       |  |
|  | (c) Check if travel outside of Texas. Complete Schedule T.       | Check if Austi      | in, TX, officeholder living expense   |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF           | Candidate / Officeholder name                                    | Office sought       | Office held                           |  |
| Date   | Payee name   |                     |                                       |  |
| 04/11/2023   | Graphics Management  |                     |                                       |  |
| Amount (\$)<br>11714.42  | Payee address; 9322 Moss Trail Dallas, TX 75231                  | City;               | State; Zip Code                       |  |
| Campaign Funds for<br>Campaign Expenditures                            |  | D : #               |                                       |  |
|  | Category (See Categories listed at the top of this schedule)     | Description         |                                       |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Advertising  | Advertising         |                                       |  |
|  | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | in, TX, officeholder living expense   |  |
| Complete ONLY if direct expenditure to benefit C/OH                    | Candidate / Officeholder name                                    | Office sought       | Office held                           |  |
| Date   | Payee name   |                     |                                       |  |
| 04/14/2023   | Adrian Bakke   |                     |                                       |  |
| Amount (\$) 3500.00  | Payee address;   | City;               | State; Zip Code                       |  |
| Campaign Funds for<br>Campaign Expenditures                            | 11223 Wonderland Trail Dallas, TX 75229                          |                     |                                       |  |
|  | Category (See Categories listed at the top of this schedule)     | Description         |                                       |  |
| PURPOSE  | Consulting   | Consulting          |                                       |  |
| OF<br>EXPENDITURE  |  |                     |                                       |  |
|  | Check if travel outside of Texas. Complete Schedule T.           | Check if Austii     | n, TX, officeholder living expense    |  |
| Complete ONLY if direct expenditure to benefit C/OH                    | Candidate / Officeholder name                                    | Office sought       | Office held                           |  |
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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to                            | complete this form. |                                   |                 |
|--|--|---------------------|-----------------------------------|-----------------|
| 1 Total pages Schedule F1: 2 of 11                             | 2 FILER NAME<br>Gay Willis                                       |                     | 3 Filer ID (Ethics Com            | mission Filers) |
| 4 Date   | 5 Payee name   |                     |                                   |                 |
| 04/14/2023   | Linda Rogers   |                     |                                   |                 |
| 6 Amount (\$) 500.00  Campaign Funds for Campaign Expenditures | <b>7</b> Payee address;<br>11008 Rosser Road Dallas, TX 75229    | City;               | State; Zi                         | ip Code         |
| 8  | (a) Category (See Categories listed at the top of this schedule) | (b) Description     |                                   |                 |
| PURPOSE<br>OF<br>EXPENDITURE                                   | Consulting   | Consulting          |                                   |                 |
|  | (c) Check if travel outside of Texas. Complete Schedule T.       | Check if Austi      | in, TX, officeholder living exper | ise             |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF   | Candidate / Officeholder name                                    | Office sought       | Offic                             | e held          |
| Date   | Payee name   |                     |                                   |                 |
| 04/25/2023   | Office Depot   |                     |                                   |                 |
| Amount (\$) 466.52 Campaign Funds for                          | Payee address;<br>8317 Westchester Dr Dallas, TX 75225           | City;               | State; Zi                         | p Code          |
| Campaign Expenditures  |  |                     |                                   |                 |
|  | Category (See Categories listed at the top of this schedule)     | Description         |                                   |                 |
| PURPOSE<br>OF<br>EXPENDITURE                                   | Supplies   | Supplies            |                                   |                 |
|  | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | n, TX, officeholder living expen  | se              |
| Complete ONLY if direct expenditure to benefit C/OH            | Candidate / Officeholder name                                    | Office sought       | Office                            | e held          |
| Date   | Payee name   |                     |                                   |                 |
|  | •  |                     |                                   |                 |
| 04/26/2023   | Anedot   |                     |                                   |                 |
| Amount (\$) 28.60  | Payee address;<br>1340 Poydras Street Suite 1770                 | City;               | State; Zi                         | p Code          |
| Campaign Funds for<br>Campaign Expenditures                    | New Orleans, L 70112   |                     |                                   |                 |
|  | Category (See Categories listed at the top of this schedule)     | Description         |                                   |                 |
| PURPOSE<br>OF  | Fees   | Fees                |                                   |                 |
| EXPENDITURE  |  |                     |                                   |                 |
|  | Check if travel outside of Texas. Complete Schedule T.           | Check if Austii     | n, TX, officeholder living expen  | se              |
| Complete ONLY if direct expenditure to benefit C/OH            | Candidate / Officeholder name                                    | Office sought       | Offic                             | ce held         |
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# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to                                       | complete this form. |                             |                      |
|--|---|---------------------|-----------------------------|----------------------|
| <b>1</b> Total pages Schedule F1: 3 of 11                    | 2 FILER NAME<br>Gay Willis  |                     | 3 Filer ID (Ethics          | s Commission Filers) |
| 4 Date   | 5 Payee name  |                     | 1                           |                      |
| 04/25/2023   | Anedot  |                     |                             |                      |
| 6 Amount (\$) 2.30 Campaign Funds for Campaign Expenditures  | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112 | City;               | State;                      | Zip Code             |
| 8  | (a) Category (See Categories listed at the top of this schedule)            | (b) Description     |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                             |                      |
|  | (c) Check if travel outside of Texas. Complete Schedule T.                  | Check if Austi      | in, TX, officeholder living | expense              |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name   | Office sought       |                             | Office held          |
| Date   | Payee name  |                     |                             |                      |
| 04/24/2023   | Anedot  |                     |                             |                      |
| Amount (\$) 122.80 Campaign Funds for Campaign Expenditures  | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;               | State;                      | Zip Code             |
| Campaign Expenditures  | Category (See Categories listed at the top of this schedule)                | Description         |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                             |                      |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | n, TX, officeholder living  | expense              |
| Complete ONLY if direct expenditure to benefit C/Oh          | Candidate / Officeholder name   | Office sought       |                             | Office held          |
| Date   | Payee name  |                     |                             |                      |
| 04/23/2023   | Anedot  |                     |                             |                      |
| Amount (\$) 10.30  Campaign Funds for Campaign Expenditures  | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;               | State;                      | Zip Code             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this schedule) Fees           | Description<br>Fees |                             |                      |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | n, TX, officeholder living  | expense              |
| Complete ONLY if direct expenditure to benefit C/Oh          | Candidate / Officeholder name   | Office sought       |                             | Office held          |
|  | ATTACH ADDITIONAL COPIES OF THIS  | SCHEDULE AS NEE     | EDED                        |                      |

# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment   | The Instruction Guide explains how to                                       | complete this form. |                             |                      |
|---|---|---------------------|-----------------------------|----------------------|
| <b>1</b> Total pages Schedule F1: 4 of 11                           | 2 FILER NAME<br>Gay Willis  |                     | 3 Filer ID (Ethics          | s Commission Filers) |
| 4 Date  | 5 Payee name  |                     | 1                           |                      |
| 04/22/2023  | Anedot  |                     |                             |                      |
| 6 Amount (\$) 30.30 Campaign Funds for Campaign Expenditures        | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112 | City;               | State;                      | Zip Code             |
| 8   | (a) Category (See Categories listed at the top of this schedule)            | (b) Description     |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE  | Fees  | Fees                |                             |                      |
|   | (c) Check if travel outside of Texas. Complete Schedule T.                  | Check if Austi      | in, 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  | Payee name  |                     |                             |                      |
| 04/21/2023  | Anedot  |                     |                             |                      |
| Amount (\$) 20.30 Campaign Funds for Campaign Expenditures          | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, L 70112    | City;               | State;                      | Zip Code             |
|   | Category (See Categories listed at the top of this schedule)                | Description         |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE  | Fees  | Fees                |                             |                      |
|   | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | in, TX, officeholder living | expense              |
| Complete ONLY if direct expenditure to benefit C/OH                 | Candidate / Officeholder name   | Office sought       |                             | Office held          |
| Date  | Payee name  |                     |                             |                      |
| 04/20/2023  | Anedot  |                     |                             |                      |
| Amount (\$) 27.60  Campaign Funds for Campaign Expenditures         | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;               | State;                      | Zip Code             |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule) Fees           | Description<br>Fees |                             |                      |
|   | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | n, TX, officeholder living  | expense              |
| Complete ONLY if direct expenditure to benefit C/OH                 | Candidate / Officeholder name   | Office sought       |                             | Office held          |
|   | ATTACH ADDITIONAL COPIES OF THIS  | SCHEDULE AS NEE     | EDED                        |                      |

# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to                                       | complete this form. |                             |                      |
|--|---|---------------------|-----------------------------|----------------------|
| <b>1</b> Total pages Schedule F1: 5 of 11                    | 2 FILER NAME<br>Gay Willis  |                     | 3 Filer ID (Ethics          | s Commission Filers) |
| 4 Date   | 5 Payee name  |                     |                             |                      |
| 04/19/2023   | Anedot  |                     |                             |                      |
| 6 Amount (\$) 10.60 Campaign Funds for Campaign Expenditures | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112 | City;               | State;                      | Zip Code             |
| 8  | (a) Category (See Categories listed at the top of this schedule)            | (b) Description     |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                             |                      |
|  | (c) Check if travel outside of Texas. Complete Schedule T.                  | Check if Austi      | in, TX, officeholder living | expense              |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name   | Office sought       |                             | Office held          |
| Date   | Payee name  |                     |                             |                      |
| 04/18/2023   | Anedot  |                     |                             |                      |
| Amount (\$) 79.60 Campaign Funds for Campaign Expenditures   | Payee address; 1340 Poydras Street Suite 1770 New Orleans, LA 70112         | City;               | State;                      | Zip Code             |
|  | Category (See Categories listed at the top of this schedule)                | Description         |                             |                      |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                             |                      |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | in, TX, officeholder living | expense              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought       |                             | Office held          |
| Date   | Payee name  |                     |                             |                      |
| 04/17/2023   | Anedot  |                     |                             |                      |
| Amount (\$) 11.60 Campaign Funds for Campaign Expenditures   | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;               | State;                      | Zip Code             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this schedule) Fees           | Description<br>Fees |                             |                      |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | n, TX, officeholder living  | expense              |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought       |                             | Office held          |
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# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to e   | complete this form. | Other (enter a category not its    | led above)     |
|--|---|---------------------|------------------------------------|----------------|
| <b>1</b> Total pages Schedule F1: 6 of 11                    | 2 FILER NAME<br>Gay Willis  |                     | 3 Filer ID (Ethics Commi           | ission Filers) |
| 4 Date   | 5 Payee name  |                     |                                    |                |
| 04/16/2023   | Anedot  |                     |                                    |                |
| 6 Amount (\$) 40.30 Campaign Funds for                       | <b>7</b> Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, L 70112 | City;               | State; Zip                         | Code           |
| Campaign Expenditures  | (1)   | 4.5                 |                                    |                |
| 8  | (a) Category (See Categories listed at the top of this schedule)                  | (b) Description     |                                    |                |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                                    |                |
|  | (c) Check if travel outside of Texas. Complete Schedule T.                        | Check if Austi      | n, TX, officeholder living expense |                |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name   | Office sought       | Office                             | held           |
| Date   | Payee name  |                     |                                    |                |
| 04/15/2023   | Anedot  |                     |                                    |                |
| Amount (\$) 40.30  | Payee address;  | City;               | State; Zip                         | Code           |
| Campaign Funds for Campaign Expenditures                     | 1340 Poydras Street Suite 1770<br>New Orleans, LA 70112                           |                     |                                    |                |
|  | Category (See Categories listed at the top of this schedule)                      | Description         |                                    |                |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                                    |                |
|  | Check if travel outside of Texas. Complete Schedule T.                            | Check if Austi      | n, TX, officeholder living expense |                |
| Complete ONLY if direct expenditure to benefit C/OF          | Candidate / Officeholder name   | Office sought       | Office I                           | neld           |
| Date   | Payee name  |                     |                                    |                |
|  |   |                     |                                    |                |
| 04/14/2023   | Anedot  |                     |                                    |                |
| Amount (\$) 34.90  | Payee address;<br>1340 Poydras Street Suite 1770                                  | City;               | State; Zip                         | Code           |
| Campaign Funds for Campaign Expenditures                     | New Orleans, LA 70112   |                     |                                    |                |
|  | Category (See Categories listed at the top of this schedule)                      | Description         |                                    |                |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                                    |                |
|  | Check if travel outside of Texas. Complete Schedule T.                            | Check if Austin     | n, TX, officeholder living expense |                |
| Complete ONLY if direct expenditure to benefit C/OF          | Candidate / Officeholder name   | Office sought       | Office                             | held           |
|  | ATTACH ADDITIONAL COPIES OF THIS  | SCHEDULE AS NEE     | EDED                               |                |

# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to o                                     | complete this form. | (                          | .yot.lota abovo,   |
|--|---|---------------------|----------------------------|--------------------|
| <b>1</b> Total pages Schedule F1: 7 of 11                    | 2 FILER NAME<br>Gay Willis  |                     | 3 Filer ID (Ethics         | Commission Filers) |
| 4 Date   | 5 Payee name  |                     | <u> </u>                   |                    |
| 04/12/2023   | Anedot  |                     |                            |                    |
| 6 Amount (\$) 40.30 Campaign Funds for Campaign Expenditures | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112 | City;               | State;                     | Zip Code           |
| 8  | (a) Category (See Categories listed at the top of this schedule)            | (b) Description     |                            |                    |
| PURPOSE  | Fees  | Fees                |                            |                    |
| OF<br>EXPENDITURE  |   |                     |                            |                    |
|  | (c) Check if travel outside of Texas. Complete Schedule T.                  | Check if Austi      | n, TX, officeholder living | expense            |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name   | Office sought       |                            | Office held        |
| Date   | Payee name  |                     |                            |                    |
| 04/11/2023   | Anedot  |                     |                            |                    |
| Amount (\$)<br>8.60  | Payee address;  | City;               | State;                     | Zip Code           |
| Campaign Funds for<br>Campaign Expenditures                  | 1340 Poydras Street Suite 1770<br>New Orleans, LA 70112                     |                     |                            |                    |
|  | Category (See Categories listed at the top of this schedule)                | Description         |                            |                    |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                            |                    |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi      | n, TX, officeholder living | expense            |
| Complete ONLY if direct expenditure to benefit C/OF          | Candidate / Officeholder name   | Office sought       |                            | Office held        |
| Date   | Payee name  |                     |                            |                    |
| 04/10/2023   | Anedot  |                     |                            |                    |
| Amount (\$) 71.20  | Payee address;  | City;               | State;                     | Zip Code           |
| Campaign Funds for<br>Campaign Expenditures                  | 1340 Poydras Street Suite 1770<br>New Orleans, L 70112                      |                     |                            |                    |
|  | Category (See Categories listed at the top of this schedule)                | Description         |                            |                    |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                |                            |                    |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austin     | n, TX, officeholder living | expense            |
| Complete ONLY if direct expenditure to benefit C/OF          | Candidate / Officeholder name   | Office sought       |                            | Office held        |
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# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment                                   | The Instruction Guide explains how to d                          | complete this form. | Other (enter a category not iste    | ed above)    |  |  |
|---|--|---------------------|-------------------------------------|--------------|--|--|
| <b>1</b> Total pages Schedule F1: 8 of 11             | 2 FILER NAME<br>Gay Willis                                       |                     | 3 Filer ID (Ethics Commis           | sion Filers) |  |  |
| 4 Date  | 5 Payee name   |                     |                                     |              |  |  |
| 04/09/2023  | Anedot   |                     |                                     |              |  |  |
| <b>6</b> Amount (\$) 90.60                            | 7 Payee address;   | City;               | State; Zip C                        | Code         |  |  |
| Campaign Funds for<br>Campaign Expenditures           | 1340 Poydras Street Suite 1770<br>New Orleans, LA 70112          |                     |                                     |              |  |  |
| 8   | (a) Category (See Categories listed at the top of this schedule) | (b) Description     |                                     |              |  |  |
| PURPOSE   | Fees   | Fees                |                                     |              |  |  |
| OF<br>EXPENDITURE                                     |  |                     |                                     |              |  |  |
|   | (c) Check if travel outside of Texas. Complete Schedule T.       | Check if Austi      | n, TX, officeholder living expense  |              |  |  |
| 9 Complete ONLY if direct expenditure to benefit C/Oh | Candidate / Officeholder name                                    | Office sought       | Office h                            | eld          |  |  |
| Date  | Payee name   |                     |                                     |              |  |  |
| 04/08/2023  | Anedot   |                     |                                     |              |  |  |
| Amount (\$)<br>25.20                                  | Payee address;   | City;               | State; Zip C                        | Code         |  |  |
|   | 1340 Poydras Street Suite 1770                                   |                     |                                     |              |  |  |
| Campaign Funds for<br>Campaign Expenditures           | New Orleans, LA 70112  |                     |                                     |              |  |  |
|   | Category (See Categories listed at the top of this schedule)     | Description         |                                     |              |  |  |
| PURPOSE   | Fees   | Fees                |                                     |              |  |  |
| OF<br>EXPENDITURE                                     |  |                     |                                     |              |  |  |
|   | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | in, TX, officeholder living expense |              |  |  |
| Complete ONLY if direct expenditure to benefit C/OF   | Candidate / Officeholder name                                    | Office sought       | Office h                            | eld          |  |  |
| Date  | Payee name   |                     |                                     |              |  |  |
|   |  |                     |                                     |              |  |  |
| 04/07/2023  | Anedot   |                     |                                     |              |  |  |
| Amount (\$) 10.30                                     | Payee address;   | City;               | State; Zip C                        | Code         |  |  |
| Campaign Funds for                                    | 1340 Poydras Street Suite 1770<br>New Orleans, L 70112           |                     |                                     |              |  |  |
| Campaign Expenditures                                 |  |                     |                                     |              |  |  |
|   | Category (See Categories listed at the top of this schedule)     | Description         |                                     |              |  |  |
| PURPOSE<br>OF   | Fees   | Fees                |                                     |              |  |  |
| EXPENDITURE   |  |                     |                                     |              |  |  |
|   | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | n, TX, officeholder living expense  |              |  |  |
| Complete ONLY if direct                               | Candidate / Officeholder name                                    | Office sought       | Office h                            | neld         |  |  |
| expenditure to benefit C/OF                           | 1  |                     |                                     |              |  |  |
|   | ATTACH ADDITIONAL COPIES OF THIS                                 | SCHEDULE AS NEE     | EDED                                |              |  |  |

# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to                                       | complete this form.                   |                             |             |
|--|---|---------------------------------------|-----------------------------|-------------|
| <b>1</b> Total pages Schedule F1: 9 of 11                    | 2 FILER NAME<br>Gay Willis  | 3 Filer ID (Ethics Commission Filers) |                             |             |
| 4 Date   | 5 Payee name  |                                       | 1                           |             |
| 04/06/2023   | Anedot  |                                       |                             |             |
| 6 Amount (\$) 85.90 Campaign Funds for Campaign Expenditures | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112 | City;                                 | State;                      | Zip Code    |
| 8  | (a) Category (See Categories listed at the top of this schedule)            | (b) Description                       |                             |             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                                  |                             |             |
|  | (c) Check if travel outside of Texas. Complete Schedule T.                  | Check if Austi                        | in, TX, officeholder living | g expense   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name   | Office sought                         |                             | Office held |
| Date   | Payee name  |                                       |                             |             |
| 04/05/2023   | Anedot  |                                       |                             |             |
| Amount (\$) 14.90 Campaign Funds for Campaign Expenditures   | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;                                 | State;                      | Zip Code    |
|  | Category (See Categories listed at the top of this schedule)                | Description                           |                             |             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                                  |                             |             |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi                        | n, TX, officeholder living  | expense     |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought                         |                             | Office held |
| Date   | Payee name  |                                       |                             |             |
| 04/04/2023   | Anedot  |                                       |                             |             |
| Amount (\$) 48.20 Campaign Funds for Campaign Expenditures   | Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112   | City;                                 | State;                      | Zip Code    |
|  | Category (See Categories listed at the top of this schedule)                | Description                           |                             |             |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees                                  |                             |             |
|  | Check if travel outside of Texas. Complete Schedule T.                      | Check if Austi                        | n, TX, officeholder living  | expense     |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name   | Office sought                         |                             | Office held |
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# SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

|  | The Instruction Guide explains how to                            | complete this form. |  |  |  |
|--|--|---------------------|--|--|--|
| <b>1</b> Total pages Schedule F1: 10 of 11                   | 2 FILER NAME<br>Gay Willis                                       |                     | 3 Filer ID (Ethics Commission Filers)          |  |  |
| 4 Date   | 5 Payee name   |                     | I  |  |  |
| 04/03/2023   | Anedot   |                     |  |  |  |
| 6 Amount (\$) 19.30  | 7 Payee address;<br>1340 Poydras Street Suite 1770               | City;               | State; Zip Code                                |  |  |
| Campaign Funds for<br>Campaign Expenditures                  | New Orleans, LA 70112  |                     |  |  |  |
| 8  | (a) Category (See Categories listed at the top of this schedule) | (b) Description     |  |  |  |
| PURPOSE<br>OF  | Fees   | Fees                |  |  |  |
| EXPENDITURE  |  |                     |  |  |  |
|  | (c) Check if travel outside of Texas. Complete Schedule T.       | Check if Austi      | in, TX, officeholder living expense            |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name                                    | Office sought       | Office held                                    |  |  |
| Date   | Payee name   |                     |  |  |  |
| 03/30/2023   | Anedot   |                     |  |  |  |
| Amount (\$)<br>8.30  | Payee address;   | City;               | State; Zip Code                                |  |  |
|  | 1340 Poydras Street Suite 1770                                   |                     |  |  |  |
| Campaign Funds for<br>Campaign Expenditures                  | New Orleans, L 70112   |                     |  |  |  |
|  | Category (See Categories listed at the top of this schedule)     | Description         |  |  |  |
| PURPOSE<br>OF  | Fees   | Fees                |  |  |  |
| EXPENDITURE  |  |                     |  |  |  |
|  | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | stin, TX, officeholder living expense          |  |  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate / Officeholder name                                    | Office sought       | Office held                                    |  |  |
| Date   | Payee name   |                     |  |  |  |
| 03/29/2023   | Anedot   |                     |  |  |  |
| Amount (\$)  | Payee address;   | City;               | State; Zip Code                                |  |  |
| 64.90  | 1340 Poydras Street Suite 1770                                   | ٠٠٠,                |  |  |  |
| Campaign Funds for<br>Campaign Expenditures                  | New Orleans, LA 70112  |                     |  |  |  |
|  | Category (See Categories listed at the top of this schedule)     | Description         |  |  |  |
|  | Fees   | Fees                |  |  |  |
| PURPOSE  |  | 1                   |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 |  |                     |  |  |  |
| OF   | Check if travel outside of Texas. Complete Schedule T.           | Check if Austi      | n, TX, officeholder living expense             |  |  |
| OF   | Candidate / Officeholder name                                    | Check if Austi      | n, TX, officeholder living expense Office held |  |  |

# SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

| Credit Card Payment  | The Instruction Guide explains how to   | complete this form.                              |                                       |  |  |  |
|--|---|--|---------------------------------------|--|--|--|
| <b>1</b> Total pages Schedule F1: 11 of 11                   | 2 FILER NAME<br>Gay Willis  |  | 3 Filer ID (Ethics Commission Filers) |  |  |  |
| 4 Date   | 5 Payee name  |  |                                       |  |  |  |
| 03/28/2023   | Anedot  |  |                                       |  |  |  |
| 6 Amount (\$) 10.90 Campaign Funds for Campaign Expenditures | 7 Payee address;<br>1340 Poydras Street Suite 1770<br>New Orleans, LA 70112             | City;  | State; Zip Code                       |  |  |  |
| 8  | (a) Category (See Categories listed at the top of this schedule)                        | (b) Description                                  |                                       |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees   |                                       |  |  |  |
|  | (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officel |  |                                       |  |  |  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OF | Candidate / Officeholder name   | Office sought                                    | Office held                           |  |  |  |
| Date   | Payee name  |  |                                       |  |  |  |
| 03/28/2023   | ViaSat  |  |                                       |  |  |  |
| Amount (\$) 19.00  | Payee address;<br>6155 El Camino Real Carlsbad, CA, CA 92009                            | City;  | State; Zip Code                       |  |  |  |
| Campaign Funds for<br>Campaign Expenditures                  |   | T =  |                                       |  |  |  |
|  | Category (See Categories listed at the top of this schedule)                            | Description                                      |                                       |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Fees  | Fees   |                                       |  |  |  |
|  | Check if travel outside of Texas. Complete Schedule T.                                  | Check if Austin, TX, officeholder living expense |                                       |  |  |  |
| Complete ONLY if direct expenditure to benefit C/Oh          | Candidate / Officeholder name   | Office sought                                    | Office held                           |  |  |  |
| Date   | Payee name  |  |                                       |  |  |  |
| Amount (\$)  | Payee address;  | City;  | State; Zip Code                       |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 |   |  |                                       |  |  |  |
|  | Check if travel outside of Texas. Complete Schedule T.                                  | Check if Austi                                   | n, TX, officeholder living expense    |  |  |  |
| Complete ONLY if direct expenditure to benefit C/OF          | Candidate / Officeholder name   | Office sought                                    | Office held                           |  |  |  |
|  | ATTACH ADDITIONAL COPIES OF THIS  | SCHEDULE AS NE                                   | EDED                                  |  |  |  |

# **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

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

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

| Contributions/Donations Made By<br>Candidate/Officeholder/Politica |                  | Gift/Awards/Memorials Expense Printing Expense nittee Legal Services Printing Expense Salaries/Wages/Contract Labor |                            | 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 F4: 1 of 2                           | <b>2</b> FILER I | NAME  |                            |   |                                     | 3 Filer ID (Ethics 0          | Commission Filers) |
| 4 TOTAL OF UNITEM  | ZED EXP          | ENDITURE  | S CHARGE                   | TOACR   | EDIT CARD                           | \$                            |                    |
| 5 Date   | 6 Payee r        | name  |                            |   |                                     |                               |                    |
| 04/11/2023   | Apple            |   |                            |   |                                     |                               |                    |
| <b>7</b> Amount (\$) 43.29   | 8 Payee          | address;  |                            |   | City;                               | State;                        | Zip Code           |
| Officeholder Funds for   | 1 Apple Par      | k Way   | Cupertino, CA              | 95014   |                                     |                               |                    |
| Campaign Expenditures  |                  |   |                            |   |                                     |                               |                    |
| 9 TYPE OF EXPENDITURE  | X                | Political   | [                          | Non-Po  | litical                             |                               |                    |
| 10   | (a) Category     | y (See Categories   | s listed at the top of thi | is schedule)  | (b) Description                     |                               |                    |
| PURPOSE  | Fees             |   |                            |   | Fe                                  | ee                            |                    |
| OF<br>EXPENDITURE  |                  |   |                            |   |                                     |                               |                    |
|  | (c)              | Check if travel ou  | tside of Texas. Complete   | e Schedule T.   | Check if Aus                        | stin, TX, officeholder living | expense            |
| 11 Complete ONLY if direct expenditure to benefit C/OH             |                  | didate / Office<br>District 13  | eholder name               |   | ffice sought<br>Council District 13 | Office he<br>Council Distri   |                    |
| Date   | Payee            | name  |                            |   |                                     |                               |                    |
| 03/28/2023   | Viasat           |   |                            |   |                                     |                               |                    |
| Amount (\$) 19.00  | Payee            | address;  |                            |   | City;                               | State;                        | Zip Code           |
| Officeholder Funds for   | 6155 El Ca       | mino Real   | Carlsbad, CA               | 92009   |                                     |                               |                    |
| Campaign Expenditures  |                  |   |                            |   |                                     |                               |                    |
| TYPE OF<br>EXPENDITURE   | X                | Political   | [                          | Non-Po  | litical                             |                               |                    |
| PURPOSE<br>OF<br>EXPENDITURE                                       | Categor<br>Fees  | y (See Categorie  | s listed at the top of th  | is schedule)  | Description<br>Fe                   | ee                            |                    |
|  |                  | Check if travel ou  | itside of Texas. Complet   | te Schedule T.  | Check if Au                         | stin, TX, officeholder living | g expense          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH         |                  | didate / Office<br>District 13  | eholder name               |   | ffice sought<br>Council District 13 | Office h<br>Council Distri    |                    |
|  |                  |   |                            |   |                                     |                               |                    |
|  | ATTAC            | H ADDITIO   | NAL COPIES                 | OF THIS S   | CHEDULE AS NE                       | EDED                          |                    |

# **EXPENDITURES MADE BY CREDIT CARD**

# SCHEDULE **F4**

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

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

| ,    | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/Donations Made By<br>Candidate/Officeholder/Politica |  | Office Over<br>Polling Exp<br>Printing Ex |                                     | Solicitation/Fundraisin<br>Transportation Equipm<br>Travel In District<br>Travel Out Of District<br>Other (enter a category | ent & Related Expense |
|------|---|--|---|-------------------------------------|---|-----------------------|
|      |   | The Instruction Guide expla                                    | ins how to co                             | omplete this form.                  |   |                       |
| 1    | Total pages Schedule F4: 2 of 2   | 2 FILER NAME Gay Willis  |   |                                     | 3 Filer ID (Ethics C  | ommission Filers)     |
| 4    | TOTAL OF UNITEMI  | IZED EXPENDITURES CHARGEI                                      | OTOACR                                    | EDIT CARD                           | \$  |                       |
| 5    | Date  | 6 Payee name   |   |                                     |   |                       |
|      | 04/25/2023  | Office Depot   |   |                                     |   |                       |
| 7    | Amount (\$) 466.52  | 8 Payee address;   |   | City;                               | State;  | Zip Code              |
| Offi | ceholder Funds for  | 8317 Westchester Dallas, TX 75                                 | 225                                       |                                     |   |                       |
| Can  | npaign Expenditures   |  |   |                                     |   |                       |
| 9    | TYPE OF<br>EXPENDITURE  | X Political  | Non-Po                                    | litical                             |   |                       |
| 10   |   | (a) Category (See Categories listed at the top of the Supplies | is schedule)                              | (b) Description                     | ıpplies   |                       |
|      | PURPOSE<br>OF   |  |   |                                     | -FF   |                       |
|      | EXPENDITURE   |  |   |                                     |   |                       |
|      |   | (c) Check if travel outside of Texas. Complet                  | e Schedule T.                             | Check if Aus                        | stin, TX, officeholder living   | expense               |
|      | omplete <u>ONLY</u> if direct<br>penditure to benefit C/OH  | Candidate / Officeholder name<br>Dallas City Council D13       |   | ffice sought<br>Council District 13 | Office he<br>Council Distric  |                       |
|      | Date  | Payee name   |   |                                     |   |                       |
|      | Amount (\$)   | Payee address;   |   | City;                               | State;  | Zip Code              |
|      | TYPE OF<br>EXPENDITURE  | Political  | Non-Po                                    | olitical                            |   |                       |
|      |   | Category (See Categories listed at the top of the              | nis schedule)                             | Description                         |   |                       |
|      | PURPOSE   |  |   |                                     |   |                       |
|      | OF<br>EXPENDITURE   |  |   |                                     |   |                       |
|      |   | Check if travel outside of Texas. Comple                       | te Schedule T.                            | Check if Au                         | stin, TX, officeholder living   | expense               |
|      | complete <u>ONLY</u> if direct<br>expenditure to benefit C/OH   | Candidate / Officeholder name                                  | 0   | ffice sought                        | Office he   | eld                   |
|      |   |  |   |                                     |   |                       |
|      |   | ATTACH ADDITIONAL COPIES                                       | OF THIS S                                 | CHEDULE AS NE                       | EDED  |                       |