CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed: 81	OFFICE USE ONLY	
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Ten	SUFFIX	Date Received	
4	ORIGINAL REPORT TYPE	X 30th day before election 15t ap	onoff Other (specify) reeded \$500 limit h day after treasurer pointment (officeholder only) al report	Date Hand-delivered or Date Postmarked Receipt # Amount \$	
5	ORIGINAL PERIOD COVERED	Month Day Year 01 / 01 / 2019 Th	Month Day Year HROUGH 03 / 25 / 2019	Date Processed Date Imaged	
6	EXPLANATION OF CO	RRECTION			
	Returned both 5/17/17 \$1,000 contributions (eachtotaling \$2,000)to John Hamilon and Sarah Hamilton on 3/25/19				
7	7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.				
		Check C	ONLY if applicable:		
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.				
			* * * Flantania III. O autilia	J * * *	
* * * Electronically Certified * * * AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder					
			Officeholder		
		d before me, by the said		nday ofApril,	
	20, to certify	which, witness my hand and seal of office	ce.		
_	Signature of officer adr	ministering oath Printed	d name of officer administering oath	Title of officer administering oath	
	Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 81	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Tennell	MI	OFFICE USE ONLY	
NAME	NICKNAME LAST Atkins	SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS		Oallas TX 75237		
Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (469) 417 8939	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt # Amount \$	
NAME	Mrs Velma NICKNAME LAST		Date Processed	
	Milliner	GG. 1 JA	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 1407 Laura Lane	JITE #; CITY; STATE; Dallas TX 75241	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 371 7482	EXTENSION		
9 REPORT TYPE	January 15 X 30th day before electrical July 15 Sth day before electrical Sth day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month Day Year 01 / 01 / 2019	THROUGH 03	Day Year 25 2019	
11 ELECTION	Month Day Year Primary 05 / 04 / 2019 X General	ELECTION TYPE Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any) District 8	13 OFFICE SOUGHT (if known Council District 8		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME		15	Filer ID (Ethics Commission Filers)
Tennell Atkins			
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITUIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITH INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS URES.	HOUT THE CANDIDATE'S OR OFFICEHOLDER'S
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
	SPECIFIC	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
Additional Pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 46040.00
		POLITICAL EXPENDITURES OF \$100 OR LESS, BITEMIZED	\$ 0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$ 60909.04
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DON'T PERIOD	\$ 27255.85
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	\$ 30181.00
18 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	
		ELECTRONICALLY CI	ERTIFIED
		Signature of Candi	date or Officeholder
AFFIX NOTARY STAM	P/SEALABOVE		
Sworn to and subsc	ribed before me, t	by the said Tennell Atkins	, this the _5th
day of <u>April</u>	, 2019,	to certify which, witness my hand and seal of office.	
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER N	mmission Filers)			
T					
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE				
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 46,040.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00	
4.		SCHEDULE E: LOANS		\$ 0.00	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 60,909.04	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00	
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	IDS	\$ 0.00	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0.00	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 0.00	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT RETURNED TO FILER	IONS	\$ 0.00	

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 1 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2019	Hiawatha Williams 6 Contributor address; City; State;	Zip Code	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date 02/08/2019	Dallas Police Officer PAC Contributor address; City; State;	(ID#:) Zip Code TX 75215	Amount of contribution (\$) 500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/01/2019	Alan & Joan Walne Contributor address; City; State;	Zip Code TX 75238	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/01/2019	Ronald G Steinhart Contributor address; City; State;		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 2 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor uut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
02/06/2019	Gilbert Aranza		1000.00
	6 Contributor address; City; State;	Zip Code	
	P.O. Box 601527 Dallas,	ΓX 75360-1527	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/11/2019	Dr Charles Ku		500.00
	Contributor address; City; State;	Zip Code	
	148 Red Oak Lane Flower	Mound, TX 75028	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
01/28/2019	John Field Scovell		500.00
	Contributor address; City; State; 6322 De Loache Dallas,	Zip Code ΓX 75225	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/16/2019	Afisu Ollabimtan		500.00
		Zip Code ΓΧ 76264-2789	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 3 of 19		
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)		
4 Date 02/27/2019	DELVA KING 6 Contributor address; City; State;	(ID#:) Zip Code TX 77777	7 Amount of contribution (\$) 100.00		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)		
Date 02/04/2019	Full name of contributor out-of-state PAC Carl Sewell Contributor address; City; State; 3860 W Northwest Hwy Suite 102 Dallas,		Amount of contribution (\$) 1000.00		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date 02/11/2019	Michael Rader Contributor address; City; State;	Zip Code ille, TX 76034	Amount of contribution (\$) 500.00		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)		
Date 02/04/2019			Amount of contribution (\$) 500.00		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 4 of 19	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Tennell Atkins				
4 Date	5 Full name of contributor ut-of-state PAC (I	ID#:)	7 Amount of contribution (\$)	
02/08/2019	Apartment Association of Greater Dallas -PAC	C	2500.00	
	6 Contributor address; City; State;	Zip Code		
	5728 LBJ Frwy Suite 100 Dallas, T	TX 75240		
6 5: : :				
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor	ID#:)	Amount of contribution (\$)	
02/25/2010	Johnnie M Green		25.00	
02/25/2019		Zin Codo	25.00	
	•	TX 75241-3582		
	1.0. Dox 411436 Dailas, 1	.X 73241-3362		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
D . 1				
Date		ID#:)	Amount of contribution (\$)	
01/29/2019	Dalton L Lott		1000.00	
	Contributor address; City; State;	Zip Code		
	P.O. Box 765209 Dallas, T	TX 75376-5209		
D				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)	
Date	Full name of contributor ut-of-state PAC (I	ID#:)	Amount of contribution (\$)	
03/23/2019	Black Firefighter United PAC	,	500.00	
03/23/2019	Contributor address: City: State:	Zin Codo	500.00	
		TX 75215-2751		
	•			
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ons)	
	-			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2019	Ronald G Parrish 6 Contributor address; City; State:	; Zip Code , TX 75115	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 01/31/2019	Thomas M Dunning Contributor address; City; State		Amount of contribution (\$) 200.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 01/14/2019	Brian Dennison Contributor address; City; State;	Zip Code TX 75208	Amount of contribution (\$) 350.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 02/02/2019	John Soo Chong Contributor address; City; State	(ID#:) ; Zip Code 1, TX 75019	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 6 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2019	Patricia L Jackson 6 Contributor address; City; State;	Zip Code X 75237-3209	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) 9 Employer (Se			ions)
Date 02/11/2019	Joseph Kemp Contributor address; City; State; 1015 N Duncanville Rd Duncanv	Zip Code ille, TX 75116	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/11/2019	Dorothy Berry Hughes Contributor address; City; State;	Zip Code X 75241-6431	Amount of contribution (\$) 25.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/10/2019	Full name of contributor Vaugh Thompson Contributor address; P.O. Box 561527 Contributor address; Dallas, T		Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 7 of 19
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Tennell Atkins		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/11/2019	Helen Giddings	350.00
02,11,201,	6 Contributor address; City; State; Zip Code	
	400 S Zang Blvd Suite 1018 Dallas, TX 75208-684	13
8 Principal occu	upation / Job title (See Instructions) 9 Employer (S	See Instructions)
<u> </u>		
Date	Full name of contributor	Amount of contribution (\$)
02/11/2019	Perfect Hospitality Solutions LLC	600.00
02, 11, 201,	Contributor address; City; State; Zip Code	
	4300 Mansfield Hwy Forest Hill, TX 76119	ı
Principal occur	pation / Job title (See Instructions) Employer (\$	See Instructions)
		·
Date	Full name of contributor	Amount of contribution (\$)
02/11/2019	R Gerald Turner	100.00
02,11,201	Contributor address; City; State; Zip Code	
	4001 University Dallas, TX 75205	
Principal occu	pation / Job title (See Instructions) Employer (S	See Instructions)
Date	Full name of contributor	A Secretalization (D)
02/11/2019	Full name of contributor out-of-state PAC (ID#: A. A. Long	Amount of contribution (\$) 20.00
	Contributor address; City; State; Zip Code 1517 Gailbrook Lane Dallas, TX 75228	
Principal occu	pation / Job title (See Instructions) Employer (S	See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 19		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Tennell Atkins					
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)		
02/11/2019	Mary C Choutka		10.00		
	6 Contributor address; City; State;	Zip Code			
	1331 Aldenwood Drive Dallas,	TX 75232			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)		
02/08/2019	Y Thompson		10.00		
	Contributor address; City; State;	Zip Code			
	6132 Balcony Lane Dallas,	TX 75241			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)		
02/01/2019	Bruce A Stern		1000.00		
	Contributor address; City; State; 37 Commonwealth Dr Lakewo	Zip Code ood, NJ 87010-4168			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date	Full name of contributor	(ID#·	Amount of contribution (\$)		
02/02/2019	Jackie Bewley	(10#)	1000.00		
		Zip Code orth, TX 76104			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 9 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 03/21/2019	5 Full name of contributor ☐ out-of-state PAC (IE John Wiley Price Campaign 6 Contributor address; City; State; 510 E 8th St Dallas, T.	Zip Code	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/13/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/17/2019	Jacob Johnson Contributor address; City; State;	Zip Code TX 75115	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/25/2019	Full name of contributor Jeffrey M Tillotson P.C Contributor address; 1807 Ross Avenue Out-of-state PAC (IE Out-of-state PAC (IE Dallas, T.		Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 10 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	Donald J McNamara 6 Contributor address; City; State;	(ID#:) Zip Code TX 75219	7 Amount of contribution (\$) 500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 02/06/2019	Jewel K Parrish Contributor address; City; State;	(ID#:) Zip Code TX 75115	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/06/2019	Ann Kim Contributor address; City; State;	Zip Code TX 75038	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/13/2019	Eddie Reeves Contributor address; City; State;		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 11 of 19				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Tennell Atkins				
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
02/12/2019	Trelaine M Mapp		500.00	
	6 Contributor address; City; State;	Zip Code		
	12612 Beech Tree Ln Euless, 7	ГХ 76040-3428		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/12/2019	William Ming Tzong		800.00	
02/12/2019	Contributor address; City; State;	Zip Code	800.00	
		ΓX 75252-2702		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
		. , .	,	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
02/05/2019	Ryan Garcia		50.00	
	Contributor address; City; State;	Zip Code		
	165 Cameron Dr Weston,	FL 33326		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/05/2019	Johnny Aguinaga		250.00	
		Zip Code ΓX 75205-204		
Principal occup	aation / Job title (See Instructions)	Employer (See Instruct	ions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 12 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/05/2019	Irahim Haddad 6 Contributor address; City; State;	Zip Code TX 75287-7219	7 Amount of contribution (\$) 250.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 02/07/2019	Evelyn Conner Hicks Contributor address; City; State;		Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/04/2019	Donald W Hicks Sr Contributor address; City; State;	Zip Code TX 75206-8057	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 01/31/2019	Diane Ragsdale Contributor address; City; State;	(ID#:) Zip Code TX 75216	Amount of contribution (\$) 250.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 13 of 19				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Tennell Atkins					
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)		
02/04/2019	Pettis Norman		500.00		
	6 Contributor address; City; State;	Zip Code			
	1430 Bar Habor Circle Dallas, T	TX 75232			
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)		
01/31/2019	Dough Hunt		1000.00		
	Contributor address; City; State;	Zip Code			
	3404 N Interstate 35-E Lancaste	er, TX 75134			
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)		
Date	Full name of contributor ut-of-state PAC (I	D#:)	Amount of contribution (\$)		
02/01/2019	Demetris Sampson		1000.00		
02/01/2019	- 	7: 0 1	1000.00		
	Contributor address; City; State; P.O. Box 2252 Dallas, T	Zip Gode TX 75223			
	1.0. DOX 2232 Damas, 1	A 13223			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)		
02/08/2019	Dallas Black Firefighter Retiree-PAC		500.00		
02,00,2019	Contributor address; City; State;	Zin Codo			
		X 75222-6983			
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 14 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/01/2019	Brenda Walker 6 Contributor address; City; State;	Zip Code ΓX 76040	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/01/2019	Full name of contributor □ out-of-state PAC (II M Rideau Contributor address; City; State; 10000 SMU Bx 75-3183 Dallas, T	Zip Code	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/06/2019	Full name of contributor	·	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/11/2019	Robert E Hasty Contributor address; City; State;		Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 15 of 19	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date		(ID#:)	7 Amount of contribution (\$)
01/28/2019	Laurie L Hasty		1000.00
	6 Contributor address; City; State;	; Zip Code	
	4210 Beaver Book Place Dallas,	TX 75229	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/16/2019	Lawrence E Siegel		1000.00
02/10/2019	Contributor address; City; State	; Zip Code	1000.00
	5604 Palomar Lane Dallas,	TX 75229-6418	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
02/05/2019	Brian Schwartz		1000.00
	Contributor address; City; State;	; Zip Code	
	6606 Briar Cove Dallas,	TX 75240	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
02/04/2019	General Drivers Warehousemen and Helpers		500.00
	Contributor address; City; State	; Zip Code	
		TX 75217	
Principal occupation / Job title (See Instructions) Employer (See Instructions)			
,			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 16 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:) Coats Rose P.C. 6 Contributor address; City; State; Zip Code 9 Greenway Plaza Suite 1100 Houston, TX 77046		Zip Code	7 Amount of contribution (\$) 500.00
8 Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/04/2019	Ruth Dade Contributor address; City; State;	D#:) Zip Code X 75241-3726	Amount of contribution (\$) 25.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/08/2019	Paul Hauang Contributor address; City; State;	Zip Code on, TX 75080	Amount of contribution (\$) 50.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/25/2019	Gerald Alley Contributor address; City; State;		Amount of contribution (\$) 1000.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 17 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2019	5 Full name of contributor □ out-of-state PAC (ID# Lucious L Williams 6 Contributor address; City; State; 1421 Covinngton Dr □ Desoto, TX	Zip Code	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 03/23/2019			Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date 02/11/2019	Full name of contributor	·	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/31/2019	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 18 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 01/17/2019	Maria E Garcia 6 Contributor address; City; States	; Zip Code TX 75206-4724	7 Amount of contribution (\$) 100.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 02/02/2019	Larry L Offutt Contributor address; City; State	e; Zip Code TX 75206-8002	Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/05/2019	Johnny King Contributor address; City; State;	; Zip Code b, TX 75115	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/05/2019	Delva King Contributor address; City; State	c; Zip Code b; TX 75115	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 19 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor ut-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
02/11/2019	Jim S Lake Jr		1000.00
	6 Contributor address; City; State;	Zip Code	
	1704 W Colorado Blvd Dallas, T	X 75208	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Contributor address; City; State;		
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Contributor address; City; State;	Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (IE)#:)	Amount of contribution (\$)
Contributor address; City; State; Zip Code			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
	ATTACH ADDITIONAL COPIES OF 1	THIS SCHEDULE AS NE	EDED

SCHEDULE F1

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.
1 Total pages Schedule F1: 1 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Ruth Dade	·
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Worker
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/09/2019	Ronald Wright	
Amount (\$) 100.00	Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/15/2019	Payee name Ronald Wright	
Amount (\$) 100.00	Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Credit Card Payment	The Instruction Guide explains how to a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2019	5 Payee name Ronald Wright		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Ronald Wright		
Amount (\$) 100.00	Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Odell Lee		
Amount (\$) 192.00	Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)
1 Total pages Schedule F1: 3 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2019	5 Payee name CCP Printing		
6 Amount (\$) 2221.71	7 Payee address; City; State; Zip Code 5534 S Hampton Road Dallas, TX 75232		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/15/2019	Payee name Toni Scroggins		
Amount (\$) 750.00	Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 03/22/2019	Payee name Eula Grant		
Amount (\$) 45.00	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T. 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

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

Candidate/Officeholder/Politica	al Committee Legal Service	es Salaries/	Wages/Contract Labor	Other (enter a category not listed above)	
Credit Card Payment	The Instru	iction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 4 of 59	2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)	
4 Date 03/08/2019	5 Payee name Juanita Ayala				
6 Amount (\$) 60.00	7 Payee address; 3037 O Bannon Dr	City; State; Zip Code Dallas, TX 75224			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categorie Salaries/Wages/Contra	es listed at the top of this schedule)		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeh	older name	Office sought	Office held	
Date 02/15/2019	Payee name Gail Terrell				
Amount (\$) 500.00	Payee address; P.O. Box 41561	City; State; Zip Code Dallas, TX 75241			
PURPOSE OF EXPENDITURE	Category (See Categorie Salaries/Wages/Contra	es listed at the top of this schedule)		tside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeh Gail Terrell	older name	Office sought	Office held	
Date 03/11/2019	Payee name Gail Terrell				
Amount (\$) 600.00	Payee address; P.O. Box 41561	City; State; Zip Code Dallas, TX 75241			
PURPOSE OF EXPENDITURE	Category (See Categorie Salaries/Wages/Contra	es listed at the top of this schedule) ct Labor		ntside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officel Gail Terrell	older name	Office sought	Office held	
	ATTACH ADD	TIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 5 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Gail Terrell	<u> </u>
6 Amount (\$) 650.00	7 Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Manager
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Gail Terrell	Office sought Office held
Date 03/01/2019	Payee name Gail Terrell	
Amount (\$) 788.00	Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Manager
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Gail Terrell	Office sought Office held
Date 03/01/2019	Payee name Democracy Toolbox	
Amount (\$) 4000.00	Payee address; City; State; Zip Code 8813 Falcon Crest Dr McKinney, TX 75072	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consultation
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 F 6 of 59	1: 2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2019	5 Payee name Black Premier Ent. Network	,
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising
9 Complete ONLY if direct expenditure to benefit C/v	Candidate / Officeholder name OH	Office sought Office held
Date 02/01/2019	Payee name Black Premier Ent. Network	
Amount (\$) 150.00	Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought Office held
Date 02/20/2019	Payee name The Order Desk	
Amount (\$) 2264.80	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 1024allas, TX 75220	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/0	Candidate / Officeholder name DH	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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.	outer (other a dataget) hethere above)
1 Total pages Schedule F1: 7 of 59	- -		3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2019	5 Payee name Paul Wiley		
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 139 allas, TX 75217		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/15/2019	Payee name Paul Wiley		
Amount (\$) 50.00	Payee address; City; State; Zip Code 125 S Murdeaux Suite 1333allas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Paul Wiley		
Amount (\$) 50.00	Payee address; City; State; Zip Code 125 S Murdeaux Suite 1333allas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dataget) hethere above)
1 Total pages Schedule F1: 8 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Paul Wiley		
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 139 allas, TX 75217		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Margot Williams		
Amount (\$) 50.00	Payee address; City; State; Zip Code 17517 Olusta Drive Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 02/09/2019	Payee name Jackie Wheeler		
Amount (\$) 50.00	Payee address; City; State; Zip Code 7516 Olusta Drive Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
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

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.	Cario. (Cino. a datego.) Hermotea above)
1 Total pages Schedule F1: 9 of 59	- -		3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2019	5 Payee name Kimberly Green		I
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 2052 Royal Lane Suite 1 204 llas, TX 75229		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/09/2019	Payee name Andre Luster		
Amount (\$) 120.00	Payee address; City; State; Zip Code 2052 Royal Lane Suite 120fflas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/09/2019	Payee name Tahvio Luster		
Amount (\$) 80.00	Payee address; City; State; Zip Code 2052 Royal Lane Suite 1 20 filas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. 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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 10 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2019	5 Payee name Cedric Thompson	·
6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
03/08/2019	Ruth Dade	
Amount (\$) 162.50	Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 03/22/2019	Payee name Ruth Dade	
Amount (\$) 197.50	Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2019	5 Payee name Ruth Dade	<u> </u>
6 Amount (\$) 240.00	7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 02/22/2019	Payee name Connie Buford	
Amount (\$) 90.00	Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 03/01/2019	Payee name Connie Buford	
Amount (\$) 187.50	Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 12 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/06/2019	5 Payee name Connie Buford		
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/08/2019	Payee name Eula Grant		
Amount (\$) 92.50	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Eula Grant		
Amount (\$) 175.00	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
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

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 a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 13 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Detra Reeves		
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/25/2019	Payee name Detra Reeves		
Amount (\$) 37.50	Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Detra Reeves		
Amount (\$) 55.00	Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 14 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Robernett Jones		
6 Amount (\$) 80.00	7 Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought	Office held
Date 03/08/2019	Payee name Robernett Jones		
Amount (\$) 30.00	Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/01/2019	Payee name Robernett Jones		
Amount (\$) 160.00	Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 15 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Odell Lee	
6 Amount (\$) 90.00	7 Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date 03/01/2019	Payee name Shenigua Jones	
Amount (\$) 117.50	Payee address; City; State; Zip Code 4210 Hatcher st Dallas, TX 75210	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date 03/08/2019	Payee name Shenigua Jones	
Amount (\$) 20.00	Payee address; City; State; Zip Code 4210 Hatcher st Dallas, TX 75210	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie	s/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	o complete this form.	
1 Total pages Schedule F1: 16 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Lakisha Grandy		
6 Amount (\$) 195.00	7 Payee address; City; State; Zip Code 1414 Bellevview St Suite Dkates, TX 75215		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought	Office held
Date 02/22/2019	Payee name Brenda Lee Barnes		
Amount (\$) 30.00	Payee address; City; State; Zip Code 400 E Wintergreen Rd Subtes8423, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/16/2019	Payee name Fast Signs		
Amount (\$) 268.90	Payee address; City; State; Zip Code 6940 Marvin D Love FrwDyallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		outside of Texas. Complete Schedule T. 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 TH	IS SCHEDULE AS NE	EDED

SCHEDULE F1

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.	
1 Total pages Schedule F1: 17 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2019	5 Payee name Fast Signs		
6 Amount (\$) 526.23	7 Payee address; City; State; Zip Code 6940 Marvin D Love FrwDallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/24/2019	Office Depot		
Amount (\$) 148.79	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237-3526		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Metro PCS		
Amount (\$) 200.00	Payee address; City; State; Zip Code 3333 W Camp Wisdom Rallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 18 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/2019	5 Payee name Metro PCS		
6 Amount (\$) 238.08	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Roballas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		phone Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2019	Tennell Atkins Metro PCS		
Amount (\$) 200.00	Payee address; City; State; Zip Code 3333 W Camp Wisdom RDallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin.	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/17/2019	Tennell Atkins Metro PCS		
Amount (\$) 207.77	Payee address; City; State; Zip Code 3333 W Camp Wisdom Rollas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 19 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2019	5 Payee name Office Depot		
6 Amount (\$) 9.61	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/21/2019	Payee name Office Depot		
Amount (\$) 13.64	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/16/2019	Payee name Office Depot		
Amount (\$) 15.47	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , 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

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 20 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/13/2019	5 Payee name Office Depot		
6 Amount (\$) 27.00	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/10/2019	Payee name Office Depot		
Amount (\$) 102.81	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/16/2019	Payee name Office Depot		
Amount (\$) 118.77	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie	s/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how t	o complete this form.	
1 Total pages Schedule F1: 21 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/02/2019	5 Payee name Office Depot		
6 Amount (\$) 122.28	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237	,	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date 02/17/2019	Payee name Office Depot		
Amount (\$) 130.65	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237	,	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/24/2019	Payee name Office Depot		
Amount (\$) 148.79	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237)	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. 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 TH	IS SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dataget) hethere above)
1 Total pages Schedule F1: 22 of 59	·	•	3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2019	5 Payee name Office Depot		
6 Amount (\$) 157.56	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/24/2019	Payee name Office Depot		
Amount (\$) 269.96	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/18/2019	Payee name Dollar Tree Store 2076		
Amount (\$) 20.32	Payee address; City; State; Zip Code 4241 W Camp Wisdom Roba Buste FAX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. I, 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 23 of 59	2 FILER NAME Tennell Atkins	3	Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Every Season		
6 Amount (\$) 6.20	7 Payee address; City; State; Zip Code 544 Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		le of Texas. Complete Schedule T. X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/28/2019	Payee name Target		
Amount (\$) 26.30	Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		e of Texas. Complete Schedule T. K, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Dollar Deals		
Amount (\$) 9.70	Payee address; City; State; Zip Code 3207 E Kirnwood Suite ID9Ilas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		e of Texas. Complete Schedule T. K, 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 NEED	ED

SCHEDULE F1

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.	
1 Total pages Schedule F1: 24 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name Dollar Tree Store 5915		
6 Amount (\$) 27.06	7 Payee address; City; State; Zip Code 1005 S Cockrell Hill Rd Shailles & Oll X 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/04/2019	Payee name Party City		
Amount (\$) 22.68	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4 10 allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/04/2019	Payee name Wal Mart		
Amount (\$) 28.83	Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , 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

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 25 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2019	5 Payee name Wal Mart		
6 Amount (\$) 58.50	7 Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/17/2019	Payee name Wal Mart		
Amount (\$) 291.57	Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/20/2019	Payee name Sams Wholesale Club		
Amount (\$) 255.48	Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 26 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2019	5 Payee name Walgreens Store 05920		
6 Amount (\$) 9.98	7 Payee address; City; State; Zip Code 1060 W Camp Wisdom Rahllas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/17/2019	Payee name Tennell Atkins Wireless Stop		
Amount (\$) 448.00	Payee address; City; State; Zip Code 3333 W Camp Wisdom Roballas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/17/2019	Payee name SAMS		
Amount (\$) 400.60	Payee address; City; State; Zip Code 2900 W WHEATLAND Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 27 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/21/2019	5 Payee name Chaarco Broiler Steak House		
6 Amount (\$) 22.92	7 Payee address; City; State; Zip Code 413 W Jefferson Blvd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/23/2019	Rice Garden		
Amount (\$) 33.00	Payee address; City; State; Zip Code 4016 W Camp Wisdom Rahllas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/22/2019	Payee name Lisa Soul Food Cafe		
Amount (\$) 55.47	Payee address; City; State; Zip Code 2550 W Redbird Lane Suline TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 28 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/08/2019	5 Payee name Delta Charlies Bar & Grill		
6 Amount (\$) 28.12	7 Payee address; City; State; Zip Code 5303 Challenger Suite 6(Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/11/2019	Outback Steakhouse Store 4475		
Amount (\$) 31.06	Payee address; City; State; Zip Code 7707 N Interstate 35-E Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/05/2019	Payee name Dunkin Donuts		
Amount (\$) 4.12	Payee address; City; State; Zip Code 650 Uptown Blvd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 29 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2019	5 Payee name Colters TX BBQ		
6 Amount (\$) 31.28	7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rahllas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/27/2019	Payee name Tennell Atkins Pizza Hut		
Amount (\$) 14.36	Payee address; City; State; Zip Code 3333 W Camp Wisdom Rahahuste IM 65237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/26/2019	Payee name Saltgrass		
Amount (\$) 49.42	Payee address; City; State; Zip Code 747 North Highway 67 Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a dataget) hethere above)
1 Total pages Schedule F1: 30 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2019	5 Payee name McDonalds		
6 Amount (\$) 2.91	7 Payee address; City; State; Zip Code 125 W Camp Wisdom R Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/22/2019	Payee name JJ Fish and Chicken		
Amount (\$) 20.00	Payee address; City; State; Zip Code 3302 W Camp Wisdom Rallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/18/2019	Payee name JJ Fish and Chicken		
Amount (\$) 21.10	Payee address; City; State; Zip Code 3302 W Camp Wisdom Rallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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: 31 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers	;)
4 Date 02/11/2019	5 Payee name El Fenix	·	
6 Amount (\$) 28.61	7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date 01/15/2019	Payee name El Fenix		
Amount (\$) 32.39	Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 02/11/2019	Payee name El Fenix		
Amount (\$) 303.10	Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)
1 Total pages Schedule F1: 32 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/11/2019	5 Payee name El Fenix		
6 Amount (\$) 1551.92	7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/06/2019	Payee name Lubys		
Amount (\$) 32.97	Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/02/2019	Payee name Lubys		
Amount (\$) 38.92	Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. 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

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 33 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2019	5 Payee name Chilis		
6 Amount (\$) 17.36	7 Payee address; City; State; Zip Code 2503 W Wheatland Suite DallOss, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T.
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/20/2019	Payee name Chilis		
Amount (\$) 5.41	Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/17/2019	Payee name Chilis		
Amount (\$) 9.72	Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (office a dataget) not not de above)
1 Total pages Schedule F1: 34 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2019	5 Payee name Chilis		
6 Amount (\$) 18.79	7 Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/10/2019	Payee name Chilis		
Amount (\$) 28.77	Payee address; City; State; Zip Code 2503 W Wheatland Suite Dal 106s, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/10/2019	Payee name KFC		
Amount (\$) 8.96	Payee address; City; State; Zip Code 3415 W Camp Wisdom Rallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T.
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

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.	
1 Total pages Schedule F1: 35 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/20/2019	5 Payee name KFC		
6 Amount (\$) 32.32	7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Roballas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/19/2019	Payee name The Island Spot		
Amount (\$) 72.20	Payee address; City; State; Zip Code 309 W Jefferson Blvd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/08/2019	Payee name Shell		
Amount (\$) 37.27	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 36 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2019	5 Payee name Shell		
6 Amount (\$) 42.74	7 Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/05/2019	Payee name Shell		
Amount (\$) 42.83	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/07/2019	Payee name Shell		
Amount (\$) 51.98	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	S/Wages/Contract Labor Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 37 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 01/30/2019	5 Payee name Murphy USA		
6 Amount (\$) 1.78	7 Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date 01/30/2019	Payee name Murphy USA		
Amount (\$) 33.45	Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date 01/31/2019	Payee name Murphy USA		
Amount (\$) 45.38	Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description 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	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

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.	Other (enter a category not listed above)
1 Total pages Schedule F1: 38 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/25/2019	5 Payee name Joe Pool Station		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 5521 S Hampton Road Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/03/2019	Payee name Highland Hills Station		
Amount (\$) 250.00	Payee address; City; State; Zip Code 3655 Simpson Stuart Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T.
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/23/2019	Payee name Edward Gray		
Amount (\$) 175.00	Payee address; City; State; Zip Code 2225 East Randol Mill Subtell48,7TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salari	es/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how	to complete this form.	
1 Total pages Schedule F1: 39 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/15/2019	5 Payee name Edward Gray		
6 Amount (\$) 175.00	7 Payee address; City; State; Zip Cod 2225 East Randol Mill SiDtel 142,7TX 75237	е	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Advertising Expense	Check if travel o	outside of Texas. Complete Schedule T. in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought	Office held
Date 02/15/2019	Payee name Ernest Slaughter		
Amount (\$) 1500.00	Payee address; City; State; Zip Cod 2759 Meadow Dawn Ln Dallas, TX 75237	е	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date 02/04/2019	Payee name A Squared Advertising		
Amount (\$) 600.00	Payee address; City; State; Zip Cod 539 W Commercece Suit Dall 6s, TX 75237	ie	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NE	EDED

SCHEDULE F1

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 a	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 40 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/04/2019	5 Payee name A Squared Advertising		
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 539 W Commerce Suite 4 % Ilas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/23/2019	Payee name A Squared Advertising		
Amount (\$) 500.00	Payee address; City; State; Zip Code 539 W Commerce Suite 4940las, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 02/22/2019	Payee name Ed Valentine Booker Industries		
Amount (\$) 1896.89	Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		ntside of Texas. Complete Schedule T.
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 41 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/28/2019	5 Payee name Ed Valentine Booker Indusgtries		
6 Amount (\$) 430.63	7 Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/24/2019	Payee name Reilly Echols Printing		
Amount (\$) 1293.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/24/2019	Payee name Reilly Echols Printing		
Amount (\$) 7361.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		ntside of Texas. Complete Schedule T.
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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 42 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2019	5 Payee name Master Mark Advertising Agency		
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/16/2019	Payee name Master Mark Advertising Agency		
Amount (\$) 3000.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/01/2019	Payee name CWRD Properties LLC		
Amount (\$) 1150.00	Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T.
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 43 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/01/2019	5 Payee name CWRD Properties LLC		
6 Amount (\$) 1150.00	7 Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite Dal Das, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 02/03/2019	Payee name Ms CAS		
Amount (\$) 487.13	Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 03/15/2019	Payee name Ms CAS		
Amount (\$) 1351.13	Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 44 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/06/2019	5 Payee name Ms. CAS		
6 Amount (\$) 2269.38	7 Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/23/2019	Payee name Ms. CAS		
Amount (\$) 4752.18	Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 01/15/2019	Payee name ATT		
Amount (\$) 620.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-5014		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		side of Texas. Complete Schedule T. 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	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)
1 Total pages Schedule F1: 45 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/15/2019	5 Payee name ATT		
6 Amount (\$) 675.00	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/15/2019	Payee name ATT		
Amount (\$) 682.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/02/2019	Payee name Jefferson Monuent LLC		
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. I, 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

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

Gredit Card Payment	The Instruction Guide explains how to o	complete this form.	
1 Total pages Schedule F1: 46 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/03/2019	5 Payee name Jefferson Monument LLC		
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/02/2019	Payee name Jefferson Monument LLC		
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 03/16/2019	Payee name Chubbys		
Amount (\$) 23.62	Payee address; City; State; Zip Code 7474 S Cockrell Hill Dallas, TX 75236		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ntside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 47 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)	
4 Date 03/17/2019	5 Payee name LUBYS		
6 Amount (\$) 28.11	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
Date	Payee name		
03/13/2019	Chilis Grill		
Amount (\$) 24.01	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8	
Date 03/19/2019	Payee name Chilis Grill		
Amount (\$) 38.09	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description County School T	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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: 48 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2019	5 Payee name Olive Garden	1
6 Amount (\$) 27.14	7 Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/12/2019	Payee name Lisa Soul Food Cafe	
Amount (\$) 32.48	Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/04/2019	Payee name Lisa Soul Food Cafe	
Amount (\$) 21.11	Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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.
1 Total pages Schedule F1: 49 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2019	5 Payee name Wingstop	
6 Amount (\$) 38.53	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Rahllas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/10/2019	Payee name Spring Creek BBQ	
Amount (\$) 24.03	Payee address; City; State; Zip Code 2827 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/01/2019	Payee name KFC	
Amount (\$) 32.32	Payee address; City; State; Zip Code 3415 W Camp Wisdom Rahllas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Vages/Contract Labor Other (enter a category not	listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 50 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Com	mission Filers)
4 Date 03/24/2019	5 Payee name Ojeda Family Restaurant		
6 Amount (\$) 41.41	7 Payee address; City; State; Zip Code 2109 N Hampton Rd Desoto, TX 75115		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expenses	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Offic Council District	e held 8
Date 03/22/2019	Payee name Cracker Barrel		
Amount (\$) 18.60	Payee address; City; State; Zip Code 1421 N Beckley Ave Desoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expens	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office Council District	e held 8
Date 02/20/2019	Payee name Starbucks		
Amount (\$) 22.46	Payee address; City; State; Zip Code 3420 W Camp Wisdom Rot allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expens	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office Council District	ce held 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 51 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2019	5 Payee name Outback Steakhouse	
6 Amount (\$) 24.35	7 Payee address; City; State; Zip Code 1101 N I-35 Interstate Desoto, TX 75115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date	Payee name	
03/07/2019	Outback Steakhouse	
Amount (\$) 77.10	Payee address; City; State; Zip Code 1101 N I-35 Interstate Desoto, TX 75115	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/22/2019	Payee name Saltgrass Steakhouse	
Amount (\$) 90.88	Payee address; City; State; Zip Code 747 N Hwy 67 Cedar Hill, TX 75104	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 52 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)	
4 Date 02/07/2019	5 Payee name Murphy USA			
6 Amount (\$) 33.92	7 Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8	
Date 03/03/2019	Payee name Murphy USA			
Amount (\$) 34.31	Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8	
Date 03/10/2019	Payee name Murphy USA			
Amount (\$) 48.91	Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 53 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/18/2019	5 Payee name Tiger Mart 86	<u> </u>
6 Amount (\$) 48.41	7 Payee address; City; State; Zip Code 116 N Jim Miller Rd Dallas, TX 75217	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/24/2019	Payee name Ingrams Service Station	
Amount (\$) 69.32	Payee address; City; State; Zip Code 3501 Simpson Stuart Rd Dallas, TX 75241	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense gas
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/03/2019	Payee name Shell	
Amount (\$) 46.89	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 54 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 01/19/2019	5 Payee name Office Depot	<u> </u>
6 Amount (\$) 32.45	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/23/2019	Payee name Office Depot	
Amount (\$) 185.09	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/23/2019	Payee name Office Depot	
Amount (\$) 469.52	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.
1 Total pages Schedule F1: 55 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 02/10/2019	5 Payee name Home Depot	
6 Amount (\$) 11.89	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/22/2019	Payee name Home Depot	
Amount (\$) 47.31	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/21/2019	Payee name Home Depot	
Amount (\$) 67.06	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.
1 Total pages Schedule F1: 56 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/17/2019	5 Payee name Home Depot	
6 Amount (\$) 42.94	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/22/2019	Payee name Target	
Amount (\$) 20.75	Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/25/2019	Payee name Target	
Amount (\$) 53.02	Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1: 57 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2019	5 Payee name Target	
6 Amount (\$) 51.32	7 Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/23/2019	Payee name Wal Mart	
Amount (\$) 50.37	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/13/2019	Payee name Wal Mart	
Amount (\$) 35.71	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 58 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2019	5 Payee name MDMC Gift Shop	
6 Amount (\$) 67.60	7 Payee address; City; State; Zip Code 1441 S Beckley Ave Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/09/2019	Payee name Wireless Shop	
Amount (\$) 206.00	Payee address; City; State; Zip Code 3333 W Camp Wisdom W allas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 02/26/2019	Payee name Uplift Academy	
Amount (\$) 180.00	Payee address; City; State; Zip Code 8915 S Hampton Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 59 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/25/2019	5 Payee name John Hamilton		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 325 N. St Paul Suite 335 Dallas, TX 75201		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other		outside of Texas. Complete Schedule T. n, TX, officeholder living expense atribution
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/25/2019	Payee name Sarah Hamilton		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 325 N. St. Paul Suite 335Dallas, TX 75201		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		utside of Texas. Complete Schedule T. n, TX, officeholder living expense atribution
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 OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T. 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 THI	S SCHEDULE AS NE	EDED

City Secretary's Office

Supplemen Officeholde	tal Report r		FOR Cover She	MSR etSR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST MI Tennell	2. Total Pages Filed: 79	
	NICKNAME	LAST SUFFIX Atkins	3. Office Held District 8	
4. SUPPLEMENTAL REPORT TYPE	c January 15	🗶 30th day before election c Runoff	c 15th day after camp treasurer appointmen (officeholder only)	
	c July 15	c 8th day before election c Exceeded \$ limit	\$500 c Final Report	
5. PERIOD / COVERED		1/1/2019 тнгоидн 3/25/20	19	
6. ELECTION	Month Day Year			
	5/4/2019	c Primary c Runoff	X General c Spe	cial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0.00		\$0.00
		2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$0.00		
	EXPENDITURE	3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$0.00		\$ 0.00
	TOTALS	4. TOTAL OFFICEHOLDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS	5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LOANS, OR GUARANTEES OF LOANS), UNLESS ITI		\$0.00
(Campaign)		6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 46,040.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00
	TOTALS	8. TOTAL POLITICAL EXPENDITURES		\$60,909.04
9. OFFICEHOLDER FUN FOR CAMPAIGN PUR		9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CO		\$ 0.00
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				
Sworn to and subscribed	before me, by the saidTel	nnell Atkins	, this the 5th	day
of April , 2	_{0_} 19, to certify which	ch, witness my hand and seal of office.		
Signature of officer ac	lministering oath	Printed name of officer administering oath	Title of officer add	ministering oath

SCHEDULE A1

The	Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A1: 1 of 19
2 FILER NAME		:	3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of contribution (\$)
02/01/2019	Hiawatha Williams		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	1141 Waaterview Lane Desoto, TX	X 75115	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)
Date	Full name of contributor	:)	Amount of contribution (\$)
02/08/2019	Dallas Police Officer PAC		500.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	1412 Griffin St East Dallas, TX	75215	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor	:)	Amount of contribution (\$)
02/01/2019	Alan & Joan Walne		250.00
Campaign Contribution	Contributor address; City; State; Z 10020 Caribou Trail Dallas, TX	•	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor	:)	Amount of contribution (\$)
02/01/2019	Ronald G Steinhart		500.00
Campaign Contribution	Contributor address; City; State; Z 25 Robledo Dr Dallas, TX		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ns)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	1 Total pages Schedule A1: 2 of 19	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor ut-of-state PAC (I	ID#:)	7 Amount of contribution (\$)
02/06/2019	Gilbert Aranza		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	P.O. Box 601527 Dallas, T	TX 75360-1527	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/11/2019	Dr Charles Ku		500.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	148 Red Oak Lane Flower M	Mound, TX 75028	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
01/28/2019	John Field Scovell		500.00
Campaign Contribution	Contributor address; City; State; 6322 De Loache Dallas, T	Zip Code TX 75225	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/16/2019	Afisu Ollabimtan		500.00
Campaign Contribution	Contributor address; City; State; 74 Buck Trail Sadler, T		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 3 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 02/27/2019 Campaign Contribution	5 Full name of contributor ☐ out-of-state PAC (ID DELVA KING) 6 Contributor address; City; State; P.O. Box 0 Dallas, T.	Zip Code	7 Amount of contribution (\$) 100.00
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ions)
Date 02/04/2019 Campaign Contribution Principal occup	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Date	Full name of contributor	D#:)	A
02/11/2019 Campaign Contribution	Michael Rader Contributor address; City; State;		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 02/04/2019 Campaign Contribution	Full name of contributor Sam Coats Contributor address; Contributor address; Contributor address; Contributor address; City; State; Dallas, T.	Zip Code	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 4 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID Apartment Association of Greater Dallas -PAC		7 Amount of contribution (\$)
02/08/2019 Campaign Contribution		Zip Code	2500.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date)#:)	Amount of contribution (\$)
02/25/2019 Campaign	Johnnie M Green Contributor address; City; State;	Zip Code	25.00
Contribution Principal occur	P.O. Box 411458 Dallas, Table 11458 Dallas, Ta	X 75241-3582 Employer (See Instructi	ions)
- Timolpai Goodp	data (GGG metadetone)	Employor (God mondon	
Date	Full name of contributor out-of-state PAC (ID)#:)	Amount of contribution (\$)
01/29/2019 Campaign Contribution	Contributor address; City; State;	Zip Code X 75376-5209	1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 03/23/2019	Full name of contributor out-of-state PAC (ID Black Firefighter United PAC		Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; State;	Zip Code X 75215-2751	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this for	1 Total pages Schedule A1: 5 of 19	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor uut-of-state PAC (ID#	#:)	7 Amount of contribution (\$)
02/11/2019	Ronald G Parrish		1000.00
Campaign	6 Contributor address; City; State;		
Contribution	1256 Regents Park Ct Desoto, T2	X 75115	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC (ID#	‡:)	Amount of contribution (\$)
01/31/2019	Thomas M Dunning		200.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	2100 Ross Avenue Suite 1200 Dallas, TX	X 75207-2739	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	# :)	Amount of contribution (\$)
01/14/2019	Brian Dennison		350.00
Campaign Contribution	Contributor address; City; State; 1303 Woodlawn Ave Dallas, TX	Zip Code X 75208	
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of contribution (\$)
02/02/2019	John Soo Chong		500.00
Campaign Contribution	Contributor address; City; State; 2 927 Condor Dr Coppell, T	Zip Code	
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 6 of 19				
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor out-of-state PAC (II Patricia L Jackson	D#:)	7 Amount of contribution (\$)	
02/11/2019 Campaign	6 Contributor address; City; State;	Zip Code	25.00	
Contribution	2711 Meadow Dawn Ln Dallas, T	X 75237-3209		
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
02/11/2019	Joseph Kemp		1000.00	
Campaign	Contributor address; City; State;	Zip Code		
Contribution	1015 N Duncanville Rd Duncanv	ille, TX 75116		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)	
02/11/2019	Dorothy Berry Hughes		25.00	
Campaign Contribution	Contributor address; City; State; 2608 Palo Alto Dr Dallas, T	Zip Code IX 75241-6431		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)	
02/10/2019	Vaugh Thompson		1000.00	
Campaign Contribution	Contributor address; City; State;	Zip Code 'X 75356-1527		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: 7 of 19
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
02/11/2019	Helen Giddings		350.00
Campaign	6 Contributor address; City; State; Zip Co	ode	
Contribution	400 S Zang Blvd Suite 1018 Dallas, TX 7520	8-6843	
8 Principal occu	pation / Job title (See Instructions) 9 Empl	loyer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/11/2019	Perfect Hospitality Solutions LLC		600.00
0-,,,	Contributor address; City; State; Zip Co		
Campaign Contribution	4300 Mansfield Hwy Forest Hill, TX	76119	
B. C. C. C.			,
Principal occup	pation / Job title (See Instructions) Empl	oyer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
02/11/2019	R Gerald Turner		100.00
Campaign Contribution	Contributor address; City; State; Zip Co 4001 University Dallas, TX 7520		
Principal occup	pation / Job title (See Instructions) Empl	oyer (See Instructions	5)
Date	Full name of contributor		Amount of contribution (\$)
02/11/2019	A. A. Long	2	20.00
Campaign Contribution	Contributor address; City; State; Zip Co 1517 Gailbrook Lane Dallas, TX 7522	de	
Principal occup	pation / Job title (See Instructions) Empl	oyer (See Instructions	5)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 8 of 19				
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)	
4 Date 02/11/2019 Campaign Contribution 8 Principal occu	Mary C Choutka 6 Contributor address; City; State; 1331 Aldenwood Drive Dallas, 7	Zip Code TX 75232 9 Employer (See Instruction	7 Amount of contribution (\$) 10.00	
Date 02/08/2019 Campaign Contribution Principal occup	Y Thompson Contributor address; City; State;	Zip Code TX 75241 Employer (See Instruction	Amount of contribution (\$) 10.00 ons)	
Date 02/01/2019 Campaign Contribution	Bruce A Stern Contributor address; City; State;	Zip Code ood, NJ 87010-4168	Amount of contribution (\$) 1000.00	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	
Date 02/02/2019 Campaign Contribution	Jackie Bewley Contributor address; City; State;		Amount of contribution (\$) 1000.00	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 9 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
03/21/2019	John Wiley Price Campaign		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	510 E 8th St Dallas, T	ΓX 75203	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
03/13/2019	Frank Mihalopoulos		1000.00
	Contributor address; City; State;	Zip Code	1000.00
Campaign Contribution	4645 N Central Expressway Suite 20@Dallas, T	ΓX 75206	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/17/2019	Jacob Johnson		1000.00
Campaign Contribution	Contributor address; City; State; 1237 Frenchmans Dr Desoto,	Zip Code TX 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/25/2019	Jeffrey M Tillotson P.C		1000.00
Campaign Contribution		Zip Code ΓX 75201-TX	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 10 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
02/06/2019	Donald J McNamara		500.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	3899 Maple Ave Dallas, T	TX 75219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/06/2019	Jewel K Parrish		1000.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	1256 Regents Park Ct Desoto, 7	TX 75115	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/06/2019	Ann Kim		1000.00
Campaign Contribution	Contributor address; City; State; 2013 Cottonwood Valley Cir S Irving, T	Zip Code X 75038	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of contribution (\$)
02/13/2019	Eddie Reeves		500.00
Campaign Contribution		Zip Code TX 75208	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	1 Total pages Schedule A1: 11 of 19		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state_PAC (I	ID#:)	7 Amount of contribution (\$)
02/12/2019	Trelaine M Mapp		500.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	12612 Beech Tree Ln Euless, T	ΓX 76040-3428	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date		ID#:)	Amount of contribution (\$)
02/12/2019	William Ming Tzong		800.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	6922 Aspen Creek Ln Dallas, T	TX 75252-2702	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
02/05/2019	Ryan Garcia		50.00
Campaign Contribution	Contributor address; City; State; 165 Cameron Dr Weston,	Zip Code FL 33326	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state_PAC (i	ID#:)	Amount of contribution (\$)
02/05/2019	Johnny Aguinaga		250.00
Campaign Contribution		Zip Code TX 75205-204	
Principal occup	eation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	1 Total pages Schedule A1: 12 of 19		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID	#:)	7 Amount of contribution (\$)
02/05/2019	Irahim Haddad		250.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	4712 Holy Tree Dr Dallas, T2	X 75287-7219	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
02/07/2010	Evelyn Conner Hicks		250.00
02/07/2019	Contributor address; City; State;	Zin Code	250.00
Campaign Contribution	6840 Talbot Pkwy Dallas, T2		
Contribution	5040 Tuloot I Kwy Dulius, 12	173232	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
02/04/2019	Donald W Hicks Sr		250.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	5620 Live Oak St Suite A Dallas, TX	X 75206-8057	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	#:)	Amount of contribution (\$)
01/31/2019	Diane Ragsdale	,	250.00
Campaign Contribution	Contributor address; City; State; 3611 Dunbar Street Dallas, TX	Zip Code X 75216	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 13 of 19				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Tennell Atkins				
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of contribution (\$)	
02/04/2019	Pettis Norman		500.00	
Campaign	6 Contributor address; City; State;	Zip Code		
Contribution	1430 Bar Habor Circle Dallas, 7	ΓX 75232		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)	
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)	
01/31/2019	Dough Hunt		1000.00	
	Contributor address; City; State;	Zip Code	1000.00	
Campaign Contribution		er, TX 75134		
Contribution	5404 IV Interstate 33 E	SI, 174 75154		
Principal occup	nation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/01/2019	Demetric Sampson			
Campaign Contribution	Contributor address; City; State; P.O. Box 2252 Dallas, 7	Zip Code ΓX 75223		
Contribution	1.0. Box 2232 Bullus, 1	111 75225		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)	
02/08/2019	Dallas Black Firefighter Retiree-PAC		500.00	
Campaign Contribution		Zip Code ΓX 75222-6983		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 14 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (ID	D#:)	7 Amount of contribution (\$)
02/01/2019	Brenda Walker		1000.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	310 Calvary Dr Euless, T2	X 76040	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/01/2019	M Rideau		500.00
Campaign	Contributor address; City; State;	Zip Code	
Contribution	10000 SMU Bx 75-3183 Dallas, T2	X 75275	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/06/2019	Dora L Cole		1000.00
Campaign Contribution	Contributor address; City; State; 3883 Happy Canyon Dr Dallas, TX	Zip Code X 75241	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID	D#·)	Amount of contribution (\$)
02/11/2019	Robert E Hasty	,	1000.00
Campaign Contribution	Contributor address; City; State; 13804 Wooded Creek Drive Dallas, TX	Zip Code X 75244	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 15 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 01/28/2019 Campaign Contribution 8 Principal occu	Laurie L Hasty 6 Contributor address; City; State; 4210 Beaver Book Place Dallas, T	Zip Code ΓX 75229 Employer (See Instruction	7 Amount of contribution (\$) 1000.00 ons)
Date 02/16/2019 Campaign Contribution Principal occup	Lawrence E Siegel Contributor address; City; State;	Zip Code TX 75229-6418 Employer (See Instruction	Amount of contribution (\$) 1000.00
Date 02/05/2019 Campaign Contribution	Brian Schwartz Contributor address; City; State;	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 02/04/2019 Campaign Contribution	Full name of contributor		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 16 of 19
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Tennell Atkins			
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of contribution (\$)
02/11/2019	Coats Rose P.C.		500.00
Campaign	6 Contributor address; City; State;	Zip Code	
Contribution	9 Greenway Plaza Suite 1100 Houston,	TX 77046	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC (IE	D#:)	Amount of contribution (\$)
02/04/2019	Ruth Dade		25.00
Camanian	Contributor address; City; State;	Zip Code	
Campaign Contribution	1553 Duet Dr Dallas, T.	X 75241-3726	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
02/08/2019	Paul Hauang		50.00
Campaign Contribution	Contributor address; City; State; 422 Ridgewood Richardso	Zip Code on, TX 75080	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/25/2019	Full name of contributor		Amount of contribution (\$) 1000.00
Campaign Contributor address; City; State; Zip Code Contribution Contribution Contributor address; Arlington, TX 75012-3469			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 17 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
 4 Date 01/29/2019 Campaign Contribution 8 Principal occur 	5 Full name of contributor □ out-of-state PAC (ID Lucious L Williams 6 Contributor address; City; State; 1421 Covinngton Dr □ Desoto, T □ pation / Job title (See Instructions) 9	Zip Code	7 Amount of contribution (\$) 1000.00
Date 03/23/2019 Campaign Contribution Principal occup	Full name of contributor	Zip Code GA 30309-3980 Employer (See Instruction	Amount of contribution (\$) 500.00
Date 02/11/2019 Campaign Contribution	Full name of contributor		Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 01/31/2019 Campaign Contribution	Full name of contributor	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: 18 of 19
2 FILER NAME Tennell Atkins			3 Filer ID (Ethics Commission Filers)
4 Date 01/17/2019 Campaign Contribution 8 Principal occur	Maria E Garcia 6 Contributor address; City; State;	X 75206-4724	7 Amount of contribution (\$) 100.00 ons)
Date 02/02/2019 Campaign Contribution Principal occup	Larry L Offutt Contributor address; City; State;	Zip Code "X 75206-8002 Employer (See Instruction	Amount of contribution (\$) 200.00 ons)
Date 02/05/2019 Campaign Contribution	Johnny King Contributor address; City; State; 1243 Pleasant Run Road Desoto, '	TX 75115	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/05/2019 Campaign Contribution			Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form	Total pages Schedule A1: 19 of 19
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Tennell Atkins		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	7 Amount of contribution (\$)
02/11/2019	Jim S Lake Jr	1000.00
Campaign Contribution	6 Contributor address; City; State; Zi 1704 W Colorado Blvd Dallas, TX 7	
8 Principal occu	pation / Job title (See Instructions) 9 E	Employer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zi	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zi	p Code
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor	
	Contributor address; City; State; Zip	o Code
Principal occup	eation / Job title (See Instructions)	Employer (See Instructions)
	ATTACH ADDITIONAL CODIES OF THE	S SCHEDIII E AS NEEDED

SCHEDULE F1

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 Gilt/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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 1 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/22/2019	Ruth Dade		
6 Amount (\$) 150.00 Campaign Funds for	7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241		
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
OF EXPENDITURE		worker	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/09/2019	Ronald Wright		
Amount (\$) 100.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	7513 Olusta Drive Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/15/2019	Ronald Wright		
Amount (\$) 100.00	Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217		
Campaign Funds for Campaign Expenditures	7313 Giusta Dilve Dallas, 1X 73217		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
		orner	
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 2 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
03/01/2019	Ronald Wright	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	_	Check if Austin, TX, officeholder living expense
EXI ENDITORE		worker
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
03/04/2019	Ronald Wright	
Amount (\$)	Payee address; City; State; Zip Code	
100.00	7513 Olusta Drive Dallas, TX 75217	
Campaign Funds for Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/01/2019	Odell Lee	
Amount (\$) 192.00	Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232	
Campaign Funds for	1331 Will Stream Di Danas, 1X 73232	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Cardidate/Officerfolder/Politica	The Instruction Guide explains how to o	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/29/2019	CCP Printing		
6 Amount (\$) 2221.71 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 5534 S Hampton Road Dallas, TX 75232		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Printing Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/15/2019	Toni Scroggins		
Amount (\$)	Payee address; City; State; Zip Code		
750.00 Campaign Funds for Campaign Expenditures	9218 Linda Vista Rowlett, TX 75088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/22/2019	Eula Grant		
Amount (\$) 45.00	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
Campaign Funds for Campaign Expenditures	9608 Valley Mills Ln Dallas, TX 75227		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 4 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
03/08/2019	Juanita Ayala	
6 Amount (\$) 60.00	7 Payee address; City; State; Zip Code 3037 O Bannon Dr Dallas, TX 75224	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/15/2019	Gail Terrell	
Amount (\$) 500.00	Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	
Campaign Funds for Campaign Expenditures		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense Office Manager
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Gail Terrell	Office sought Office held
Date	Payee name	
03/11/2019	Gail Terrell	
Amount (\$) 600.00	Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241	
Campaign Funds for Campaign Expenditures	1.0. Box 41301 Danas, 1X 73241	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		Office Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Gail Terrell	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 5 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/22/2019	Gail Terrell		
6 Amount (\$) 650.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Salaries/Wages/Contract Labor	Check if travel or	utside of Texas. Complete Schedule T. n, TX, officeholder living expense
EXPENDITURE		Office Manager	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Gail Terrell	Office sought	Office held
Date	Payee name		
03/01/2019	Gail Terrell		
Amount (\$) 788.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	P.O. Box 41561 Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Gail Terrell	Office sought	Office held
Date	Payee name		
03/01/2019	Democracy Toolbox		
Amount (\$) 4000.00	Payee address; City; State; Zip Code 8813 Falcon Crest Dr McKinney, TX 75072		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Consulting Expense		rtside of Texas. Complete Schedule T.
EXPENDITURE		Consultation	, in, ombeholder living expense
		Consultation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 6 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/01/2019	Black Premier Ent. Network		
6 Amount (\$) 150.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austir	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/01/2019	Black Premier Ent. Network		
Amount (\$) 150.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	2601 Hyacinth Mesquite, TX 75181		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/20/2019	The Order Desk		
Amount (\$) 2264.80	Payee address; City; State; Zip Code 9840 Monroe Dr Suite 10 Allas, TX 75220		
Campaign Funds for Campaign Expenditures	7040 Molifoe Di Suite Turalias, 17/3220		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense		rtside of Texas. Complete Schedule T. 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

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
Others (actions extensions thirted phone)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 7 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/09/2019	Paul Wiley		
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 allas, TX 75217		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Worker	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/15/2019	Paul Wiley		
Amount (\$) 50.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	125 S Murdeaux Suite 1333 allas, TX 75217		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Worker	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2019	Paul Wiley		
Amount (\$) 50.00	Payee address; City; State; Zip Code 125 S Murdeaux Suite 139allas, TX 75217		
Campaign Funds for	125 5 Wurdeaux Suite 135 anas, 174 75217		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Worker	
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

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
Other (order or extension up to listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 8 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/04/2019	Paul Wiley		
6 Amount (\$) 50.00 Campaign Funds for	7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 13Dallas, TX 75217		
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austir Worker	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2019	Margot Williams		
Amount (\$) 50.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	17517 Olusta Drive Dallas, TX 75217		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/09/2019	Jackie Wheeler		
Amount (\$) 50.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	7516 Olusta Drive Dallas, TX 75217		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to c	complete this form.	outer (outer a satisfier) not noted assister,
1 Total pages Schedule F1: 9 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 02/09/2019	5 Payee name Kimberly Green		
6 Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/09/2019 Amount (\$) 120.00 Campaign Funds for Campaign Expenditures	Andre Luster Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 02/09/2019	Payee name Tahvio Luster		
Amount (\$) 80.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ntside of Texas. Complete Schedule T.
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 10 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	<u>'</u>
03/05/2019	Cedric Thompson	
6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
03/08/2019	Ruth Dade	
Amount (\$) 162.50	Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
Campaign Funds for Campaign Expenditures		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/22/2019	Ruth Dade	
Amount (\$) 197.50	Payee address; City; State; Zip Code Dallas, TX 75241	
Campaign Funds for Campaign Expenditures	1333 Buct Bi Ballas, 1A 73241	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 11 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	'
03/01/2019	Ruth Dade	
6 Amount (\$) 240.00	7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense worker
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
02/22/2019	Connie Buford	
Amount (\$) 90.00	Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116	
Campaign Funds for Campaign Expenditures	•	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense worker
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/01/2019	Connie Buford	
Amount (\$) 187.50	Payee address; City; State; Zip Code Dallas, TX 75116	
Campaign Funds for Campaign Expenditures	1410 Hudspein St. Danas, 1A /3110	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEEDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (once, a outegoly not letter above)
1 Total pages Schedule F1: 12 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/06/2019	Connie Buford		
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
EXPENDITURE			, ix, officeriolder living expense
		worker	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/08/2019	Eula Grant		
Amount (\$) 92.50	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor		side of Texas. Complete Schedule T.
EXPENDITURE			TX, officeholder living expense
		worker	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2019	Eula Grant		
Amount (\$) 175.00	Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227		
Campaign Funds for Campaign Expenditures	Jose Valley Willis Eli Ballas, 17(75227		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		worker	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	:DED

SCHEDULE F1

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 13 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/08/2019	Detra Reeves		
6 Amount (\$) 110.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor	l ` ′	utside of Texas. Complete Schedule T.
OF	Salaries/ wages/Contract Labor	Check if Austin	n, TX, officeholder living expense
EXPENDITURE		worker	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/25/2019	Detra Reeves		
Amount (\$) 37.50	Payee address; City; State; Zip Code		
Campaign Funds for	1000 S Muskogee Dr Dallas, TX 75217		
Campaign Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2019	Detra Reeves		
Amount (\$) 55.00	Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217		
Campaign Funds for	Tool 5 Muskogee Di Bullus, 171 75217		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	1		

SCHEDULE F1

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 14 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/22/2019	Robernett Jones		
6 Amount (\$) 80.00	7 Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T.
EXPENDITURE		worker	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/08/2019	Robernett Jones		
Amount (\$) 30.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	4210 Elsie Faye HegginsDallas, TX 75210		
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE	Ç	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/01/2019	Robernett Jones		
Amount (\$) 160.00	Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210		
Campaign Funds for Campaign Expenditures	4210 Elsie Faye Hegginsbanas, 17 73210		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 15 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	·
03/08/2019	Odell Lee	
6 Amount (\$) 90.00	7 Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/01/2019	Shenigua Jones	
Amount (\$) 117.50	Payee address; City; State; Zip Code	
Campaign Funds for	4210 Hatcher st Dallas, TX 75210	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/08/2019	Shenigua Jones	
Amount (\$) 20.00	Payee address; City; State; Zip Code 4210 Hatcher st Dallas, TX 75210	
Campaign Funds for	7210 Hatcher St Dallas, 1A /3210	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		worker
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	outer (outer a satisfier) not noted assister,
1 Total pages Schedule F1: 16 of 59		·	3 Filer ID (Ethics Commission Filers)
4 Date 03/08/2019	5 Payee name Lakisha Grandy		
6 Amount (\$) 195.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1414 Bellevview St Suite 139 Dallas, TX 75215		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/22/2019 Amount (\$) 30.00 Campaign Funds for Campaign Expenditures	Brenda Lee Barnes Payee address; City; State; Zip Code 400 E Wintergreen Rd Suite 343 Desoto, TX 75115		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 01/16/2010	Payee name		
01/16/2019 Amount (\$) 268.90 Campaign Funds for Campaign Expenditures	Fast Signs Payee address; City; State; Zip Code 6940 Marvin D Love FrwDallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		ntside of Texas. Complete Schedule T.
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

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
Others (actions extensions thirted phone)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 17 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/16/2019	Fast Signs		
6 Amount (\$) 526.23	7 Payee address; City; State; Zip Code 6940 Marvin D Love FrwDpallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Advertising	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/24/2019	Office Depot		
Amount (\$) 148.79	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	39759 LBJ Frwy Suite 4000allas, TX 75237-3526		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Office Supplies	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2019	Metro PCS		
Amount (\$) 200.00	Payee address; City; State; Zip Code 3333 W Camp Wisdom Ralalas, TX 75237		
Campaign Funds for	3333 W Camp Wisdom Manas, 1A 73237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		phone	
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 18 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/17/2019	Metro PCS		
6 Amount (\$) 238.08	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom W allas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		phone	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2019	Tennell Atkins Metro PCS		
Amount (\$)	Payee address; City; State; Zip Code		
200.00	3333 W Camp Wisdom Rallas, TX 75237		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		phone	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/17/2019	Tennell Atkins Metro PCS		
Amount (\$) 207.77	Payee address; City; State; Zip Code		
Campaign Funds for	3333 W Camp Wisdom Rolallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		phone	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee	Legal Services	Salaries/Wa	ages/Contract Labor	Other (enter a cate	gory not listed above)
Credit Card Payment		The Instruction Guide explain	ns how to co	emplete this form.		
1 Total pages Schedule F1: 19 of 59	2 FILER N Tennell A				3 Filer ID (Ethio	es Commission Filers)
4 Date	5 Payee na	ame				
02/09/2019	Office De	pot				
6 Amount (\$) 9.61	7 Payee at 39759 LB	ddress; City; State; Z J Frwy Suite 400allas, TX 7523'	•			
Campaign Funds for Campaign Expenditures						
8	(a) Category	(See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE	Office Ov	erhead/Rental Expense		Check if travel ou	utside of Texas. Complete	Schedule T.
OF EXPENDITURE				Check if Austin	n, TX, officeholder living	g expense
LAI LABITOTIL				Office Supplies		
9 Complete ONLY if direct expenditure to benefit C/Oh		late / Officeholder name	,	Office sought		Office held
Date	Payee na	ame				
02/21/2019	Office De	pot				
Amount (\$) 13.64	Payee at	ddress; City; State; Z J Frwy Suite 4000allas, TX 7523	-			
Campaign Funds for Campaign Expenditures			,			
	Category	(See Categories listed at the top of this	schedule)	Description		
PURPOSE	Office Ov	erhead/Rental Expense		Check if travel out	tside of Texas. Complete S	Schedule T.
OF EXPENDITURE		•		Check if Austin	, TX, officeholder living	expense
EXPENDITORE				Office Supplies		
Complete ONLY if direct expenditure to benefit C/OF		late / Officeholder name	·	Office sought		Office held
Date	Payee n	ame				
02/16/2019	Office De	pot				
Amount (\$) 15.47	Payee at 39759 LB	ddress; City; State; Z J Frwy Suite 4000allas, TX 7523				
Campaign Funds for Campaign Expenditures		•				
	Category	(See Categories listed at the top of this	schedule)	Description		
PURPOSE	Office Ov	erhead/Rental Expense		Check if travel ou	tside of Texas. Complete	Schedule T.
OF EXPENDITURE				Check if Austin	, TX, officeholder living	expense
				Office Supplies		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		late / Officeholder name		Office sought		Office held
	AT	TACH ADDITIONAL COPIES	OF THIS S	SCHEDULE AS NEE	EDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/V The Instruction Guide explains how to o	Vages/Contract Labor complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 20 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/13/2019	Office Depot		
6 Amount (\$) 27.00	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 allas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Office Supplies	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/10/2019	Office Depot		
Amount (\$) 102.81	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	39759 LBJ Frwy Suite 4000allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/16/2019	Office Depot		
Amount (\$) 118.77	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
Campaign Funds for Campaign Expenditures	39739 LbJ riwy Suite 4ubanas, 17 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Office Supplies	, 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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 21 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/02/2019	Office Depot		
6 Amount (\$) 122.28 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000allas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austir Office Supplies	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/17/2019	Office Depot		
Amount (\$) 130.65	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	39759 LBJ Frwy Suite 4000allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/24/2019	Office Depot		
Amount (\$) 148.79	Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400allas, TX 75237		
Campaign Funds for Campaign Expenditures	39/39 LbJ 11wy Suite 4walias, 17/323/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Office Supplies	, 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

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 22 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/14/2019	Office Depot		
6 Amount (\$) 157.56	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4000 allas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/24/2019	Office Depot		
Amount (\$) 269.96	Payee address; City; State; Zip Code		
Campaign Funds for	39759 LBJ Frwy Dallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Office Overhead/Rental Expense		side of Texas. Complete Schedule T.
EXPENDITURE			TX, officeholder living expense
		Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/18/2019	Dollar Tree Store 2076		
Amount (\$) 20.32	Payee address; City; State; Zip Code		
	4241 W Camp Wisdom Rd Suite A		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
1 1	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense		side of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin,	TX, officeholder living expense
		Office Supplies	
Consulate ONLY if disport	Candidate / Officeholder name	Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Onice sought	Office field
	ATTACH ADDITIONAL COPIES OF THIS	COUEDINE AC NEE	DED

SCHEDULE F1

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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (other a datagety herholds above)
1 Total pages Schedule F1: 23 of 59	·		3 Filer ID (Ethics Commission Filers)
4 Date 02/22/2019	5 Payee name Every Season		
6 Amount (\$) 6.20 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 544 Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/28/2019	Target		
Amount (\$) 26.30 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2019	Dollar Deals		
Amount (\$) 9.70 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3207 E Kirnwood Suite IDallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ntside of Texas. Complete Schedule T. I, 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

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 c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 24 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/04/2019	Dollar Tree Store 5915		
6 Amount (\$) 27.06	7 Payee address; City; State; Zip Code 1005 S Cockrell Hill Rd Suite 201		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
EXPENDITURE		Office Supplies	, i.v., unicendider living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/04/2019	Party City		
Amount (\$) 22.68	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	39759 LBJ Frwy Suite 4 10 /allas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		atside of Texas. Complete Schedule T. TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/04/2019	Wal Mart		
Amount (\$) 28.83	Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	5155 w wheatiand Danas, 1A 75257		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	Check if travel out	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin,	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 25 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
03/05/2019	Wal Mart	
6 Amount (\$) 58.50	7 Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/17/2019	Wal Mart	
Amount (\$) 291.57	Payee address; City; State; Zip Code	
Campaign Funds for	3155 W Wheatland Dallas, TX 75237	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	P. C.	Check if Austin, TX, officeholder living expense
EXI ENDITORE		food
	0 11 1 10 11 11	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
01/20/2019	Sams Wholesale Club	
Amount (\$) 255.48	Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237	
Campaign Funds for	2700 W Wileatiand Danas, 1X 73237	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	1	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 26 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/27/2019	Walgreens Store 05920		
6 Amount (\$) 9.98	7 Payee address; City; State; Zip Code 1060 W Camp Wisdom W allas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		food Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/17/2019	Tennell Atkins Wireless Stop		
Amount (\$)	Payee address; City; State; Zip Code		
448.00	3333 W Camp Wisdom Rolallas, TX 75237		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		phone	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/17/2019	SAMS		
Amount (\$) 400.60	Payee address; City; State; Zip Code 2900 W WHEATLAND Dallas, TX 75237		
Campaign Funds for	2900 W WHEATLAND Dallas, TX /525/		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
		food	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 27 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 01/21/2019	5 Payee name Chaarco Broiler Steak House		
6 Amount (\$) 22.92 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 413 W Jefferson Blvd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/23/2019	Rice Garden		
Amount (\$) 33.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 4016 W Camp Wisdom Rallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/22/2019 Amount (\$) 55.47 Campaign Funds for Campaign Expenditures	Lisa Soul Food Cafe Payee address; City; State; Zip Code 2550 W Redbird Lane Suite 404 Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , 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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 28 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
01/08/2019	Delta Charlies Bar & Grill	
6 Amount (\$) 28.12	7 Payee address; City; State; Zip Code 5303 Challenger Suite 6(Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense food
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
01/11/2019	Outback Steakhouse Store 4475	
Amount (\$) 31.06	Payee address; City; State; Zip Code 7707 N Interstate 35-E Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
PURPOSE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
EXI ENDITORIE		food
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
01/05/2019	Dunkin Donuts	
Amount (\$) 4.12	Payee address; City; State; Zip Code 650 Uptown Blvd Dallas, TX 75237	
Campaign Funds for Campaign Expenditures	OSO Optown BIVU Banas, 1A 13231	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries A The Instruction Guide explains how to a	Vages/Contract Labor	Other (enter a category not listed above)
1 Total pages Schedule F1: 29 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/15/2019	Colters TX BBQ		
6 Amount (\$) 31.28	7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	tride of Truce Consolute Orbitals T
PURPOSE	Food/Beverage Expense		utside of Texas. Complete Schedule T.
OF EXPENDITURE		food	, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/27/2019	Tennell Atkins Pizza Hut		
Amount (\$) 14.36	Payee address; City; State; Zip Code		
Campaign Funds for	3333 W Camp Wisdom Rd Suite 116 Dallas, TX 75237		
Campaign Expenditures		1	
	Category (See Categories listed at the top of this schedule)	Description Check if travel and	toide of Taylor Complete Cabadyla T
PURPOSE OF	Food/Beverage Expense		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		food	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/26/2019	Saltgrass		
Amount (\$) 49.42	Payee address; City; State; Zip Code		
Campaign Funds for	747 North Highway 67 Dallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE			, TX, officeholder living expense
		food	
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor O	other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 30 of 59	2 FILER NAME Tennell Atkins	3	Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	-	
01/27/2019	McDonalds		
6 Amount (\$) 2.91	7 Payee address; City; State; Zip Code 125 W Camp Wisdom RaDallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense		e of Texas. Complete Schedule T.
OF EXPENDITURE		food	K, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
02/22/2019	JJ Fish and Chicken		
Amount (\$) 20.00	Payee address; City; State; Zip Code 3302 W Camp Wisdom RDallas, TX 75237		
Campaign Funds for Campaign Expenditures	•		
DUDDOCE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside	of Texas. Complete Schedule T.
PURPOSE OF	Food/Beverage Expense		, officeholder living expense
EXPENDITURE		food	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
01/18/2019	JJ Fish and Chicken		
Amount (\$) 21.10	Payee address; City; State; Zip Code 3302 W Camp Wisdom Rallas, TX 75237		
Campaign Funds for Campaign Expenditures	3302 w Camp wisdom Ramas, 1A 13231		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	Check if travel outside	of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX	, officeholder living expense
_		food	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDE	ED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 31 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/11/2019	El Fenix		
6 Amount (\$) 28.61 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austir	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/15/2019	El Fenix		
Amount (\$) 32.39	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	1601 McKinney Ave Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/11/2019	El Fenix		
Amount (\$) 303.10	Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	Tool Mertinicy Tive Bunds, 174 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
EXPENDITURE		food	,, cco.o.acag cponoo
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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 32 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/11/2019	El Fenix		
6 Amount (\$) 1551.92 Campaign Funds for	7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237		
Campaign Expenditures	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
8		l , , L	utside of Texas. Complete Schedule T.
PURPOSE OF	Food/Beverage Expense		n, TX, officeholder living expense
EXPENDITURE		food	• •
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/06/2019	Lubys		
Amount (\$) 32.97	Payee address; City; State; Zip Code		
Campaign Funds for	5600 S Hampton Road Dallas, TX 75237		
Campaign Expenditures			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/02/2019	Lubys		
Amount (\$) 38.92	Payee address; City; State; Zip Code		
Campaign Funds for	5600 S Hampton Road Dallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Food/Beverage Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		food	
Operation Object (Control of the Control of the Con	Candidate / Officeholder name	Office sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Onice sought	Office field
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Cardidate/Officerfolder/Politica	The Instruction Guide explains how to c	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 33 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/20/2019	Chilis		
6 Amount (\$) 17.36	7 Payee address; City; State; Zip Code 2503 W Wheatland Suite 1405		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Food/Beverage Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
EXPENDITURE		Food	TA, Unicendided living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/20/2019	Chilis		
Amount (\$) 5.41	Payee address; City; State; Zip Code		
Campaign Funds for	2503 W Wheatland Dallas, TX 75237		
Campaign Expenditures		1	
	Category (See Categories listed at the top of this schedule)	Description Check if travel outsi	the ATTIME Commisse Cohedula T
PURPOSE OF	Food/Beverage Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
EXPENDITURE		food	3 · p
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/17/2019	Chilis		
Amount (\$) 9.72	Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
Campaign Funds for	2505 W Wilcattand Danas, 17 15251		
Campaign Expenditures		1	
	Category (See Categories listed at the top of this schedule)	Description	<u>_</u>
PURPOSE OF	Food/Beverage Expense		ide of Texas. Complete Schedule T. TX, officeholder living expense
EXPENDITURE		food	17, Unicertoider 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 NEED	DED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 34 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/20/2019	Chilis		
6 Amount (\$) 18.79 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/10/2019	Chilis		
Amount (\$) 28.77	Payee address; City; State; Zip Code		
Campaign Funds for	2503 W Wheatland Suite 1405 Dallas, TX 75237		
Campaign Expenditures	,		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/10/2019	KFC		
Amount (\$) 8.96	Payee address; City; State; Zip Code 3415 W Camp Wisdom Rallas, TX 75237		
Campaign Funds for Campaign Expenditures	5415 W Camp Wisdom Realias, 17 /325/		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		tside of Texas. Complete Schedule T.
EXPENDITURE			, TX, officeholder living expense
		food	
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

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

Cardidate/Officerfolder/Politica	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 35 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
01/20/2019 6 Amount (\$)	KFC 7 Payee address; City; State; Zip Code		
32.32	3415 W Camp Wisdom Rallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	(7
PURPOSE OF	Food/Beverage Expense		utside of Texas. Complete Schedule T.
EXPENDITURE		food	, TA, Gillocholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/19/2019	The Island Spot		
Amount (\$) 72.20	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	309 W Jefferson Blvd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/08/2019	Shell		
Amount (\$) 37.27	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	6207 S Hampton Road Danas, 1X 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T.
EXPENDITURE	Еприне	gas Check if Austin,	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/	Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 36 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/14/2019	Shell		
6 Amount (\$) 42.74	7 Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Transportation Equipment & Related		utside of Texas. Complete Schedule T.
OF EXPENDITURE	Expense	Check if Austir	n, TX, officeholder living expense
		gas	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/05/2019	Shell		
Amount (\$) 42.83	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Transportation Equipment & Related		tside of Texas. Complete Schedule T.
EXPENDITURE	Expense		, TX, officeholder living expense
		Gas	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/07/2019	Shell		
Amount (\$) 51.98	Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237		
Campaign Funds for	5257 5 Hampton Roud Dunus, 174 75257		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Transportation Equipment & Related	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE	Expense	Check if Austin	, TX, officeholder living expense
		gas	
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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 37 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	'
01/30/2019	Murphy USA	
6 Amount (\$) 1.78	7 Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Transportation Equipment & Related	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Expense	Check if Austin, TX, officeholder living expense
		gas
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
01/30/2019	Murphy USA	
Amount (\$) 33.45	Payee address; City; State; Zip Code	
Campaign Funds for	3102 W Wheatland Dallas, TX 75237	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Transportation Equipment & Related	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Expense	Check if Austin, TX, officeholder living expense
		gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
01/31/2019	Murphy USA	
Amount (\$) 45.38	Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237	
Campaign Funds for	5102 w wheatiand Danas, IA /323/	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Transportation Equipment & Related	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Expense	Check if Austin, TX, officeholder living expense
		gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 38 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
01/25/2019	Joe Pool Station		
6 Amount (\$) 250.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 5521 S Hampton Road Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/03/2019	Highland Hills Station		
Amount (\$) 250.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	3655 Simpson Stuart Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/23/2019	Edward Gray		
Amount (\$) 175.00	Payee address; City; State; Zip Code 2225 East Randol Mill Suite 427		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Advertising Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin Advertising	, 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

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 39 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/15/2019	Edward Gray		
6 Amount (\$) 175.00	7 Payee address; City; State; Zip Code 2225 East Randol Mill Suite 427		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Advertising Expense		utside of Texas. Complete Schedule T.
EXPENDITURE		Advertising	, IX, unicendider living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/15/2019	Ernest Slaughter		
Amount (\$) 1500.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	2759 Meadow Dawn Ln Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/04/2019	A Squared Advertising		
Amount (\$) 600.00	Payee address; City; State; Zip Code 539 W Commercece Suite 440		
Campaign Funds for Campaign Expenditures	Dallas, TX 75237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Consultant	, 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

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 40 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/04/2019	A Squared Advertising		
6 Amount (\$) 600.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 539 W Commerce Suite 43 dlas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Salaries/Wages/Contract Labor	Check if travel or	utside of Texas. Complete Schedule T.
OF EXPENDITURE		Consultant	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/23/2019	A Squared Advertising		
Amount (\$) 500.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	539 W Commerce Suite Dal las, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
02/22/2019	Ed Valentine Booker Industries		
Amount (\$) 1896.89	Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	2544 Farmigon Danas, 17/3257		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Printing Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Cardidate/Officerfolder/Politica	The Instruction Guide explains how to	complete this form. Other (enter a category not listed above))
1 Total pages Schedule F1: 41 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission File	ers)
4 Date	5 Payee name		
02/28/2019	Ed Valentine Booker Indusgtries		
6 Amount (\$) 430.63 Campaign Funds for	7 Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237		
Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE		Check if Austin, TX, officeholder living expense postage	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
03/24/2019	Reilly Echols Printing		
Amount (\$) 1293.00	Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358		
Campaign Funds for Campaign Expenditures	1.0. Box 3333 Dallas, 1X 73237-2330		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense postage	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
03/24/2019	Reilly Echols Printing		
Amount (\$) 7361.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	P.O. Box 3333 Dallas, TX 75237-2358		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE		Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries A The Instruction Guide explains how to	Vages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F1: 42 of 59	•	3 Filer ID (Ethics Commission Filers)
4 Date 01/16/2019	5 Payee name Master Mark Advertising Agency	<u> </u>
6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
01/16/2019 Amount (\$) 3000.00 Campaign Funds for Campaign Expenditures	Master Mark Advertising Agency Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
02/01/2019	CWRD Properties LLC	
Amount (\$) 1150.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite 710 Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office space rental
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 43 of 59 Tennell Atkins 4 Date 5 Payee name 03/01/2019 **CWRD Properties LLC** 6 Amount (\$) 7 Payee address; City; State; Zip Code 1150.00 2000 E Lamar Blvd Suite 710 Campaign Funds for Dallas, TX 75237 Campaign Expenditures (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense OF EXPENDITURE office space rental Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 02/03/2019 Ms CAS Amount (\$) Payee address; City; State; Zip Code 487.13 Dallas, TX 75237 217 N Interstate 35-E Campaign Funds for Campaign Expenditures Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Advertising Expense OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Yard sign/advertising Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 03/15/2019 Ms CAS Amount (\$) 1351.13 Payee address: City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 Campaign Funds for Campaign Expenditures Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Advertising Expense OF Check if Austin, TX, officeholder living expense EXPENDITURE Yard sign/advertising Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 44 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
02/06/2019	Ms. CAS		
6 Amount (\$) 2269.38	7 Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Advertising Expense		tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
		Yard sign/advertising	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/23/2019	Ms. CAS		
Amount (\$) 4752.18	Payee address; City; State; Zip Code		
Campaign Funds for	217 N Interstate 35-E Dallas, TX 75237		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	Check if travel out	side of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin,	TX, officeholder living expense
-		Yard sign/advertising	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/15/2019	ATT		
Amount (\$) 620.00	Payee address; City; State; Zip Code		
Campaign Funds for	P.O. Box 3333 Dallas, TX 75237-5014		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel out	side of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin,	TX, officeholder living expense
		phone	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATT ALL ADDITION A CONTRACTOR OF THE CONTRACTOR		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 45 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/15/2019	ATT		
6 Amount (\$) 675.00	7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF	Office Overhead/Rental Expense		utside of Texas. Complete Schedule T.
EXPENDITURE		phone	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
03/15/2019	ATT		
Amount (\$) 682.00	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	P.O. Box 3333 Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/02/2019	Jefferson Monuent LLC		
Amount (\$) 350.00	Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	1330 Manufacturing St. Danas, 1A 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Office Overhead/Rental Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		office space rental	, 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	:DED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 46 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
02/03/2019	Jefferson Monument LLC	
6 Amount (\$) 350.00	7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		office space rental
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/02/2019	Jefferson Monument LLC	
Amount (\$)	Payee address; City; State; Zip Code	
350.00	1350 Manufacturing St Dallas, TX 75237	
Campaign Funds for Campaign Expenditures	-	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		office space rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
03/16/2019	Chubbys	
Amount (\$) 23.62	Payee address; City; State; Zip Code 7474 S Cockrell Hill Dallas, TX 75236	
Campaign Funds for	7474 S Cockien Hill Dallas, 1X 73230	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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.
1 Total pages Schedule F1: 47 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date 03/17/2019	5 Payee name LUBYS	
6 Amount (\$) 28.11 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 5600 S HAMPTON DALLAS, TX 75232	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/13/2019	Payee name Chilis Grill	
Amount (\$) 24.01 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 Tennell Atkins	Office sought Office held Council District 8
Date 03/19/2019	Payee name Chilis Grill	
Amount (\$) 38.09 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 2503 W Wheatland Rd Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 48 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	1
03/25/2019	Olive Garden	
6 Amount (\$) 27.14	7 Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75116	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		Food
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
Date	Payee name	
02/12/2019	Lisa Soul Food Cafe	
Amount (\$)	Payee address; City; State; Zip Code	
32.48	2550 W Red Bird Ln Dallas, TX 75237	
Campaign Funds for Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH		Council District 8
Date	Payee name	
03/04/2019	Lisa Soul Food Cafe	
Amount (\$) 21.11	Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237	
Campaign Funds for	2330 W Red Bild Lii Dallas, 1A /323/	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
	0 511 / 055	000
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 49 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/03/2019	Wingstop		
6 Amount (\$) 38.53 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Rahllas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Food/Beverage Expense	Check if travel ou	utside of Texas. Complete Schedule T.
OF EXPENDITURE	Tood Beverage Expense	Check if Austin	n, TX, officeholder living expense
		food	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date	Payee name		
03/10/2019	Spring Creek BBQ		
Amount (\$) 24.03	Payee address; City; State; Zip Code 2827 W Wheatland Rd Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	2027 w wheatiand Rd Danas, 17/3237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		tside of Texas. Complete Schedule T.
EXPENDITURE		food	, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	Tennell Atkins		Council District 8
Date	Payee name		
03/01/2019	KFC		
Amount (\$) 32.32	Payee address; City; State; Zip Code 3415 W Camp Wisdom Rahlas, TX 75237		
Campaign Funds for Campaign Expenditures	1		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Food/Beverage Expense		ttside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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

Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 50 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	<u>'</u>
03/24/2019	Ojeda Family Restaurant	
6 Amount (\$) 41.41	7 Payee address; City; State; Zip Code 2109 N Hampton Rd Desoto, TX 75115	
Campaign Funds for Campaign Expenditures	•	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		Food
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date	Payee name	
03/22/2019	Cracker Barrel	
Amount (\$) 18.60	Payee address; City; State; Zip Code	
Campaign Funds for	1421 N Beckley Ave Desoto, TX 75115	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
Date	Payee name	
02/20/2019	Starbucks	
Amount (\$) 22.46	Payee address; City; State; Zip Code 3420 W Camp Wisdom Rolallas, TX 75237	
Campaign Funds for	3420 W Camp Wisdom Ruanas, 1A 13231	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED
	ALIAGITADDITIONAL COFILS OF ITIIS	OUT TEDULE AU MEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	Il Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1: 51 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	1
02/23/2019	Outback Steakhouse	
6 Amount (\$) 24.35	7 Payee address; City; State; Zip Code 1101 N I-35 Interstate Desoto, TX 75115	
Campaign Funds for Campaign Expenditures		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OF	Tennell Atkins	Council District 8
Date	Payee name	
03/07/2019	Outback Steakhouse	
Amount (\$)	Payee address; City; State; Zip Code	
77.10	1101 N I-35 Interstate Desoto, TX 75115	
Campaign Funds for Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH		Council District 8
Date	Payee name	
03/22/2019	Saltgrass Steakhouse	
Amount (\$) 90.88	Payee address; City; State; Zip Code 747 N Hwy 67 Cedar Hill, TX 75104	
Campaign Funds for	747 IVIIWy 07 Coddi IIIII, 122 75104	
Campaign Expenditures		
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
		food
	0 111 / 00	000
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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.	outer (onto a dategory not noted above)
1 Total pages Schedule F1: 52 of 59	•	·	3 Filer ID (Ethics Commission Filers)
4 Date 02/07/2019	5 Payee name Murphy USA		
6 Amount (\$) 33.92 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date 03/03/2019	Payee name Murphy USA		
Amount (\$) 34.31 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date 03/10/2019	Payee name Murphy USA		
Amount (\$) 48.91 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		ntside of Texas. Complete Schedule T.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 53 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/18/2019	Tiger Mart 86		
6 Amount (\$) 48.41	7 Payee address; City; State; Zip Code 116 N Jim Miller Rd Dallas, TX 75217		
Campaign Funds for Campaign Expenditures			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date	Payee name		
03/24/2019	Ingrams Service Station		
Amount (\$) 69.32	Payee address; City; State; Zip Code		
Campaign Funds for Campaign Expenditures	3501 Simpson Stuart Rd Dallas, TX 75241		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date	Payee name		
03/03/2019	Shell		
Amount (\$) 46.89	Payee address; City; State; Zip Code 8207 S Hampton Dallas, TX 75237		
Campaign Funds for Campaign Expenditures	6207 3 Hampion Danas, 1A 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense		side of Texas. Complete Schedule T. TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED

SCHEDULE F1

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.
1 Total pages Schedule F1: 54 of 59		3 Filer ID (Ethics Commission Filers)
4 Date 01/19/2019	5 Payee name Office Depot	
6 Amount (\$) 32.45 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 02/23/2019	Payee name Office Depot	
Amount (\$) 185.09 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
Date 03/23/2019	Payee name Office Depot	
Amount (\$) 469.52 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

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 d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 55 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
02/10/2019	Home Depot		
6 Amount (\$) 11.89 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE			utside of Texas. Complete Schedule T.
OF	Office Overhead/Rental Expense	Check if Austir	n, TX, officeholder living expense
EXPENDITURE			
		office supply	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8
Date	Payee name		
02/22/2019	Home Depot		
Amount (\$)	Payee address; City; State; Zip Code		
47.31	2901 W Wheatland Rd Dallas, TX 75237		
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE	•	Check if Austin	, TX, officeholder living expense
EXPENDITORE		office supply	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins		Council District 8
	_		
Date	Payee name		
03/21/2019	Home Depot		
Amount (\$) 67.06	Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237		
Campaign Funds for	2701 W WIIGHIGH KU Dallas, IA /323/		
Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Office Overhead/Rental Expense	Check if travel ou	tside of Texas. Complete Schedule T.
OF EXPENDITURE		Check if Austin	, TX, officeholder living expense
EXPENDITURE		office supply	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins		Council District 8
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDIII E VS VIE	- DED
	AT TACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	בטבט

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)				
Credit Card Payment	The Instruction Guide explains how to	complete this form.				
1 Total pages Schedule F1: 56 of 59	2 FILER NAME Tennell Atkins	3 Filer ID (Ethics Commission Filers)				
4 Date	5 Payee name	<u>'</u>				
03/17/2019	Home Depot					
6 Amount (\$) 42.94	7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237					
Campaign Funds for Campaign Expenditures						
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		Check if Austin, TX, officeholder living expense				
		office supply				
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held				
expenditure to benefit C/OF	H Tennell Atkins	Council District 8				
Date	Payee name					
02/22/2019	Target					
Amount (\$) 20.75	Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237					
Campaign Funds for Campaign Expenditures	•					
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		Check if Austin, TX, officeholder living expense				
		office supply				
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held				
expenditure to benefit C/OH	Tennell Atkins	Council District 8				
Date	Payee name					
02/25/2019	Target					
Amount (\$) 53.02	Payee address; City; State; Zip Code					
Campaign Funds for	39739 LBJ Frwy Dallas, TX 75237					
Campaign Expenditures						
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	-	Check if Austin, TX, officeholder living expense				
LAI LIIDITURE		office supply				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Office held Council District 8				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

SCHEDULE F1

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 d	complete this form.	eno. (eno. d'odlogo.) notibole asoro,		
1 Total pages Schedule F1: 57 of 59	-		3 Filer ID (Ethics Commission Filers)		
4 Date 03/22/2019	5 Payee name Target				
6 Amount (\$) 51.32 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
Date 02/23/2019	Payee name Wal Mart				
Amount (\$) 50.37 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense office supply			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
Date 03/13/2019	Payee name Wal Mart				
Amount (\$) 35.71 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		tside of Texas. Complete Schedule T. , TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

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 d	complete this form.	culo. (cino. a calegory necholos asorto)		
1 Total pages Schedule F1: 58 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)		
4 Date 03/07/2019	5 Payee name MDMC Gift Shop				
6 Amount (\$) 67.60 Campaign Funds for Campaign Expenditures	7 Payee address; City; State; Zip Code 1441 S Beckley Ave Dallas, TX 75237				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation			
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
Date	Payee name				
03/09/2019 Amount (\$) 206.00 Campaign Funds for Campaign Expenditures	Wireless Shop Payee address; City; State; Zip Code 3333 W Camp Wisdom Rallas, TX 75237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense phone			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
Date 02/26/2019	Payee name Uplift Academy				
Amount (\$) 180.00 Campaign Funds for Campaign Expenditures	Payee address; City; State; Zip Code 8915 S Hampton Dallas, TX 75232				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		side of Texas. Complete Schedule T. TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought	Office held Council District 8		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

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

Carididate/Officerfolder/Politica	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)		
1 Total pages Schedule F1: 59 of 59	2 FILER NAME Tennell Atkins		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name				
03/25/2019	John Hamilton				
6 Amount (\$) 1000.00 Campaign Funds for	7 Payee address; City; State; Zip Code 325 N. St Paul Suite 335 Dallas, TX 75201				
Campaign Expenditures					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF	Other		utside of Texas. Complete Schedule T.		
EXPENDITURE		Returned \$1,000 cont	n, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
03/25/2019	Sarah Hamilton				
Amount (\$)	Payee address; City; State; Zip Code				
1000.00	325 N. St. Paul Suite 3350				
Campaign Funds for Campaign Expenditures	Dallas, TX 75201				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Returned \$1,000 contribution			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		tside of Texas. Complete Schedule T. , 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 NEEDED					