CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed 18	:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST	МІ	OFFICE U	SE ONLY
NAME	John		Date Received	
	NICKNAME LAST	SUFFIX		
	Botefuhr			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE		
MAILING ADDRESS	PO Box: 601636	Dallas TX 75360		
Change of Address				
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION		
OFFICEHOLDER PHONE	(214) 354 7878		Date Hand-delivered or	Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Receipt #	Amount \$
NAME	Mary	OUETN	Date Processed	
	NICKNAME LAST Poss	SUFFIX	Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / SI	JITE #; CITY; STATE;	ZIP CODE	
TREASURER ADDRESS	6405 Mercedes Ave	Dallas TX 75214		
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (214) 826 0779	EXTENSION		
9 REPORT TYPE	January 15 30th day before e	lection Runoff	15th day after	
			treasurer appo (Officeholder C	
	July 15 X 8th day before ele	ction Exceeded \$500 limit	Final Report (A	Attach C/OH - FR)
10 PERIOD	Month Day Year	Month	Day Year	
COVERED	03 / 23 / 2021	THROUGH 04	21 / 2021	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Primary	Runoff Other		
	05 / 01 / 2021 X General	Description Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known Council District 9)	
		Codifici District a		
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)		
John Botefuhr					
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
Additional Pages					
Additional Fages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZEI			
	_	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18730.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 61.63		
	4. TOTAL	POLITICAL EXPENDITURES	\$ 28602.35		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DATOR PERIOD	\$ 13171.57		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH AY OF THE REPORTING PERIOD	\$ 0.00		
18 AFFIDAVIT	1		1		
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.			
		ELECTRONICALLY CE	RTIFIED		
		Signature of Candid	date or Officeholder		
AFFIX NOTARY STAM	IP/SEALABOVE				
Sworn to and subsc	ribed before me, l	by the said John Botefuhr	, this the _23rd		
day of <u>April</u>	, 2021,	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	19 FILER NAME 20 Filer ID (Ethics Cor			
Jo				
21		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 18,730.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.		SCHEDULE E: LOANS		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 28,540.72
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 FUNDS			\$ 0.00
10.		SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$ 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 11
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2021	Lisa Troutt 6 Contributor address; City; State;	Zip Code TX 75229	7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 03/23/2021	Kenny Troutt Contributor address; City; State;	Zip Code ΤΧ 75229	Amount of contribution (\$) 1000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 03/25/2021	Robert Ranen Contributor address; City; State;	Zip Code TX 75248	Amount of contribution (\$) 1000.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 04/21/2021	William Sandbrook Contributor address; City; State;		Amount of contribution (\$) 1000.00
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 fo	orm.	1 Total pages Schedule A1: 2 of 11
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)
4 Date 04/15/2021	5 Full name of contributor □ out-of-state PAC (II Fred Perpall 6 Contributor address; City; State; 3436 Mockingbird Lane Dallas, T		7 Amount of contribution (\$) 1000.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/15/2021	Jacquelin Atkinson	Zip Code	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/09/2021	Shirley McIntyre Contributor address; City; State;	Zip Code ΓX 75205	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/09/2021	Full name of contributor out-of-state PAC (II William McIntyre Contributor address; City; State; 12222 Merit Dr Suite 1600 Dallas, T	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	form.	1 Total pages Schedule A1: 3 of 11
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
John Botefuhr			
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/09/2021	Allison Freeman		1000.00
	6 Contributor address; City; State;	Zip Code	
	1800 E Airport Fwy Irving, 7	ΓX 75062	
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 (\$)
04/09/2021	Jerry Freeman		1000.00
	Contributor address; City; State;	Zip Code	
	1800 E Airport Fwy Irving, 7	ΓX 75062	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
03/31/2021	Kathryn Idoux		1000.00
	Contributor address; City; State; 10520 Gooding Drive Dallas,	Zip Code ΓΧ 75229	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC	(ID#·)	Amount of contribution (\$)
03/29/2021	Reena Morris	, (.2,,	1000.00
	-	Zip Code TX 75214	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 4 of 11
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2021	5 Full name of contributor □ out-of-state PAC (ID James Huffines 6 Contributor address; City; State; 4012 Gillon Ave Dallas, T2		7 Amount of contribution (\$) 750.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/13/2021	Full name of contributor	Zip Code	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/10/2021	Full name of contributor		Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/10/2021	Full name of contributor	Zip Code	Amount of contribution (\$) 200.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)

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SCHEDULE A1

The	e Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 5 of 11
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2021 5 Full name of contributor out-of-state PAC (ID#:) Heather Hitchcock 6 Contributor address; City; State; Zip Code 5920 E University Suite 1116 Dallas, TX 75206		7 Amount of contribution (\$) 100.00	
8 Principal occi	upation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 04/21/2021	Sam Leake Contributor address; City; State;	; Zip Code TX 75214	Amount of contribution (\$) 100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 04/20/2021	Shannon OBrien Contributor address; City; State;	; Zip Code TX 75218	Amount of contribution (\$)
Principal occu	upation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 04/16/2021	Robert Mayes Contributor address; City; State;		Amount of contribution (\$) 100.00
Principal occu	upation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 6 of 11		
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)		
4 Date 04/13/2021	Susan Falvo 6 Contributor address; City; State;	(ID#:) Zip Code ΓΧ 75214	7 Amount of contribution (\$) 100.00		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)		
Date 04/13/2021	Jack Corgan Contributor address; City; State;	Zip Code ΓX 75214	Amount of contribution (\$) 100.00		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date 04/10/2021	Haynes Norine Contributor address; City; State;	Zip Code ΓX 75219	Amount of contribution (\$) 100.00		
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)		
Date 04/01/2021	Mark Cannon Contributor address; City; State;		Amount of contribution (\$) 100.00		
Principal occup	Principal occupation / Job title (See Instructions) Employer (See Instructions)				

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 11
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
John Botefuhr			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/01/2021	Richard Blaylock		100.00
	6 Contributor address; City; State	; Zip Code	
	12700 Park Center Dr Dallas,	TX 75251	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
03/31/2021	Adrian Simpson		100.00
03/31/2021	Contributor address; City; State	; Zip Code	100.00
		TX 75252	
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/28/2021	Donald Stanford		100.00
00, 20, 2021	Contributor address; City; State	; Zip Code	100100
	-	TX 75214	
	,		
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/27/2021	Robert Mayes		100.00
	Contributor address; City; State	; Zip Code	
		TX 75243	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	Total pages Schedule A1: 8 of 11
2 FILER NAME		3	Filer ID (Ethics Commission Filers)
John Botefuhr			
4 Date	5 Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/27/2021	Fred Welsh		60.00
03/27/2021	6 Contributor address; City; State;		00.00
	2706 Lawtherwood Ct Dallas, 7	ΓX 75214	
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
04/21/2021	Robert Mayes		50.00
01/21/2021	Contributor address; City; State;		30.00
	9427 Heatherdale Dr Dallas, 7	ΓX 75243	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	S)
Date	Full name of contributor	ID#:)	Amount of contribution (\$)
04/06/2021	Carmen Berdion		50.00
04/00/2021	Contributor address; City; State;		30.00
		TX 75252	
	•		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (Jennifer Elliott	ID#:)	Amount of contribution (\$)
04/05/2021	Jennitei Emoti		50.00
	Contributor address; City; State;	Zip Code	
	2100 Mistletoe Dr Richards	son, TX 75081	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	s)

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SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9 of 11
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2021	Carmen Berdion 6 Contributor address; City; State;	Zip Code TX 75252	7 Amount of contribution (\$) 50.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)
Date 04/21/2021	Carmen Berdion Contributor address; City; State;		Amount of contribution (\$) 35.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/19/2021	Carmen Berdion Contributor address; City; State;	Zip Code TX 75252	Amount of contribution (\$) 35.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 04/21/2021	John OBrien Contributor address; City; State;		Amount of contribution (\$) 30.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction	ons)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

J				
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 10 of 11	
2 FILER NAME John Botefuhr			3 Filer ID (Ethics Commission Filers)	
4 Date 03/25/2021	Regina Brooks 6 Contributor address; City; State;	Zip Code TX 75228	7 Amount of contribution (\$) 20.00	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		ions)		
Date 04/15/2021	Jason Lutin Contributor address; City; State;	Zip Code TX 75225	Amount of contribution (\$) 250.00	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date 04/12/2021	Rodney Lake Contributor address; City; State;	Zip Code TX 75218	Amount of contribution (\$) 100.00	
Principal occupation / Job title (See Instructions) Employ		Employer (See Instructi	ions)	
Date 04/10/2021	Michael Becker Contributor address; City; State;	(ID#:) Zip Code TX 75225	Amount of contribution (\$) 100.00	
Principal occupation / Job title (See Instructions)		Employer (See Instructi	ions)	

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SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: 11 of 11
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
John Botefuhr			
4 Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of contribution (\$)
04/13/2021	Deb Anderson		500.00
	6 Contributor address; City; State;	Zip Code	
	7108 Hillgreen Dr Dallas, T	TX 75214	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		ions)	
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/21/2021	Andrew Oteo		250.00
0 1/21/2021	Contributor address; City; State;	Zip Code	250.00
	4020 N MacArthur Suite 102 Irving, T	X 75038	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		ions)	
Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of contribution (\$)
04/21/2021	Amy Mitchell		1000.00
	Contributor address; City; State;	Zip Code	
	4321 Saint Johns Dallas, T	·	
Principal occupation / Job title (See Instructions) Employer (See Inst		Employer (See Instruct	ions)
Date	Full name of contributor	D#:)	Amount of contribution (\$)
04/21/2021	Malone Mitchell	,	1000.00
0-1/2021	Contributor address; City; State; 4321 Saint Johns Drive Dallas, T	Zip Code "X 75205	1000.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)			ions)

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: 1 of 4	2 FILER NAME John Botefuhr		3 Filer ID (Ethics Commission Filers)
4 Date 04/16/2021	5 Payee name Interlocutor LLC		
6 Amount (\$) 24735.24	7 Payee address; City; State; Zip Code 400 N Ervay St Suite 31 Dallas, TX 75201		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 04/21/2021	Payee name Paypal HQ		
Amount (\$) 184.49	Payee address; City; State; Zip Code 2211 N First St San Jose, CA 95131		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution Fees	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/23/2021	Payee name FBS Printing		
Amount (\$) 365.34	Payee address; City; State; Zip Code 811 Alpha Road Suite 34Richardson, TX 75081		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing 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 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: 2 of 4	2 FILER NAME John Botefuhr		3 Filer ID (Ethics Commission Filers)	
4 Date 03/26/2021	5 Payee name East Dallas Printing			
6 Amount (\$) 316.63	7 Payee address; City; State; Zip Code 222 Las Colinas Blvd W Writeg JTK 75039			
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/OI	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
03/29/2021	East Dallas Printing			
Amount (\$) 188.08	Payee address; City; State; Zip Code 222 Las Colinas Blvd W Swing JTK 75039			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Push cards		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date 04/02/2021	Payee name Minuteman Press			
Amount (\$) 8.24	Payee address; City; State; Zip Code 12640 E Northwest Hwy Suita s 4 TX 75228			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing 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
Others (actions extensions thirted above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 4	2 FILER NAME John Botefuhr		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2021	5 Payee name Rocket Science Group		
6 Amount (\$) 84.00	7 Payee address; City; State; Zip Code 675 Ponce De Leon Ave N#EaStrip C50000308		
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 04/07/2021	Payee name Veritex Bank		
Amount (\$) 18.00	Payee address; City; State; Zip Code 2101 Abrams Road Dallas, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wire fee	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date 03/24/2021	Payee name Veritex Bank		
Amount (\$) 35.00	Payee address; City; State; Zip Code 2101 Abrams Road Dallas, TX 75214		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		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 Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	end (end a dateger) not not above,
1 Total pages Schedule F1: 4 of 4	2 FILER NAME John Botefuhr		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2021	5 Payee name GoDaddy		
6 Amount (\$) 26.64	7 Payee address; City; State; Zip Code 14455 N Hayden Road Stitettsthale, AZ 85260		
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 03/23/2021	Payee name Einstein Printing		
Amount (\$) 2579.06	Payee address; City; State; Zip Code 1800 Surveyor Blvd Carrollton, TX 75006		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard signs	
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)		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