

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)		<b>2</b> Total pages filed: 107									
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Chad	MI A	<b>OFFICE USE ONLY</b>  Date Received     Date Hand-delivered or Date Postmarked   <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Receipt #</td> <td style="width: 50%; border: none;">Amount \$</td> </tr> </table> Date Processed  Date Imaged		Receipt #	Amount \$						
	Receipt #	Amount \$											
NICKNAME	LAST West	SUFFIX											
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3606 S Tyler Street Dallas TX 75224 <input type="checkbox"/> Change of Address													
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION ( 214 ) 509 7555													
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Benny	MI										
	NICKNAME	LAST Guzman	SUFFIX										
<b>7</b> CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 306 S Montreal Dallas TX 75208 (Residence or Business)													
<b>8</b> CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION ( )													
<b>9</b> REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)													
<b>10</b> PERIOD COVERED Month Day Year    Month Day Year 07 / 01 / 2022    THROUGH    12 / 31 / 2022													
<b>11</b> ELECTION <table style="width: 100%; border: none;"> <tr> <td style="width: 30%; border: none;">           ELECTION DATE            Month Day Year            05 / 06 / 2023         </td> <td style="width: 70%; border: none;">           ELECTION TYPE  <input type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other Description  <input checked="" type="checkbox"/> General    <input type="checkbox"/> Special         </td> </tr> </table>						ELECTION DATE Month Day Year 05 / 06 / 2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special						
ELECTION DATE Month Day Year 05 / 06 / 2023	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special												
<b>12</b> OFFICE OFFICE HELD (if any) Dallas City Council District 1			<b>13</b> OFFICE SOUGHT (if known) Council District 1										
<b>14</b> 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.													
<input type="checkbox"/> Additional Pages		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>				COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME												
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS												
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME												
	COMMITTEE CAMPAIGN TREASURER ADDRESS												

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>15 C/OH NAME</b> Chad A West		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 66876.10
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 57317.79
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 104658.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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

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

Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Chad West this the 17th day of January, 20 23, to certify which, witness my hand and seal of office.

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

OR

**(2) Unsworn Declaration**

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

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

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

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

**19** FILER NAME

Chad A West

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

**21** SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 66,876.10
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 57,317.79
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 1 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/01/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Bolding <hr/> <b>6</b> Contributor address; City; State; Zip Code 302 S. Rosemont Ave. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Hunt <hr/> Contributor address; City; State; Zip Code 8811 Antrim Dr. Dallas, TX 75218	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay J Revi <hr/> Contributor address; City; State; Zip Code 908 N. Bishop Ave. Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Melnick <hr/> Contributor address; City; State; Zip Code 2316 Kessler Pkwy Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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Forms provided by Texas Ethics Commission      [www.ethics.state.tx.us](http://www.ethics.state.tx.us)      Revised 8/17/2020

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 3 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/23/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Burns ..... <b>6</b> Contributor address; City; State; Zip Code 2420 S. Adams St. Ft. Worth, TX 76110	<b>7</b> Amount of contribution (\$) 474.70
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veletta Forsythe Lill ..... Contributor address; City; State; Zip Code 622 Blair Blvd. Dallas, TX 75223	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeremy Raines ..... Contributor address; City; State; Zip Code 2313 Ashland Ave. Fort Worth, TX 76107	Amount of contribution (\$) 949.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/23/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Urby ..... Contributor address; City; State; Zip Code 1364 Romano Place Dallas, TX 75215	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 4 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/24/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stefani Bradshaw <hr/> <b>6</b> Contributor address; City; State; Zip Code 2929 Wycliff Ave. Dallas, TX 75219	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Hill <hr/> Contributor address; City; State; Zip Code 604 Ft. Worth Ave. Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd Hill <hr/> Contributor address; City; State; Zip Code P.O. Box 192305 Dallas, TX 75219	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jake Gilbreath <hr/> Contributor address; City; State; Zip Code 2102 Sharon Ln. Austin, TX 78703	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 5 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/26/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea Haass <hr/> <b>6</b> Contributor address; City; State; Zip Code 3699 McKinney Ave. Suite 489D Dallas, TX 75204	<b>7</b> Amount of contribution (\$) 150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Hargraves <hr/> Contributor address; City; State; Zip Code 4201 Spring Valley Rd. Dallas, TX 75244	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant Woodruff <hr/> Contributor address; City; State; Zip Code 8315 Cabrera Dr. Dallas, TX 75228	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Veale <hr/> Contributor address; City; State; Zip Code 1717 Arts Plaza Suite 2207 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 6 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/28/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullen Dalheim <hr/> <b>6</b> Contributor address; City; State; Zip Code 127 Pittsburgh St. Dallas, TX 75207	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianne Edwards <hr/> Contributor address; City; State; Zip Code 223 S. Marlborough Ave. Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Smith <hr/> Contributor address; City; State; Zip Code 1402 Exeter Ct. Southlake, TX 76092	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Clark <hr/> Contributor address; City; State; Zip Code 6750 Hillcrest Plaza Dr. Dallas, TX 75230	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 7 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/29/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harold Ginsburg ..... <b>6</b> Contributor address; City; State; Zip Code 2610 Fairmount St. Dallas, TX 75201	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isabella Mohr ..... Contributor address; City; State; Zip Code 2736 Mateur St. Dallas, TX 75211	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Spence ..... Contributor address; City; State; Zip Code 408 W. 8th St. Suite 103 Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Chase ..... Contributor address; City; State; Zip Code 1700 Pacific Ave. Suite 3700 Dallas, TX 75201	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 8 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/02/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinton Haley <hr/> <b>6</b> Contributor address; City; State; Zip Code 6311 Club Lake Ct. Dallas, TX 75214	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Andres <hr/> Contributor address; City; State; Zip Code 2800 N. Henderson Ave. Dallas, TX 75206	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheryl Aukeman <hr/> Contributor address; City; State; Zip Code 1915 W. Colorado Blvd Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Connatser <hr/> Contributor address; City; State; Zip Code 815 W. Greenbriar Ln. Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9 of 34
2 FILER NAME Chad A West		3 Filer ID (Ethics Commission Filers)
4 Date 12/05/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nate Evans ..... 6 Contributor address; City; State; Zip Code 3572 Boone Park Ave. Jacksonville, FL 32205	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Garza ..... Contributor address; City; State; Zip Code 101 S. Jennings Ave. Suite 100 Ft. Worth, TX 76104	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonas Park ..... Contributor address; City; State; Zip Code 4333 Belmont Ave. Suite 2 Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Preziosi ..... Contributor address; City; State; Zip Code 2229 Lawndale Dr. Dallas, TX 75211	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 10 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/06/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Gruber <hr/> <b>6</b> Contributor address; City; State; Zip Code 1918 Olive St. Dallas, TX 75201	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucy Billingsley <hr/> Contributor address; City; State; Zip Code 1722 Routh St. Suite 770 Dallas, TX 75201	Amount of contribution (\$) 949.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucilo Peña <hr/> Contributor address; City; State; Zip Code 1717 Arts Plaza Suite 2311 Dallas, TX 75201	Amount of contribution (\$) 474.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Schorman <hr/> Contributor address; City; State; Zip Code 1219 N. Winnetka Ave. Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 11 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/09/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Taylor <hr/> <b>6</b> Contributor address; City; State; Zip Code 1147 N. Winnetka Ave. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 25.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Alvarado <hr/> Contributor address; City; State; Zip Code 318 S. Waverly Dr. Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy C Headington <hr/> Contributor address; City; State; Zip Code 1608 Main St. Suite 2 Dallas, TX 75201	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Matthews <hr/> Contributor address; City; State; Zip Code 320 W. Main St. Lewisville, TX 75057	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 12 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/10/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Pirkey <hr/> <b>6</b> Contributor address; City; State; Zip Code 1525 Parliament Ln. Plano, TX 75093	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Wilson <hr/> Contributor address; City; State; Zip Code 6208 Copperhill Dr. Dallas, TX 75248	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe McElroy <hr/> Contributor address; City; State; Zip Code 1207 Eldorado Ave. Dallas, TX 75208	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick Beitler <hr/> Contributor address; City; State; Zip Code 1218 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 13 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvia Camarillo	<b>7</b> Amount of contribution (\$) 500.00
<b>6</b> Contributor address; City; State; Zip Code 3 Richmond Ct. Mansfield, TX 76063		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leo Cusimano	Amount of contribution (\$) 237.20
Contributor address; City; State; Zip Code 1619 Sylvan Ave. Dallas, TX 75208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amy Davis	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1106 N. Clinton Ave Dallas, TX 75208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Socorro Dismore	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 1860 Masters Dr. Dallas, TX 75115		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 14 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Estrada <hr/> <b>6</b> Contributor address; City; State; Zip Code 1339 Cedar Hill Ave. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elisa Goodwin <hr/> Contributor address; City; State; Zip Code 2310 Broken Point McKinney, TX 75702	Amount of contribution (\$) 94.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane Hope Hamilton <hr/> Contributor address; City; State; Zip Code 623 Aspen Valley Ln. Dallas, TX 75208	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Junior Huerta <hr/> Contributor address; City; State; Zip Code 2135 Elmwood Blvd Dallas, TX 75224	Amount of contribution (\$) 800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 15 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Long ..... <b>6</b> Contributor address; City; State; Zip Code 3500 Kim Dr. Irving, TX 75061	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zachary Krochtengel ..... Contributor address; City; State; Zip Code 17014 Preston Bend Dr. Dallas, TX 75248	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolando Leal ..... Contributor address; City; State; Zip Code 414 N. Casa Grande Cir. Duncanville, TX 75116	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Andres ..... Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX 78760	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 16 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridget Lopez <hr/> <b>6</b> Contributor address; City; State; Zip Code 4326 Meadowdale Ln. Dallas, TX 75229	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norma Minnis <hr/> Contributor address; City; State; Zip Code P.O. Box 140977 Dallas, TX 75214	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marci Orr <hr/> Contributor address; City; State; Zip Code 211 S. Tyler St. Dallas, TX 75224	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerald Owens <hr/> Contributor address; City; State; Zip Code 1508 Winding Hollow Ln. Plano, TX 75093	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 17 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Ridley <hr/> <b>6</b> Contributor address; City; State; Zip Code 5100 Victor St. Dallas, TX 75214	<b>7</b> Amount of contribution (\$) 500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur Santa Maria <hr/> Contributor address; City; State; Zip Code 785 Huntingdon St. Coppell, TX 76501	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harold Thorne <hr/> Contributor address; City; State; Zip Code 3550 Gifco Rd. Midlothian, TX 76065	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Wedell <hr/> Contributor address; City; State; Zip Code 1318 Elmwood Blvd. Dallas, TX 75224	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 18 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/13/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Sievers ..... <b>6</b> Contributor address; City; State; Zip Code 8238 Barbaree Blvd. Dallas, TX 75228	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/13/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Smades ..... Contributor address; City; State; Zip Code 732 Kessler Lake Dr. Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lydia Addy ..... Contributor address; City; State; Zip Code 3805 Normandy Ave. Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Addy ..... Contributor address; City; State; Zip Code 3805 Normandy Ave. Dallas, TX 75205	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME

Chad A West

3 Filer ID (Ethics Commission Filers)

4 Date

12/16/2022

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Katherine Crow

7 Amount of contribution (\$)

1000.00

6 Contributor address;

4700 Preston Rd.

City;

Dallas, TX 75205

State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

12/16/2022

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ken Valach

Amount of contribution (\$)

1000.00

Contributor address;

5 Lazee Trail

City;

Houston, TX 77024

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/19/2022

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Zachary Baum

Amount of contribution (\$)

25.00

Contributor address;

P.O. Box 587

City;

East Setauket, NY 11733

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/20/2022

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Kevin Bryant

Amount of contribution (\$)

142.20

Contributor address;

4463 Brookview Dr.

City;

Dallas, TX 75220

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 20 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/20/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harlan Crow ..... <b>6</b> Contributor address; City; State; Zip Code 3819 Maple Ave. Dallas, TX 75219	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/21/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock Ellison ..... <b>Contributor address;</b> City; State; Zip Code 6405 Marquett Dr. Rowlett, TX 75089	<b>Amount of contribution (\$)</b> 50.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/21/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Crystal Gonzalez ..... <b>Contributor address;</b> City; State; Zip Code 6231 Meadow Rd. Dallas, TX 75230	<b>Amount of contribution (\$)</b> 500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/27/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Becky Connatser ..... <b>Contributor address;</b> City; State; Zip Code 815 W. Greenbriar Ln. Dallas, TX 75208	<b>Amount of contribution (\$)</b> 250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 21 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/27/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Edgemon ..... <b>6</b> Contributor address; City; State; Zip Code 5540 Farquhar Dallas, TX 75209	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/27/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Clyde Greenhouse ..... <b>Contributor address;</b> City; State; Zip Code 1129 N. Beckley Ave Dallas, TX 75208	<b>Amount of contribution (\$)</b> 100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/27/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Steve Kemble ..... <b>Contributor address;</b> City; State; Zip Code 2206 Marilla St. Dallas, TX 75201	<b>Amount of contribution (\$)</b> 250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/27/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jill McLaren ..... <b>Contributor address;</b> City; State; Zip Code 6051 Kenwood Ave. Dallas, TX 75206	<b>Amount of contribution (\$)</b> 237.20
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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# MONETARY POLITICAL CONTRIBUTIONS

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 22 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/27/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence Worden <hr/> <b>6</b> Contributor address; City; State; Zip Code 2019 Old Orchard Dr. Dallas, TX 75230	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ed Wynne <hr/> Contributor address; City; State; Zip Code 1225 Lausanne Ave Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan Hampton <hr/> Contributor address; City; State; Zip Code 2501 N. Harwood St. Suite 2400 Dallas, TX 75201	Amount of contribution (\$) 189.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas Hellyar <hr/> Contributor address; City; State; Zip Code 2368 Rice Blvd Houston, TX 77005	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/28/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dianna Lawrence ..... <b>6</b> Contributor address; City; State; Zip Code 1905 Mar West St. Tiburon, CA 94920	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 12/28/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Linburg ..... <b>Contributor address;</b> City; State; Zip Code 5619 Purdue Ave. Dallas, TX 75209	<b>Amount of contribution (\$)</b> 1000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/28/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Will Rouse ..... <b>Contributor address;</b> City; State; Zip Code 2501 N. Harwood St. Dallas, TX 75201	<b>Amount of contribution (\$)</b> 189.70
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/29/2022	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Kingston ..... <b>Contributor address;</b> City; State; Zip Code 5901 Palo Pinto Ave. Dallas, TX 75206	<b>Amount of contribution (\$)</b> 1000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
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## SCHEDULE A1

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<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/29/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Larsen <hr/> <b>6</b> Contributor address; City; State; Zip Code 665 Kessler Reserve Ct. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayla McGinnis <hr/> Contributor address; City; State; Zip Code 4144 N Central Expwy. Dallas, TX 75204	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohan Bhatt <hr/> Contributor address; City; State; Zip Code 5932 Rosebud Dr. Dallas, TX 75252	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Culak <hr/> Contributor address; City; State; Zip Code 1223 Kings Hwy. Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 25 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/30/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Huerta <hr/> <b>6</b> Contributor address; City; State; Zip Code 1414 Cedar Hill Ave. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Ann Jenkins <hr/> Contributor address; City; State; Zip Code 744 S. Manus Dr. Dallas, TX 75224	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Spence <hr/> Contributor address; City; State; Zip Code 1921 Marydale Dr. Dallas, TX 75208	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin Ardendorff <hr/> Contributor address; City; State; Zip Code 3508 Bryn Mawr Dr. Dallas, TX 75225	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 26 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doug Banerjee <hr/> <b>6</b> Contributor address; City; State; Zip Code 6911 Ellsworth Ave. Dallas, TX 75214	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberta Christopher <hr/> Contributor address; City; State; Zip Code 307 N. Windomere Ave. Dallas, TX 75208	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Coffee <hr/> Contributor address; City; State; Zip Code 2169 Kessler Ct. Dallas, TX 75208	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byron Cryer <hr/> Contributor address; City; State; Zip Code 627 Kessler Lake Dr Dallas, TX 75208	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 27 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiffany Hicks <hr/> <b>6</b> Contributor address; City; State; Zip Code 740 Rainbow Dr. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Johnson <hr/> Contributor address; City; State; Zip Code 3525 Turtle Creek Blvd. Dallas, TX 75219	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Lamb <hr/> Contributor address; City; State; Zip Code 5630 Willis Ave. Dallas, TX 75206	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Lamb <hr/> Contributor address; City; State; Zip Code 5630 Willis Ave. Dallas, TX 75206	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 28 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Linburg <hr/> <b>6</b> Contributor address; City; State; Zip Code 4660 N. Versailles Ave. Dallas, TX 75209	<b>7</b> Amount of contribution (\$) 250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krista Nightengale <hr/> Contributor address; City; State; Zip Code 1623 Main St. Suite 512 Dallas, TX 75201	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin Orr <hr/> Contributor address; City; State; Zip Code 518 N. Manus Dr. Dallas, TX 75222	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joel Perez <hr/> Contributor address; City; State; Zip Code 1303 Lansford Ave. Dallas, TX 75224	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 29 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Smith ..... <b>6</b> Contributor address; City; State; Zip Code 3210 Carlisle St. Dallas, TX 75204	<b>7</b> Amount of contribution (\$) 100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David White ..... Contributor address; City; State; Zip Code 15750 Spectrum Dr. Addison, TX 75001	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Megan Wood ..... Contributor address; City; State; Zip Code 5121 Southbrook Dr. Dallas, TX 75209	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Zielinski ..... Contributor address; City; State; Zip Code 2717 Conflans Rd. Irving, TX 75061	Amount of contribution (\$) 237.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		



## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 30 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/12/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathy Hewitt ..... <b>6</b> Contributor address; City; State; Zip Code 1410 Yakimo Dr. Dallas, TX 75208	<b>7</b> Amount of contribution (\$) 474.70
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Homan ..... Contributor address; City; State; Zip Code 1629 Handley Dr. Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Parker ..... Contributor address; City; State; Zip Code 13330 Noel Rd. Dallas, TX 75240	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy Headington ..... Contributor address; City; State; Zip Code 1608 Main St. Suite 2 Dallas, TX 75201	Amount of contribution (\$) 4000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

## SCHEDULE A1

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

The Instruction Guide explains how to complete this form.						1 Total pages Schedule A1: 31 of 34	
2 FILER NAME Chad A West						3 Filer ID (Ethics Commission Filers)	
4 Date 12/10/2022		5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:_____)  John Matthews				7 Amount of contribution (\$)  1000.00	
		6 Contributor address;                          City;                          State;    Zip Code 320 W. Main St.    Lewisville, TX 75057					
8 Principal occupation / Job title (See Instructions)				9 Employer (See Instructions)			
Date 12/12/2022		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:_____)  Jennifer Owen				Amount of contribution (\$)  100.00	
		Contributor address;                          City;                          State;    Zip Code 6541 Arborist Ln.    Dallas, TX 75214					
Principal occupation / Job title (See Instructions)				Employer (See Instructions)			
Date 12/13/2022		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:_____)  Jane Weempe				Amount of contribution (\$)  1000.00	
		Contributor address;                          City;                          State;    Zip Code 1316 W. Canterbury Ct.    Dallas, TX 75208					
Principal occupation / Job title (See Instructions)				Employer (See Instructions)			
Date 12/29/2022		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:_____)  Harold Ginsburg				Amount of contribution (\$)  1000.00	
		Contributor address;                          City;                          State;    Zip Code 2610 Fairmount St.    Dallas, TX 75201					
Principal occupation / Job title (See Instructions)				Employer (See Instructions)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.							

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 32 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/29/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry Hancock <hr/> <b>6</b> Contributor address; City; State; Zip Code 3843 Maplewood Ave. Dallas, TX 75205	<b>7</b> Amount of contribution (\$) 949.70
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Anderson <hr/> Contributor address; City; State; Zip Code 2929 Carlisle St. Suite 210 Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Schenkel <hr/> Contributor address; City; State; Zip Code 3610 Turtle Creek Blvd. Suite 12B Dallas, TX 75219	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Schenkel <hr/> Contributor address; City; State; Zip Code 3105 Stanford Avenue Dallas, TX 75225	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 33 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joanna Lindegaard <hr/> <b>6</b> Contributor address; City; State; Zip Code 133 E De La Guerra St Suite 42 Santa Barbara, CA 93101	<b>7</b> Amount of contribution (\$) 4000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joanna Lindegaard <hr/> Contributor address; City; State; Zip Code 133 E De La Guerra St Suite 42 Santa Barbara, CA 93101	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Roberts <hr/> Contributor address; City; State; Zip Code 3306 Stanford Avenue Dallas, TX 75205	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pete Schenkel <hr/> Contributor address; City; State; Zip Code 614 N Bishop Dallas, TX 75208	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: 34 of 34
<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/31/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Pitts <hr/> <b>6</b> Contributor address; City; State; Zip Code 3525 Turtle Creek Blvd. Dallas, TX 75219	<b>7</b> Amount of contribution (\$) 1000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trammell Crow <hr/> Contributor address; City; State; Zip Code 4000 Rock Creek Drive Dallas, TX 75204	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWA Freedom Fund PAC <hr/> Contributor address; City; State; Zip Code P.O. Box 36611 Dallas, TX 75235	Amount of contribution (\$) 1500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/20/2022	<b>5</b> Payee name Legal Hospice of Texas	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 1825 Market Center Boulevard, Suite 7500 Dallas, TX 75207	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/20/2022	Candidate / Officeholder name Container Store	
Amount (\$) 126.54	Office sought 7700 W Northwest HW Dallas, TX 75225	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Storage Containers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/21/2022	Candidate / Officeholder name Ascension Coffee	
Amount (\$) 38.48	Office sought 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting re Housing Policy
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/21/2022	<b>5</b> Payee name Central Computer & Networks	
<b>6</b> Amount (\$) 238.15	<b>7</b> Payee address; City; State; Zip Code P.O. Box 860337 Plano, TX 75086	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Email Service Expense
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/21/2022	Payee name Roots Market	
Amount (\$) 76.73	Payee address; City; State; Zip Code 4164 N HW 75 Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Gift for event host
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/25/2022	Payee name Enos Pizza	
Amount (\$) 25.65	Payee address; City; State; Zip Code 407 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Lunch with neighborhood president
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3 of 70	<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/25/2022	<b>5</b> Payee name Round Up Saloon		
<b>6</b> Amount (\$) 36.00	<b>7</b> Payee address; City; State; Zip Code 3912 Cedar Springs RoadDallas, TX 75219		
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense		<b>(b)</b> Description Meeting with supporter
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Date 07/25/2022	Candidate / Officeholder name Eggsellent Café		
Amount (\$) 80.58	Payee address; City; State; Zip Code 4218 Lemmon Avenue Dallas, TX 75219		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense		Description Breakfast with donors
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Date 07/25/2022	Candidate / Officeholder name Ame		
Amount (\$) 123.10	Payee address; City; State; Zip Code 418 N Bishop Avenue Dallas, TX 75208		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift		Description Gift for event host
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 4 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/25/2022	<b>5</b> Payee name Lowes	
<b>6</b> Amount (\$) 260.95	<b>7</b> Payee address; City; State; Zip Code 8520 S Hampton Road Dallas, TX 75228	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Shelving for sign storage
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 07/25/2022	Payee name Chad West	
Amount (\$) 97.71	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meal Reimbursement for meetings
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 07/25/2022	Payee name Oak Cliff Chamber of Commerce	
Amount (\$) 500.00	Payee address; City; State; Zip Code 400 South Zang Boulevard Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Corn Hole Tournament
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 5 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/26/2022	<b>5</b> Payee name Container Store	
<b>6</b> Amount (\$) 250.41	<b>7</b> Payee address; City; State; Zip Code 7700 W Northwest HW Dallas, TX 75225	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Storage Containers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/28/2022	Payee name CVS Pharmacy	
Amount (\$) 63.29	Payee address; City; State; Zip Code 108 W Davis Street Dallas, TX 75203	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Greeting Cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2022	Payee name Taco y Vino	
Amount (\$) 100.00	Payee address; City; State; Zip Code 213 W 8th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Gift Card for Event Host
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 6 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 07/29/2022	<b>5</b> Payee name Society By JV	
<b>6</b> Amount (\$) 192.69	<b>7</b> Payee address; City; State; Zip Code 403 N Bishop Avenue Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Gifts for Event Hosts
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2022	Payee name Paradiso	
Amount (\$) 200.00	Payee address; City; State; Zip Code 308 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Gift Cards for Volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 07/29/2022	Payee name Taco y Vino	
Amount (\$) 205.00	Payee address; City; State; Zip Code 213 W 8th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Volunteer Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 7 of 70		<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 07/29/2022		<b>5</b> Payee name Dybou LLC			
<b>6</b> Amount (\$) 455.89		<b>7</b> Payee address; 4514 Travis Street      Dallas, TX 75205 City;      State;      Zip Code			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead		<b>(b)</b> Description Website Revisions		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name      Office sought      Office held					
Date 07/29/2022		Payee name Maria Salazar			
Amount (\$) 572.00		Payee address; 2605 East Ledbetter Drive      Dallas, TX 75216 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor		Description Campaign Office Cleaning - quarterly		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name      Office sought      Office held					
Date 08/01/2022		Payee name Katy Seitzler			
Amount (\$) 87.50		Payee address; 217 Sycamore Creek Road      Allen, TX 75002 City;      State;      Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor		Description Email Marketing and Campaign Communications		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name      Office sought      Office held					
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 8 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/01/2022	<b>5</b> Payee name Eggsellent Café	
<b>6</b> Amount (\$) 111.24	<b>7</b> Payee address; City; State; Zip Code 4218 Lemmon Avenue Dallas, TX 75219	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Meeting with supporters
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/01/2022	Payee name DirtFlowers	
Amount (\$) 162.38	Payee address; City; State; Zip Code 417 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/01/2022	Payee name Dallas County Democratic Party	
Amount (\$) 250.00	Payee address; City; State; Zip Code 1414 N Washington Avenue Dallas, TX 75204	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation for event
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 9 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/01/2022	<b>5</b> Payee name American Airlines	
<b>6</b> Amount (\$) 749.60	<b>7</b> Payee address; City; State; Zip Code 1 Skyview Drive Euless, TX 76040	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description Flight Expense
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/02/2022	Payee name VRBO	
Amount (\$) 2100.50	Payee address; City; State; Zip Code 11800 Domain Blvd Suite 300, TX 78759	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Lodging Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/03/2022	Payee name Glorias Restaurant	
Amount (\$) 74.90	Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Chamber President
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 10 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/03/2022	<b>5</b> Payee name Sketches of Spain	
<b>6</b> Amount (\$) 90.78	<b>7</b> Payee address; City; State; Zip Code 321 N Zang Blvd Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Meeting with Housing Advocates
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/04/2022	Payee name Green Mountain Energy	
Amount (\$) 506.31	Payee address; City; State; Zip Code P.O. Box 121233 Dallas, TX 75312	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Billboard
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/09/2022	Payee name Central Computer & Networks	
Amount (\$) 340.98	Payee address; City; State; Zip Code P.O. Box 860337 Plano, TX 75086	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Computer Conversion
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 70	2 FILER NAME Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 08/09/2022	5 Payee name DEX Imaging	
6 Amount (\$) 98.86	7 Payee address; City; State; Zip Code P.O. Box 17299 Clearwater, FL 33762	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead	(b) Description Printer/Copier Service
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/09/2022	Payee name Chad West	
Amount (\$) 174.42	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting Expense Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/11/2022	Payee name Ascension Coffee	
Amount (\$) 19.24	Payee address; City; State; Zip Code 7700 W Northwest HW Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food expense	Description Working Breakfast with Volunteer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 12 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/11/2022	<b>5</b> Payee name Express Shop	
<b>6</b> Amount (\$) 32.90	<b>7</b> Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Greeting Cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/12/2022	Payee name Target	
Amount (\$) 287.77	Payee address; City; State; Zip Code 735 N HW 67 Cedar Hill, TX 75104	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Supplies for Youth Sports Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/12/2022	Payee name Chad West	
Amount (\$) 300.00	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 70	2 FILER NAME Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Payee name The 23rd Senatorial District	
6 Amount (\$) 20.00	7 Payee address; City; State; Zip Code 10432 High Hollows Drive Dallas, TX 75230	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Renewal Membership Dues
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/15/2022	Payee name Chad West	
Amount (\$) 380.00	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Block Walking Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/16/2022	Payee name Lambda Legal	
Amount (\$) 1750.00	Payee address; City; State; Zip Code 120 Wall Street Suite 1900 New York, NY 10005	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Liberty Circle Membership
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 14 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/16/2022	<b>5</b> Payee name Maria Salzar	
<b>6</b> Amount (\$) 300.00	<b>7</b> Payee address; City; State; Zip Code 2605 East Ledbetter Drive Dallas, TX 75216	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Sign Storage and Cleaning
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/15/2022	Payee name North Oak Cliff Greenspace Inc	
Amount (\$) 1250.00	Payee address; City; State; Zip Code 1005 North Montclair Ave Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Golf Tournament Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/17/2022	Payee name Ascension Coffee	
Amount (\$) 26.93	Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with City Staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 15 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/19/2022	<b>5</b> Payee name Color Me Empowered	
<b>6</b> Amount (\$) 1000.00	<b>7</b> Payee address; City; State; Zip Code 2101 West Clarendon Dr Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Sponsorship for Childrens Programming
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/19/2022	Payee name Wholefoods	
Amount (\$) 75.52	Payee address; City; State; Zip Code 4100 Lomo Alto Drive Dallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Cookies and snacks for Security Team
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/19/2022	Payee name Vivint	
Amount (\$) 64.38	Payee address; City; State; Zip Code 62992 Collection Drive Chicago, IL 60693	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office Alarm
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 16 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/22/2022	<b>5</b> Payee name Benny Guzman	
<b>6</b> Amount (\$) 210.00	<b>7</b> Payee address; City; State; Zip Code 306 S Montreal Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Wages
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/22/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 20.07	Payee name Oak Cliff Brewing Payee address; City; State; Zip Code 1300 S Polk Street Suite 201 Dallas, TX 75228	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Beverage expense	Description Meeting with Neighbors
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/22/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 179.18	Payee name Qualigraphics Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Postcards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 17 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/22/2022	<b>5</b> Payee name Oak Cliff Lions Club	
<b>6</b> Amount (\$) 50.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Membership Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/22/2022	Payee name Oak Cliff Chamber of Commerce	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 400 South Zang Boulevard Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/22/2022	Payee name Perlas Seafood	
Amount (\$) 266.45	Payee address; City; State; Zip Code 1400 S Congress Ave Austin, TX 78704	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Austin Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 18 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/23/2022	<b>5</b> Payee name QT	
<b>6</b> Amount (\$) 11.92	<b>7</b> Payee address; City; State; Zip Code 2350 S New Road Waco, TX 78221	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description Travel Expense
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/23/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 63.43	Payee name QT Payee address; City; State; Zip Code 2350 S New Road Waco, TX 78221	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Travel Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/23/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 87.72	Payee name Tom Thumb Payee address; City; State; Zip Code 2380 N Field Street Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Plants for Council Office
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 19 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/23/2022	<b>5</b> Payee name Fairmont	
<b>6</b> Amount (\$) 1211.11	<b>7</b> Payee address; City; State; Zip Code 101 Red River Street Austin, TX 78701	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description Travel Expense
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/24/2022	Payee name R+D	
Amount (\$) 177.22	Payee address; City; State; Zip Code 8300 Preston Center Plaza Dallas, TX 75110	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Potential Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/25/2022	Payee name Mailchimp	
Amount (\$) 100.46	Payee address; City; State; Zip Code 675 Ponce De Leon Ave Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Marketing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 20 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/25/2022	<b>5</b> Payee name Glorias Restaurant	
<b>6</b> Amount (\$) 109.85	<b>7</b> Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Meeting with Donor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/26/2022	Payee name Signs Manufacturing	
Amount (\$) 744.11	Payee address; City; State; Zip Code 4610 Mint Way Dallas, TX 75236	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Billboard
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/26/2022	Payee name Total Wine	
Amount (\$) 106.05	Payee address; City; State; Zip Code 428 E Farm to Market Road, Dallas, TX 75104	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Supporters
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 21 of 70		<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 08/29/2022		<b>5</b> Payee name Eggsellent Café			
<b>6</b> Amount (\$) 48.74		<b>7</b> Payee address; City; State; Zip Code 4218 Lemmon Avenue Dallas, TX 75219			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense		<b>(b)</b> Description Meeting with Finance Advisor		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/29/2022		Payee name Glorias Restaurant			
Amount (\$) 81.11		Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense		Description Meeting with Housing Policy Advisor		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 08/29/2022		Payee name Virgin Hotel			
Amount (\$) 179.39		Payee address; City; State; Zip Code 1445 Turtle Creek Blvd Dallas, TX 75207			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation		Description Meeting with Potential Donors		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<div style="text-align: center;"> <b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> </div>					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 22 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/29/2022	<b>5</b> Payee name Dominique Torres for Judge	
<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code 1910 Pacific Avenue Suite 107, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Campaign Contribution
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/30/2022	Payee name Tjs Fish Market	
Amount (\$) 75.26	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Potential Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/30/2022	Payee name Dallas House of Flowers	
Amount (\$) 254.58	Payee address; City; State; Zip Code 2410 W Red Bird Lane Dallas, TX 75237	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 23 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/30/2022	<b>5</b> Payee name Shutterfly	
<b>6</b> Amount (\$) 304.51	<b>7</b> Payee address; City; State; Zip Code 2800 Bridge Parkway Redwood City, CA 94065	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description Print Materials - Stationary
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 08/31/2022	Payee name Tjs Fish Market	
Amount (\$) 74.03	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Potential Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/01/2022	Payee name Gogoa	
Amount (\$) 19.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Wifi Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 24 of 70	2 FILER NAME Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 09/01/2022	5 Payee name The Dallas Assembly	
6 Amount (\$) 51.50	7 Payee address; City; State; Zip Code 12900 Preston Road Suite 1110, Dallas, TX 75230	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Event Expense
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/02/2022	Payee name Viasat In-Flight	
Amount (\$) 19.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Wifi Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/02/2022	Payee name Gogoa	
Amount (\$) 19.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Wifi Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 25 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/06/2022	<b>5</b> Payee name Murray Food	
<b>6</b> Amount (\$) 55.20	<b>7</b> Payee address; City; State; Zip Code 24550 Overseas HW Summerland, FL 33042	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description Travel Expense
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/06/2022	Payee name Katy Seitzler	
Amount (\$) 175.00	Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Email Marketing and Campaign Communications
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/06/2022	Payee name Venture Out	
Amount (\$) 63.87	Payee address; City; State; Zip Code 701 Spanish Main Drive Cudjoe Key, FL 33042	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Travel Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 26 of 70	2 FILER NAME Chad A West	3 Filer ID (Ethics Commission Filers)
4 Date 09/06/2022	5 Payee name Tonio Seafood	
6 Amount (\$) 122.63	7 Payee address; City; State; Zip Code 25165 Overseas HW Summerland, FL 33042	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fundraising Solicitation	(b) Description Meeting with Potential Donor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/06/2022	Payee name Tonio Seafood	
Amount (\$) 156.69	Payee address; City; State; Zip Code 25165 Overseas HW Summerland, FL 33042	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Potential Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/30/2022	Payee name SPCA of Texas	
Amount (\$) 800.00	Payee address; City; State; Zip Code 2400 Lone Star Drive Dallas, TX 75212	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Fur Ball Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 27 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/07/2022	<b>5</b> Payee name Advocate Publish	
<b>6</b> Amount (\$) 507.00	<b>7</b> Payee address; City; State; Zip Code 6301 Gaston Avenue Suite 820, TX 75214	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Digital Advertising
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/09/2022	Payee name Viasat In-Flight	
Amount (\$) 19.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Wifi Expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/09/2022	Payee name Twist	
Amount (\$) 126.00	Payee address; City; State; Zip Code 1057 Washington Avenue Miami, FL 33139	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 28 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/09/2022	<b>5</b> Payee name Baoli	
<b>6</b> Amount (\$) 200.17	<b>7</b> Payee address; City; State; Zip Code 1906 Collins Avenue Miami, FL 33139	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Dinner with donor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/09/2022	Payee name Jaynie Schultz Campaign	
Amount (\$) 250.00	Payee address; City; State; Zip Code 11222 St Michaels DriveDallas, TX 75230	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contribution	Description Campaign Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/09/2022	Payee name The Kessler School	
Amount (\$) 500.00	Payee address; City; State; Zip Code 1215 Turner Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 29 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/09/2022	<b>5</b> Payee name Chad West	
<b>6</b> Amount (\$) 450.00	<b>7</b> Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Reimbursement for Labor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/09/2022	Payee name 1010 Partnership LLC	
Amount (\$) 532.05	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Reimbursement for sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/09/2022	Payee name Benny Guzman	
Amount (\$) 300.00	Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Dallas Fire Rescue Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 30 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/09/2022	<b>5</b> Payee name The Lullaby House	
<b>6</b> Amount (\$) 200.00	<b>7</b> Payee address; City; State; Zip Code 7441 Marvin D Love Freddysville TX 76137	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2022	Candidate / Officeholder name Texas Equality PAC	
Amount (\$) 1000.00	Office sought Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2022	Candidate / Officeholder name Chad West	
Amount (\$) 79.31	Office sought Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Reimbursement for Meals
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 31 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/12/2022	<b>5</b> Payee name Hat Creek Burger	
<b>6</b> Amount (\$) 33.72	<b>7</b> Payee address; City; State; Zip Code 8185 Walnut Hill Lane Dallas, TX 75231	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Meeting with Supporter
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/12/2022	Payee name Cedar Springs Tap House	
Amount (\$) 77.08	Payee address; City; State; Zip Code 4123 Cedar Springs Road Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Supporter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/14/2022	Payee name The Network	
Amount (\$) 29.28	Payee address; City; State; Zip Code 331 Singleton Blvd Dallas, TX 75212	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Constituant
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 32 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/14/2022	<b>5</b> Payee name Tjs Fish Market	
<b>6</b> Amount (\$) 67.34	<b>7</b> Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Meeting with Fundraising Organizer
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/14/2022	Payee name Oak Cliff Lions Club	
Amount (\$) 50.50	Payee address; P.O. Box 4445 Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Membership Dues
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/15/2022	Payee name Taco y Vino	
Amount (\$) 38.85	Payee address; 213 W 8th Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Historic Preservationists
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 33 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/16/2022	<b>5</b> Payee name Walgreens	
<b>6</b> Amount (\$) 188.25	<b>7</b> Payee address; City; State; Zip Code 1306 N Beckley Ave Dallas, TX 75203	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gifts	<b>(b)</b> Description Cards and Gift Cards
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/19/2022	Payee name Ascension Coffee	
Amount (\$) 19.88	Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Policy Advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/19/2022	Payee name Benny Guzman	
Amount (\$) 200.00	Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Mileage Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 34 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/19/2022	<b>5</b> Payee name Katy Trail Ice House	
<b>6</b> Amount (\$) 37.09	<b>7</b> Payee address; City; State; Zip Code 3127 Routh Street Dallas, TX 75219	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Meeting with Potential Donor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/19/2022	Payee name La Reunion	
Amount (\$) 42.80	Payee address; City; State; Zip Code 229 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Party Organizer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/19/2022	Payee name Xaman Café	
Amount (\$) 78.23	Payee address; City; State; Zip Code 334 Jefferson Blvd Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Constituents
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 35 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/19/2022	<b>5</b> Payee name Nova Dallas	
<b>6</b> Amount (\$) 102.27	<b>7</b> Payee address; City; State; Zip Code 1417 W Davis Street Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Meeting with potential donor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/19/2022	Payee name Tjs Fish Market	
Amount (\$) 138.97	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with confirmed donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/19/2022	Payee name The Pour House	
Amount (\$) 194.89	Payee address; City; State; Zip Code 1300 W Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 36 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/19/2022	<b>5</b> Payee name Turner House	
<b>6</b> Amount (\$) 250.00	<b>7</b> Payee address; City; State; Zip Code 401 N Rosemont Ave Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Event Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/21/2022	Payee name Tjs Fish Market	
Amount (\$) 35.65	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Lunch with Real Estate Policy Advisor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/21/2022	Payee name ActBlue Rafael Anchia	
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contribution	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 37 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/22/2022	<b>5</b> Payee name Ascension Coffee	
<b>6</b> Amount (\$) 19.54	<b>7</b> Payee address; 200 Crescent Court Suite 200 Dallas, TX 75201 City; State; Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Working lunch
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/22/2022	Payee name Parigi Restaurant	
Amount (\$) 133.25	Payee address; 3311 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Thank you dinner with retiring commissioner
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/22/2022	Payee name Communities Foundation of Texas	
Amount (\$) 165.00	Payee address; 5500 Caruth Haven Lane Dallas, TX 75225 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 38 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/23/2022	<b>5</b> Payee name Ascension Coffee	
<b>6</b> Amount (\$) 17.59	<b>7</b> Payee address; City; State; Zip Code 200 Crescent Court Suite 200 Dallas, TX 75201	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Coffee Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/26/2022	Payee name Glorias Restaurant	
Amount (\$) 37.31	Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/26/2022	Payee name Mailchimp	
Amount (\$) 104.46	Payee address; City; State; Zip Code 675 Ponce De Leon Ave Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Electronic Mail subscription
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 39 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/27/2022	<b>5</b> Payee name Benny Guzman	
<b>6</b> Amount (\$) 40.00	<b>7</b> Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Adamson HS Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 09/27/2022	Payee name Chad West	
Amount (\$) 50.74	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meal Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/03/2022	Payee name Dallas Youth Sports	
Amount (\$) 1000.00	Payee address; City; State; Zip Code 2524 West Ledbetter Drive Dallas, TX 75233	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 40 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/03/2022	<b>5</b> Payee name Shutterfly	
<b>6</b> Amount (\$) 11.13	<b>7</b> Payee address; City; State; Zip Code 2800 Bridge Parkway Redwood City, CA 94065	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Photos for gift
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2022	Payee name Glorias Restaurant	
Amount (\$) 65.13	Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/03/2022	Payee name Cadence Bank	
Amount (\$) 36.00	Payee address; City; State; Zip Code 305 E Colorado Blvd Dallas, TX 75203	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Stop item
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 41 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/04/2022	<b>5</b> Payee name Oddfellows	
<b>6</b> Amount (\$) 7.82	<b>7</b> Payee address; City; State; Zip Code 316 W 7th Street Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Coffee Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/04/2022	Payee name Village Burger	
Amount (\$) 26.14	Payee address; City; State; Zip Code 3699 McKinney Avenue Dallas, TX 75210	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Lunch meeting with city staff
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/05/2022	Payee name Cannons Irish Pub	
Amount (\$) 11.41	Payee address; City; State; Zip Code 1314 W Davis Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Beverage expense	Description Meeting with neighborhood leadership
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 42 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/05/2022	<b>5</b> Payee name Wholefoods	
<b>6</b> Amount (\$) 28.65	<b>7</b> Payee address; City; State; Zip Code 4100 Lomo Alto Drive Dallas, TX 75205	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Flowers
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/05/2022	Payee name Oddfellows	
Amount (\$) 29.90	Payee address; City; State; Zip Code 316 W 7th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with BADMA
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/05/2022	Payee name Xaman Café	
Amount (\$) 59.64	Payee address; City; State; Zip Code 334 Jefferson Blvd Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Residents
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 43 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/05/2022	<b>5</b> Payee name Tjs Fish Market	
<b>6</b> Amount (\$) 67.34	<b>7</b> Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Meeting with Donor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/05/2022	Payee name Delphinium	
Amount (\$) 135.26	Payee address; City; State; Zip Code 5806 W Lovers Lane Dallas, TX 75205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Floral Arrangement and Delivery
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/05/2022	Payee name Chad West	
Amount (\$) 1276.02	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Reimbursement for contract labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 44 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/06/2022	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 300.00	<b>7</b> Payee address; City; State; Zip Code 2211 N First Street San Jose, CA 95131	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Web hosting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/07/2022	Payee name DFW Airport Park DFW	
Amount (\$) 54.00	Payee address; City; State; Zip Code 2400 Aviation Drive DFW Airport, TX 75261	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/07/2022	Payee name The Kessler School	
Amount (\$) 2000.00	Payee address; City; State; Zip Code 1215 Turner Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 45 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/11/2022	<b>5</b> Payee name Dallas LGBTQ Bar	
<b>6</b> Amount (\$) 50.00	<b>7</b> Payee address; City; State; Zip Code 2100 Ross Avenue Dallas, TX 75201	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Membership Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2022	Payee name Walgreens	
Amount (\$) 56.56	Payee address; City; State; Zip Code 1306 N Beckley Ave Dallas, TX 75203	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Cards and Gift Cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2022	Payee name Mariott	
Amount (\$) 58.88	Payee address; City; State; Zip Code 889 E Market Street San Antonio, TX 78205	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meal expense
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 46 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/11/2022	<b>5</b> Payee name Fair Park	
<b>6</b> Amount (\$) 75.00	<b>7</b> Payee address; City; State; Zip Code 1462 First Ave Dallas, TX 75210	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2022	Payee name ActBlue Rochell Garza	
Amount (\$) 100.00	Payee address; City; State; Zip Code P.O. Box 5683 Brownsville, TX 78523	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contribution	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/11/2022	Payee name Nuvo	
Amount (\$) 416.75	Payee address; City; State; Zip Code 3311 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gifts	Description Gifts for Retiring Commissioners
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 47 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/12/2022	<b>5</b> Payee name Oddfellows	
<b>6</b> Amount (\$) 15.30	<b>7</b> Payee address; City; State; Zip Code 316 W 7th Street Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Coffee Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/12/2022	Payee name Stevens Park Golf Course	
Amount (\$) 16.18	Payee address; City; State; Zip Code 1005 N Montclair Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Beverage expense	Description Meeting with NOCGS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/12/2022	Payee name Taco y Vino	
Amount (\$) 38.56	Payee address; City; State; Zip Code 213 W 8th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 48 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/13/2022	<b>5</b> Payee name Stevens Park Golf Course	
<b>6</b> Amount (\$) 9.95	<b>7</b> Payee address; City; State; Zip Code 1005 N Montclair Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Meeting with NOCGS
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/13/2022	Payee name Tjs Fish Market	
Amount (\$) 50.65	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Potential Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/13/2022	Payee name GoDaddy	
Amount (\$) 136.94	Payee address; City; State; Zip Code 14455 N Hayden Road Scottsdale, AZ 85260	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Web hosting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 49 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/13/2022	<b>5</b> Payee name At&t Mobility	
<b>6</b> Amount (\$) 49.52	<b>7</b> Payee address; City; State; Zip Code P.O. Box 6463 Carol Stream, IL 60197	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Communication Phone
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/14/2022	Payee name Chad West	
Amount (\$) 150.00	Payee address; City; State; Zip Code 810 North Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Campaign Labor Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/14/2022	Payee name Tyler Arts District Investments, LLC	
Amount (\$) 255.00	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Office Rent
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 50 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/14/2022	<b>5</b> Payee name Rosemont Dads	
<b>6</b> Amount (\$) 1500.00	<b>7</b> Payee address; City; State; Zip Code 719 N Montclair Ave Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/17/2022	Payee name Sketches of Spain	
Amount (\$) 22.32	Payee address; City; State; Zip Code 321 N Zang Blvd Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Beverage expense	Description Coffee Meeting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/17/2022	Payee name Glorias Restaurant	
Amount (\$) 40.65	Payee address; City; State; Zip Code 600 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Endorser
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 51 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/18/2022	<b>5</b> Payee name Village Burger	
<b>6</b> Amount (\$) 11.83	<b>7</b> Payee address; City; State; Zip Code 3699 McKinney Avenue Dallas, TX 75210	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Coffee Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/18/2022	Payee name Kids Who Care	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1300 Gendy Street Fort Worth, TX 76107	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10/18/2022	Payee name Tyrone Marshall	
Amount (\$) 120.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Office Maintenance
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 52 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/19/2022	<b>5</b> Payee name Dash for the Beads	
<b>6</b> Amount (\$) 2505.41	<b>7</b> Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Donation
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2022	Candidate / Officeholder name At&t Services	
Amount (\$) 49.52	Office sought Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Internet
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/24/2022	Candidate / Officeholder name Chad West	
Amount (\$) 711.00	Office sought Office held	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 53 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/25/2022	<b>5</b> Payee name Mailchimp	
<b>6</b> Amount (\$) 104.46	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Ave Atlanta, GA 30308	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Email Marketing and Campaign Communications
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/27/2022	Payee name La Calle Doce	
Amount (\$) 49.23	Payee address; City; State; Zip Code 415 W 12th Street Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Hispanic Biz Owners
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 10/28/2022	Payee name Tjs Fish Market	
Amount (\$) 35.06	Payee address; City; State; Zip Code 4212 Oak Lawn Avenue Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Lunch with Commissioner
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 54 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/31/2022	<b>5</b> Payee name Viasat In-Flight	
<b>6</b> Amount (\$) 19.00	<b>7</b> Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description Internet
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 19.00	Payee name Viasat In-Flight	
<b>PURPOSE OF EXPENDITURE</b>	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Internet
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2022	Candidate / Officeholder name Office sought Office held	
Amount (\$) 900.00	Payee name EcoLatino	
<b>PURPOSE OF EXPENDITURE</b>	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Advertising
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 55 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/01/2022	<b>5</b> Payee name Tjs Fish Market	
<b>6</b> Amount (\$) 118.22	<b>7</b> Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fundraising Solicitation	<b>(b)</b> Description Fundraising dinner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/02/2022	Payee name Taco y Vino	
Amount (\$) 69.49	Payee address; 213 W 8th Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Jimmy C
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/02/2022	Payee name Blue Guardian Foundation Donation	
Amount (\$) 250.00	Payee address; 3606 S Tyler Street Dallas, TX 75224 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 56 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/03/2022	<b>5</b> Payee name Berkleys MKT	
<b>6</b> Amount (\$) 22.47	<b>7</b> Payee address; City; State; Zip Code 634 W Davis Street Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Cookies for community meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/03/2022	Payee name Benny Guzman	
Amount (\$) 200.00	Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Campaign Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/03/2022	Payee name Katy Seitzler	
Amount (\$) 70.00	Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Email Marketing and Campaign Communications
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 57 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/03/2022	<b>5</b> Payee name Qualigraphics	
<b>6</b> Amount (\$) 90.55	<b>7</b> Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Campaign Banner
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/03/2022	Payee name Qualigraphics	
Amount (\$) 300.87	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Wrapped Flavor Burst Candies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/07/2022	Payee name Tom Thumb	
Amount (\$) 228.61	Payee address; City; State; Zip Code 315 S Hampton Road Dallas, TX 75211	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Food for volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 58 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/09/2022	<b>5</b> Payee name Qualigraphics	
<b>6</b> Amount (\$) 3474.07	<b>7</b> Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Framework for Tent
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/09/2022	Payee name Qualigraphics	
Amount (\$) 2958.18	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign tent, table cover and yard signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/09/2022	Payee name Benny Guzman	
Amount (\$) 80.00	Payee address; City; State; Zip Code 306 South Montreal Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Campaign Labor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 59 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/14/2022	<b>5</b> Payee name Oddfellows	
<b>6</b> Amount (\$) 14.40	<b>7</b> Payee address; City; State; Zip Code 316 W 7th Street Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Coffee Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/15/2022	Payee name Qualigraphics	
Amount (\$) 1352.48	Payee address; City; State; Zip Code 934 Stevens Woods Court Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Vinyl Slap Bracelet
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/15/2022	Payee name Tyrone Marshall	
Amount (\$) 120.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Office Maintenance
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 60 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/16/2022	<b>5</b> Payee name Stevens Park Golf Course	
<b>6</b> Amount (\$) 16.88	<b>7</b> Payee address; City; State; Zip Code 1005 N Montclair Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Beverage expense	<b>(b)</b> Description Community Meeting
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/18/2022	Payee name Viasat In-Flight	
Amount (\$) 19.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel Out of District	Description Internet
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/21/2022	Payee name Chad West PLLC	
Amount (\$) 74.69	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Stamps and Cards Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 61 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/21/2022	<b>5</b> Payee name Chad West PLLC	
<b>6</b> Amount (\$) 144.00	<b>7</b> Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description Stamps Reimbursement
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/21/2022	Payee name Victoria Perez	
Amount (\$) 28.12	Payee address; City; State; Zip Code 808 Rutherford Road Waxahachie, TX 75165	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Mailing Labels Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/25/2022	Payee name Mailchimp	
Amount (\$) 104.46	Payee address; City; State; Zip Code 675 Ponce De Leon Ave Atlanta, GA 30308	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Email Marketing and Campaign Communications
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 62 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/29/2022	<b>5</b> Payee name The Dallas Assembly	
<b>6</b> Amount (\$) 50.00	<b>7</b> Payee address; 12900 Preston Road Suite 1110, Dallas, TX 75230 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Fee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/29/2022	Payee name Maria Salazar	
Amount (\$) 400.00	Payee address; 2605 East Ledbetter Drive Dallas, TX 75216 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Office Cleaning
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/29/2022	Payee name Taco y Vino	
Amount (\$) 121.45	Payee address; 213 W 8th Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Donor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 63 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/30/2022	<b>5</b> Payee name Veracruz	
<b>6</b> Amount (\$) 39.53	<b>7</b> Payee address; City; State; Zip Code 408 N Bishop Avenue Suite 107 Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Meeting with City Staff
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 11/30/2022	Payee name McShan Florist	
Amount (\$) 251.49	Payee address; City; State; Zip Code 10311 Garland Road Dalals, TX 75117	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Flowers for funeral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/01/2022	Payee name Stonewall Democrats of Dallas	
Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 192305 Dallas, TX 75219	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 64 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/01/2022	<b>5</b> Payee name Tjs Fish Market	
<b>6</b> Amount (\$) 44.90	<b>7</b> Payee address; 4212 Oak Lawn Avenue Dallas, TX 75219 City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Lunch meeting with policy advisor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2022	Payee name Walgreens	
Amount (\$) 27.84	Payee address; 1306 N Beckley Ave Dallas, TX 75203 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Greeting Cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12/02/2022	Payee name Encina	
Amount (\$) 75.08	Payee address; 614 W Davis Street Dallas, TX 75208 City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fundraising Solicitation	Description Meeting with Organizer
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
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## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

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<b>1</b> Total pages Schedule F1: 65 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/02/2022	<b>5</b> Payee name 1010 Partnership LLC	
<b>6</b> Amount (\$) 120.00	<b>7</b> Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description Stamps Reimbursement
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/05/2022	Payee name Enos Pizza	
Amount (\$) 71.33	Payee address; City; State; Zip Code 407 N Bishop Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Meeting with Volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/05/2022	Payee name Smugmug.com	
Amount (\$) 75.78	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift	Description Gift
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

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<b>1</b> Total pages Schedule F1: 66 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/05/2022	<b>5</b> Payee name Eggsellent Café	
<b>6</b> Amount (\$) 111.79	<b>7</b> Payee address; City; State; Zip Code 4218 Lemmon Avenue Dallas, TX 75219	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food expense	<b>(b)</b> Description Volunteer Breakfast
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/05/2022	Payee name Oak Cliff Chamber of Commerce	
Amount (\$) 350.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Membership Dues
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/06/2022	Payee name Cibo Divino	
Amount (\$) 516.96	Payee address; City; State; Zip Code 1868 Sylvan Ave Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food expense	Description Board & Commission Party
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 67 of 70		<b>2</b> FILER NAME Chad A West		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/06/2022		<b>5</b> Payee name Chad West PLLC			
<b>6</b> Amount (\$) 120.00		<b>7</b> Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead		<b>(b)</b> Description Stamps Reimbursement		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 12/06/2022		Payee name Methodist Hospitals of Dallas Guild			
Amount (\$) 100.00		Payee address; City; State; Zip Code 4008 Stanford Avenue Dallas, TX 75225			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation		Description Donation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 12/07/2022		Payee name Katy Seitzler			
Amount (\$) 87.50		Payee address; City; State; Zip Code 217 Sycamore Creek Road Allen, TX 75002			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Email Marketing and Campaign Communications		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
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## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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<b>1</b> Total pages Schedule F1: 68 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/12/2022	<b>5</b> Payee name Dallas Youth Sports	
<b>6</b> Amount (\$) 2500.00	<b>7</b> Payee address; City; State; Zip Code 2524 West Ledbetter Drive Dallas, TX 75233	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation	<b>(b)</b> Description Christmas Sponsor
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/13/2022	Payee name Chad West PLLC	
Amount (\$) 91.76	Payee address; City; State; Zip Code 3606 South Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead	Description Stamps Reimbursement
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/14/2022	Payee name Casa Guanajuato	
Amount (\$) 250.00	Payee address; City; State; Zip Code 1002 West Brooklyn Avenue Dallas, TX 75208	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Donation
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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## SCHEDULE F1

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

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

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

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

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<b>1</b> Total pages Schedule F1: 69 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/15/2022	<b>5</b> Payee name Color Me Empowered	
<b>6</b> Amount (\$) 200.00	<b>7</b> Payee address; City; State; Zip Code 2101 West Clarendon Dr Dallas, TX 75208	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift	<b>(b)</b> Description Donation in Memory of Anna Casey
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/15/2022	Payee name Young Latino Democrats	
Amount (\$) 150.00	Payee address; City; State; Zip Code 3606 S Tyler Street Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Holiday fundraiser
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 12/16/2022	Payee name Cielo Tinto, LLC	
Amount (\$) 100.00	Payee address; City; State; Zip Code 1817 South Vernon Avenue Dallas, TX 75224	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donation	Description Christmas Sponsor
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
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## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 70 of 70	<b>2</b> FILER NAME Chad A West	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/19/2022	<b>5</b> Payee name Oak Cliff Lions Club	
<b>6</b> Amount (\$) 150.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 4445 Dallas, TX 75208	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Membership Dues
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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