CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Comm	nission Filers)	2 Total pages filed: 29	OFFICE USE ONLY	
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr Teni NICKNAME LAST Atkin	SUFFIX	Date Received	
4	ORIGINAL REPORT TYPE	30th day before election 15th app	off Other (specify) eeded \$500 limit ———————————————————————————————————	Date Hand-delivered or Date Postmarked Receipt # Amount \$	
5	ORIGINAL PERIOD COVERED	Month Day Year 03 / 28 / 2023 TH	Month Day Year ROUGH 04 26 2023	Date Imaged	
6 EXPLANATION OF CORRECTION Correction to Last Day Balance (Line 5, Coversheet 2)					
7	AFFIDAVIT	report is	or affirm, under penalty of perjury, true and correct. NLY if applicable:	that this corrected	
		made in sent the Other re report no that the re or affirm	nual reports: I swear, or affirm, the good faith and without an intent information contained in the reports: I swear, or affirm, that tot later than the 14th business date eport as originally filed is inaccurate, that any error or omission in the de in good faith.	to mislead or to misrepre- ort. I am filing this corrected by after the date I learned to or incomplete. I swear,	
	AFFIX NOTARY STAN	MP / SEAL ABOVE	* * * Electronically Certified Signature of Candidate or C		
	Sworn to and subscribe	d before me, by the said Mr Tennell A		Oth day of May ,	
	Signature of officer adm		name of officer administering oath	Title of officer administering oath	

Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how to complete this form	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 29
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Mr Tennell	MI	OFFICE USE ONLY
NAME	NICKNAME LAST	SUFFIX	Date Received
	Atkins	361114	
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	-
OFFICEHOLDER MAILING ADDRESS	2717 Meadow Stone Lane	Dallas TX 75232	
Change of Address			
5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
OFFICEHOLDER PHONE	(469) 417 8839		
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST MS Velma	MI	Receipt # Amount \$
NAME			Date Processed
	NICKNAME LAST Milliner	SUFFIX	Date Imaged
	Milliner		
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); AF	PT / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	1407 Laura Lane	Dallas TX 75241	
(Residence or Business)			
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER	7.11.61.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11.2 1.10.11	2/1/2/10/01	
PHONE	(214) 371 7482		
9 REPORT TYPE	January 15 30th day be	fore election Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 X 8th day befo	ere election Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month Day Year	Month	Day Year
COVERED	03 / 28 /2023	THROUGH 04	<u>/ 26 / 2023</u>
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year Prin	mary Runoff Other	
		Description neral Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if know	n)
		Council District 8	
14 NOTICE FROM POLITICAL	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDI CONSENT. CANDIDATES AND OFFICEHOLDERS ARE F	TURES MAY HAVE BEEN MADE WITHOUT THE CAN	IDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME		
Additional Pages	GENERAL COMMITTEE ADDRESS		
	SPECIFIC COMMITTEE CAMPAIGN	TREASURER NAME	
	COMMITTEE CAMPAIG	N TREASURER ADDRESS	
	GO	ΓO PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Mr Tennell Atkins				16 File	er ID (Ethics Co	mmission Filers)
17 CONTRIBUTION TOTALS	PLEDGE		L CONTRIBUTIONS (OTHE NTEES OF LOANS, OR FRONICALLY)	R THAN	\$ 0.00	
		POLITICAL CONTRIB THAN PLEDGES, LOAN	UTIONS IS, OR GUARANTEES OF L	OANS)	\$ 30550	.00
EXPENDITURE TOTALS	3. TOTAL U	NITEMIZED POLITICAL	. EXPENDITURE.		\$ 0.00	
	4. TOTAL F	POLITICAL EXPENDI	TURES		\$ 15930	.82
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTI PRTING PERIOD	ONS MAINTAINED AS OF 1	HE LAST DAY	\$ 45797	.57
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF Y OF THE REPORTING	ALL OUTSTANDING LOAN PERIOD	S AS OF THE	\$ 0.00	
		r penalty of perjury, th	at the accompanying reported to the accompany	rt is true and co	orrect and inclu	udes all information
			***ELECTRO	ONICALLY C	ERTIFIED**	**
			Signature	e of Candidate	or Officeholde	er
				_		
		Please compl	ete either option l	pelow:		
(1) Affidavit						
NOTARY STAMP/SEA	_					
		Tennell Atkins		19th		May
Sworn to and subscribed	-		th	nis the	_ day of	,
$20 \phantom{0000000000000000000000000000000000$	which, witness my har	nd and seal of office.				
Signature of officer administe	ring oath	Printed name of office	er administering oath		Title of officer	administering oath
			OR			
(2) Unsworn Declaration	on					_
My name is			, and my date of	birth is		
My address is				,, _		·
	(stree	et)	(city)		(zip code)	` ,
Executed in	County, St	ate of	_ , on the day of _	(month)	, 20 (year)	
			Signature of	Candidate/Offi	ceholder (Decl	arant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME Mr Tennell Atkins	mmission Filers)	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 30,550.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRI	BUTIONS	\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.	. SCHEDULE E: LOANS		\$ 0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POL	LITICAL CONTRIBUTIONS	\$ 15,930.82
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM	POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PER	SONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUT	TIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM PO	DLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND C	CONTRIBUTIONS RETURNED	\$ 0.00

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: 1 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	ns			
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
04/19/2023	Mason Brown			500.00
	6 Contributor address; 5610 Harbor Town Dr	City; Dallas,	State; Zip Code TX 75287	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/20/2023	Yasmin Bhatia			250.00
	Contributor address; 4230 Beechwood Lane	City;	State; Zip Code TX 75220	
Principal occup	aation / Job title (See Instructions)		Employer (See Instruct	cions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/18/2023	Tom Huth			1000.00
	Contributor address; 13455 Noel Road	City; Dallas,	State; Zip Code TX 75240	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/18/2023	Full name of contributor Henry Billingsley	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 1722 Routh St	City; Dallas,	State: Zip Code TX 75201	
	pation / Job title (See Instructions)		Employer (See Instruc	tions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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

Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instruct	Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2 of 12
Amy Lott 250.00			3 Filer ID (Ethics Commission Filers)
194 Brookstone Court Waxahachie, TX 75165		Amy Lott	250.00
Date Full name of contributor out-of-state PAC (ID#:			
Date Contributor address: City: State: Zip Code Dallas, TX 75229	8 Principal occ	cupation / Job title (See Instructions) 9 En	nployer (See Instructions)
Contributor address; P.O. Box 29615 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:		Trey Brown	Amount of contribution (\$)
Date 04/17/2023 Full name of contributor out-of-state PAC (ID#:		Contributor address; City; State	
Contributor address; 3839 McKINNEY Ave City; State; Zip Code Dallas, TX 75204	Principal occ	upation / Job title (See Instructions) En	nployer (See Instructions)
Contributor address; 3839 McKINNEY Ave Dallas, TX 75204 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: 500.00) Stonewall Democrats of Dallas Contributor address; P.O. Box 192305 City; Dallas, TX 75219 City; State; Zip Code State: Zip Code Dallas		Katrina Keys	γιιισαιια στ σστιαισαιστι (ψ)
Date 04/19/2023 Full name of contributor		Contributor address; City; State	e; Zip Code 204
O4/19/2023 Stonewall Democrats of Dallas 500.00 Contributor address; City; Dallas, TX 75219 Contributor address Dallas, TX 75219	Principal occ	upation / Job title (See Instructions)	nployer (See Instructions)
		out-oi-state 1 Ao (ib#	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State P.O. Box 192305 Dallas, TX 75	e: Zip Code 219
	Principal occ	upation / Job title (See Instructions)	nployer (See Instructions)

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SCHEDULE A1

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

ull name of contributor Bobby Abtahi ontributor address; 126 N Zang Blvd		> (ID#:)	3 of 12 3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$)
Bobby Abtahi ontributor address;		; (ID#:)	
	City; Dallas,	State; Zip Code , TX 75203	150.00
/ Job title (See Instructions)		9 Employer (See Instruct	ions)
Veletta Forsythe-Lil	City;	State; Zip Code	Amount of contribution (\$) 250.00
Job title (See Instructions)		Employer (See Instruct	ions)
re Blackontributor address;	City;	State; Zip Code	Amount of contribution (\$) 1000.00
Job title (See Instructions)		Employer (See Instruct	iions)
Harryett Ehrhardt			Amount of contribution (\$) 1000.00
Job title (See Instructions)		Employer (See Instruct	(ions)
	Job title (See Instructions) Job title (See Instructions)	Veletta Forsythe-Lil ontributor address; City; 522 Blair Blvd Dallas, Job title (See Instructions) Ull name of contributor out-of-state PAC Tre Black Ontributor address; City; 751 Kessler Lake D Dallas, Ull name of contributor out-of-state PAC Try title (See Instructions) Ull name of contributor out-of-state PAC Harryett Ehrhardt Ontributor address; City; Dallas, City; Dallas,	Veletta Forsythe-Lil contributor address; City; State; Zip Code

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SCHEDULE A1

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

TI	ne Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1: 4 of 12
2 FILER NAM Mr Tennell Atl				3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2023	5 Full name of contributor Luis Spinola	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 2518 Chalk Hill Rd	City; Dallas,	State; Zip Code TX 75212	
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date		out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/07/2023	Bobby Lyle Contributor address; 34 Masland Circle	City;	State; Zip Code TX 76230	500.00
Principal occ	cupation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/20/2023	Full name of contributor Valerie Tarrant		C (ID#:)	Amount of contribution (\$) 100.00
	Contributor address; 1547 Firebird Lane	City;	State; Zip Code TX 75241	
Principal occ	cupation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/20/2023	Full name of contributor Richard Pace	out-of-state PAC	(ID#:)	Amount of contribution (\$) 200.00
	Contributor address; 2750 Maijorie Ave	City; Dallas,	State: Zip Code TX 75216	
	cupation / Job title (See Instructions)		Employer (See Instruc	tions)

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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: 5 of 12
2 FILER NAME Mr Tennell Atkir	ns			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
04/20/2023	The Preo Group, LLC			200.00
	6 Contributor address; 3503 Viburnum Drive	City; Wylie,	State; Zip Code TX 75098	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	cions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/20/2023	Lois Hildreth McShan			100.00
	Contributor address; 5420 Spruce View Dr	City;	State; Zip Code TX 75232	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/19/2023	John Wiley Price Campaign	l		1000.00
	Contributor address; 510 E 5th St	City; Dallas,	State; Zip Code TX 75203	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 04/20/2023	Full name of contributor Robert J Pitre	out-of-state PAC	(ID#:)	Amount of contribution (\$) 500.00
	Contributor address; 2642 S Hardwood	City; Dallas,	State: Zip Code TX 75215	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)

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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: 6 of 12
2 FILER NAME Mr Tennell Atkin				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/20/2023	AFISU OLABIMTAN			1000.00
	6 Contributor address; 74 BUCK TRAIL	City; SADL	State; Zip Code ER, TX 76264	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/17/2023	Brian Schwartz			1000.00
	Contributor address; 3412 Beverly Drive	City;	State; Zip Code TX 75205	
Principal occu	 pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/28/2023	Richard B Skibell			1000.00
	Contributor address; 5841 Park Lane	City; Dallas,	State; Zip Code TX 75225	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 03/29/2023	Full name of contributor Andrea Skibell	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 5841 Park Lane	City; Dallas,	State: Zip Code TX 75225	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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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: 7 of 12
2 FILER NAME Mr Tennell Atki				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)		7 Amount of contribution (\$)
03/28/2023	Mark Chazanow			1000.00
	6 Contributor address; 4334 Brookview Dr	City; Dallas	State; Zip Code , TX 75220	
8 Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
03/28/2023	Jennifer Chazanow			1000.00
	Contributor address; 4334 Brookview Dr	City;	State; Zip Code , TX 75220	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/15/2023	Teresa Wash			100.00
	Contributor address; 420 Kearsarge St	City; Desoto	State; Zip Code o, TX 75115	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date Full name of contributor 04/13/2023 Vaughn Thompson		out-of-state PAC (ID#:)		Amount of contribution (\$) 1000.00
	Contributor address; P.O. Box 561527	City; Dallas.	State: Zip Code , TX 75356	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

2 FILER NAME Mr Tennell Atkin 4 Date	0			
4 Date	S			3 Filer ID (Ethics Commission Filers)
04/11/2023	5 Full name of contributor Walter A Walne	out-of-state PAC	(ID#:)	7 Amount of contribution (\$) 250.00
	6 Contributor address; 10020 Carribou Trail	City; Dallas,	State; Zip Code TX 75238	
8 Principal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
04/10/2023	Billy Barnett Contributor address; 3748 Park Place	City; Addiso	State; Zip Code on, TX 75001	1000.00
Principal occupa	ation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 03/28/2023	Full name of contributor Stacy Yarbrough	_	· (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 4145 Beltline Rd	City;	State; Zip Code on, TX 75001	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 04/10/2023	Full name of contributor Jeff Courtwright	out-of-state PAC	; (ID#:)	Amount of contribution (\$) 1000.00
	Contributor address; 6758 Avalon Ave	City; Dallas,	State: Zip Code TX 75214	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	tions)

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SCHEDULE A1

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

		4 7 1 1 2 1 1 1 1 1
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 9 of 12
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	ns	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
04/10/2023	Jeannie Courtwright	1000.00
	6 Contributor address; City; State; Zip Code 6758 Avalon Ave Dallas, TX 75214	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	ltions)
Date	Full name of contributor	Amount of contribution (\$)
03/28/2023	Roger Albright	250.00
	Contributor address; City; State; Zip Code 1701 N Collins Blvd Suite 1100 Richardson, TX 75080	
Principal occup	eation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
04/01/2023	J Christopher Luna	500.00
	Contributor address; City; State; Zip Code P.O. Box 131523 Dallas, TX 75313	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	l tions)
Date 04/01/2023	Full name of contributor out-of-state PAC (ID#:) Domingo Garcia	Amount of contribution (\$) 200.00
0 1/01/2023	Contributor address; City; State: Zip Code 640 Kessler Springs Ave Dallas, TX 75208	200.00

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 10 of 12
2 FILER NAME Mr Tennell Atkin	s		3 Filer ID (Ethics Commission Filers)
4 Date 03/28/2023	Paige B Calabrese 6 Contributor address; City;	State; Zip Code	7 Amount of contribution (\$) 250.00
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 03/28/2023	Deetria Tricomi Contributor address; City;	State; Zip Code, TX 76208	Amount of contribution (\$) 250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 03/28/2023	Wyonna Wirters Contributor address: City:	State; Zip Code vaite, TX 76844	Amount of contribution (\$) 500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 03/31/2023	Full name of contributor		Amount of contribution (\$) 250.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

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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: 11 of 12
2 FILER NAME Mr Tennell Atki		3 Filer ID (Ethics Commission Filers)
4 Date 04/14/2023	5 Full name of contributor □ out-of-state PAC (ID#:	500.00 Zip Code
8 Principal occu	upation / Job title (See Instructions) 9 Emp	loyer (See Instructions)
Date 04/18/2023	Full name of contributor	750.00 Zip Code
Principal occu	pation / Job title (See Instructions) Empl	oyer (See Instructions)
Date 04/17/2023	Full name of contributor	250.00 Zip Code
Principal occu	pation / Job title (See Instructions) Emp	loyer (See Instructions)
Date 04/10/2023	Full name of contributor out-of-state PAC (ID#: The Real Estate Council Political Action Committee Contributor address; State: 3100 McKinnon St Suite 1150 Dallas, TX 7520	Amount of contribution (\$) 2500.00
Principal occu	pation / Job title (See Instructions) Emp	loyer (See Instructions)
Principal occu	pation / Job title (See Instructions) Emp	loyer (See Instructions)

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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: 12 of 12
2 FILER NAME Mr Tennell Atkir	s		3 Filer ID (Ethics Commission Filers)
4 Date 03/29/2023	TREPAC/Texas Association of Realtors Poli	tical Action Committee State; Zip Code TX 78768	7 Amount of contribution (\$) 2500.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	_	(ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:) State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	(ID#:) State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
	ATTACH ADDITIONAL COPIES C	OF THIS SCHEDULE AS N	EEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 1 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 03/30/2023	5 Payee name Lisas Soul Food		
6 Amount (\$) 33.56	7 Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/20/2023	Lisas Soul Food		
Amount (\$) 43.83	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/31/2023	Payee name Popeyes		
Amount (\$) 15.48	Payee address; 8181 S Lancaster Dallas, TX 75241	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 2 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/03/2023	5 Payee name Burger King			
6 Amount (\$) 24.41	7 Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/03/2023	Cheddars			
Amount (\$) 38.01	Payee address; 39640 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/07/2023	Payee name The Island Spot			
Amount (\$) 85.84	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 3 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission F	-ilers)
4 Date 04/07/2023	5 Payee name Campisis			
6 Amount (\$) 84.71	7 Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
04/10/2023	Golden Chick			
Amount (\$) 19.21	Payee address; 3789 W Camp Wisdom Dallas, TX 75237	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 04/17/2023	Payee name McDonalds			
Amount (\$) 25.04	Payee address; 2570 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THE	S SCHEDULE AS NE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 4 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2023	5 Payee name McDonalds		
6 Amount (\$) 5.35	7 Payee address; 2570 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/17/2023	Lubys Cafeteria		
Amount (\$) 66.98	Payee address; 5600 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/03/2023	Payee name Sams Club		
Amount (\$) 29.45	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THE	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		,
1 Total pages Schedule F1: 5 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/03/2023	5 Payee name Sams Club			
6 Amount (\$) 56.12	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/07/2023	Payee name Sams Club			
Amount (\$) 49.92	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/07/2023	Payee name Sams Club			
Amount (\$) 41.53	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 6 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2023	5 Payee name Sams Club		
6 Amount (\$) 45.99	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/12/2023	Payee name Sams Club		
Amount (\$) 48.67	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/17/2023	Payee name Sams Club		
Amount (\$) 53.85	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 7 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/17/2023	5 Payee name Sams Club		
6 Amount (\$) 35.15	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/17/2023	Payee name Sams Club		
Amount (\$) 48.49	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/17/2023	Payee name Sams Club		
Amount (\$) 56.27	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEI	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel In District
Travel Out Of District
Other (enter a category not listed above)

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Credit Card Payment	The Instruction Guide explains how to	complete this form.	(,
1 Total pages Schedule F1: 8 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission	n Filers)
4 Date 03/31/2023	5 Payee name The Order Desk			
6 Amount (\$) 2924.62	7 Payee address; 9840 Monroe Dr Suite 1(24allas, TX 75220	City;	State; Zip Cod	e
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description postage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
03/30/2023	Reilly Echols Printing			
Amount (\$) 2480.82	Payee address; 1710 S Harwood Dallas, TX 75215	City;	State; Zip Cod	e
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Printing Expense	printing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date 04/20/2023	Payee name Jamess Virden			
Amount (\$) 228.00	Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Cod	e
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Caro. (critical dedicago.) Herricold above,
1 Total pages Schedule F1: 9 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2023	5 Payee name James & Iashun Virden		
6 Amount (\$) 360.00	7 Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description walkers	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/08/2023	Payee name James & Iashun Virden		
Amount (\$) 300.00	Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description walkers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/14/2023	Payee name James & Iashun Virden		
Amount (\$) 490.00	Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description walkers	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 10 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 04/20/2023	5 Payee name James & Iashun Virden			
6 Amount (\$) 400.00	7 Payee address; 3425 Haciende Dallas, TX 75233	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description walkers		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
03/31/2023	Gail Turner			
Amount (\$) 150.00	Payee address; 524 Sumac Place Dallas, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/07/2023	Payee name Gail Turner			
Amount (\$) 125.00	Payee address; 524 Sumac Place Dallas, TX 75115	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 11 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/14/2023	5 Payee name Gail Turner			
6 Amount (\$) 150.00	7 Payee address; 524 Sumac Place Dallas, TX 75115	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/21/2023	Payee name Gail Turner			
Amount (\$) 150.00	Payee address; 524 Sumac Place Dallas, TX 75115	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 03/31/2023	Payee name Judy Williams			
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

oreal card aymen	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2023	5 Payee name Judy Williams		
6 Amount (\$) 90.00	7 Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/14/2023	Payee name Judy Williams		
Amount (\$) 120.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 04/21/2023	Payee name Judy Williams		
Amount (\$) 120.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 13 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date 04/19/2023	5 Payee name Jeff Dalton Democracy Toolbox			
6 Amount (\$) 2000.00	7 Payee address; 8552 Royal County Dow MDKinn ey, TX 75070	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description consultant		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/19/2023	I Promote U			
Amount (\$) 1333.34	Payee address; P.O. Box 12219 Dallas, TX 75312	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	yard signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/19/2023	Payee name I Promote U			
Amount (\$) 1721.18	Payee address; P.O. Box 12219 Dallas, TX 75312	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description yard signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	,	,
1 Total pages Schedule F1: 14 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date 04/20/2023	5 Payee name John Wiley Price Campaign			
6 Amount (\$) 1000.00	7 Payee address; P.O. Box 22472 Dallas, TX 75222	City;	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Comm	(b) Description donation		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/01/2023	AT&T			
Amount (\$) 440.00	Payee address; P.O. Box 5014 Carol Stream, IL 60197	City;	State;	Zip Code
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date 04/01/2023	Payee name Jefferson Monument			
Amount (\$) 350.00	Payee address; 351 Jefferson Blvd Dallas, IL 75208	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description rent		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

Supplemen Officeholde	tal Report r			FOR Cover She	et SR
1. CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Tennell	МІ	2. Total Pages Filed: 27	
	NICKNAME	LAST Atkins	SUFFIX	3. Office Held	
4. SUPPLEMENTAL REPORT TYPE	c January 15	c 30th day be	efore election C Runoff	c 15th day after camp treasurer appointme (officeholder only)	
	c July 15	🗶 8th day bef	ore election c Exceeded limit	\$500 c Final Report	
5. PERIOD / COVERED		3/28/20	023 THROUGH 4/26/20	023	
6. ELECTION	Month Day Year	c Prima	ary c Runoff	X General c Sp∈	ecial c N/A
7. OFFICE- HOLDER	CONTRIBUTION TOTALS	1. TOTAL OFFICEH PLEDGES, LOANS,	\$0.00		
			TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		
	EXPENDITURE	3. TOTAL OFFICEH	OLDER EXPENDITURES OF \$10	00 OR LESS, UNLESS ITEMIZED	\$0.00
	TOTALS	4. TOTAL OFFICEH	OLDER EXPENDITURES		\$ 0.00
8. POLITICAL	CONTRIBUTION TOTALS	LOANS, OR GUARA	ANTEES OF LOANS), UNLESS IT	R LESS (OTHER THAN PLEDGES FEMIZED	\$ 0.00
(Campaign)			AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEE	ES OF LOANS)	\$ 30,550.00
	EXPENDITURE TOTALS	7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED		\$ 0.00	
	TOTALS	8. TOTAL POLITICAL EXPENDITURES			\$ 15,930.82
9. OFFICEHOLDER FUR FOR CAMPAIGN PUR			AVOUNT OF OFFICEHOLDER C D TURES DURING THE REPORT		\$ 0.00
10. AFFIDAVIT		is true a		of perjury, that the accompai Il information required to be i	J 0 1
AFFIX NOTARY STAI	MD / SEAL ABOVE		***ELECTRONICAL	LY CERTIFIED***	
AFFIA NOTART STAI	WIP / SEAL ADOVE	-	Signature of Candid	late or Officeholder	
Sworn to and subscribed	before me, by the said Mr	Tennell Atkins		, this the 19th	day
of May, 2	20_23, to certify whic	ch, witness my hand ar	nd seal of office.		
Signature of officer ac	dministering oath	Printed name of office	cer administering oath	Title of officer ad	ministering oath

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: 1 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	ns			
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
04/19/2023	Mason Brown			500.00
Campaign Contribution	6 Contributor address; 5610 Harbor Town Dr	City; Dallas,	State; Zip Code , TX 75287	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/20/2023	Yasmin Bhatia			250.00
Campaign Contribution	Contributor address; 4230 Beechwood Lane	City;	State; Zip Code , TX 75220	
Principal occup	ation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
04/18/2023	Tom Huth			1000.00
Campaign Contribution	Contributor address; 13455 Noel Road	City; Dallas,	State; Zip Code , TX 75240	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/18/2023	Full name of contributor Henry Billingsley	out-of-state PAC	C (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 1722 Routh St	City; Dallas,	State: Zip Code TX 75201	
Principal occup	 pation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 2 of 12
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	S	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
04/18/2023	Amy Lott	250.00
Campaign Contribution	6 Contributor address; City; State; 194 Brookstone Court Waxahachie, T	•
8 Principal occu	pation / Job title (See Instructions) 9 Emp	ployer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
04/17/2023	Trey Brown	500.00
Campaign Contribution	Contributor address; City; State; P.O. Box 29615 Dallas, TX 752	·
Principal occup	ation / Job title (See Instructions) Emp	ployer (See Instructions)
Date	Full name of contributor	Amount of contribution (\$)
04/17/2023	Katrina Keys	1000.00
Campaign Contribution	Contributor address; City; State; 3839 McKINNEY Ave Dallas, TX 752	Zip Code 204
Principal occup	eation / Job title (See Instructions) Emp	ployer (See Instructions)
Date 04/19/2023	Full name of contributor out-of-state PAC (ID#: Stonewall Democrats of Dallas	Amount of contribution (\$) 500.00
Campaign Contribution	Contributor address; City; State: P.O. Box 192305 Dallas, TX 752	Zip Code
	pation / Job title (See Instructions) Emp	ployer (See Instructions)

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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: 3 of 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns .		
4 Date	5 Full name of contributor ☐ out-of-state PAC ((ID#:)	7 Amount of contribution (\$)
04/14/2023	Bobby Abtahi		150.00
Campaign Contribution	6 Contributor address; City; 1126 N Zang Blvd Dallas,	State; Zip Code TX 75203	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
04/12/2023	Veletta Forsythe-Lil		250.00
Campaign Contribution	Contributor address; City;	State; Zip Code TX 75223	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor ut-of-state PAC ((ID#:)	Amount of contribution (\$)
04/12/2023	Tre Black		1000.00
Campaign Contribution	Contributor address; City; 751 Kessler Lake D Dallas, 7	State; Zip Code ГХ 75208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 04/12/2023	Full name of contributor	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; City; 3525 Turtle Creek Blvd Suite 8A Dallas, 7	State: Zip Code FX 75219	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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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: 4 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns			
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/10/2023	Luis Spinola			500.00
Campaign Contribution	6 Contributor address; 2518 Chalk Hill Rd	City; Dallas,	State; Zip Code TX 75212	
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/07/2023	Bobby Lyle			500.00
Campaign Contribution	Contributor address; 34 Masland Circle	City;	State; Zip Code TX 76230	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/20/2023	Valerie Tarrant			100.00
Campaign Contribution	Contributor address; 1547 Firebird Lane	City; Dallas,	State; Zip Code TX 75241	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)
Date 04/20/2023	Full name of contributor Richard Pace	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 200.00
Campaign Contribution	Contributor address; 2750 Maijorie Ave	City; Dallas,	State: Zip Code TX 75216	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	tions)

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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	s form.	1 Total pages Schedule A1: 5 of 12
2 FILER NAME Mr Tennell Atkir	ıs		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2023 Campaign Contribution	The Preo Group, LLC 6 Contributor address; City;	State; Zip Code, TX 75098	7 Amount of contribution (\$) 200.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date 04/20/2023 Campaign Contribution	Lois Hildreth McShan Contributor address; City;	State; Zip Code , TX 75232	Amount of contribution (\$) 100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 04/19/2023 Campaign Contribution	John Wiley Price Campaign Contributor address; City;	State; Zip Code, TX 75203	Amount of contribution (\$) 1000.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 04/20/2023 Campaign Contribution	Full name of contributor out-of-state PAGE Robert J Pitre Contributor address; City; 2642 S Hardwood Dallas	State: Zip Code	Amount of contribution (\$) 500.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)

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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: 6 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns			
4 Date	5 Full name of contributor	out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
04/20/2023	AFISU OLABIMTAN			1000.00
Campaign Contribution	6 Contributor address; 74 BUCK TRAIL	City; SADLI	State; Zip Code ER, TX 76264	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/17/2023	Brian Schwartz			1000.00
Campaign Contribution	Contributor address; 3412 Beverly Drive	City;	State; Zip Code TX 75205	
Principal occu	pation / Job title (See Instructions)		Employer (See Instructi	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/28/2023	Richard B Skibell			1000.00
Campaign Contribution	Contributor address; 5841 Park Lane	City;	State; Zip Code TX 75225	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 03/29/2023	Full name of contributor Andrea Skibell	out-of-state PAC	(ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; 5841 Park Lane	City; Dallas,	State: Zip Code TX 75225	
Principal occu	ation / Job title (See Instructions)		Employer (See Instruct	ions)

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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: 7 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	18			
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
03/28/2023	Mark Chazanow			1000.00
Campaign Contribution	6 Contributor address; 4334 Brookview Dr	City; Dallas,	State; Zip Code TX 75220	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
03/28/2023	Jennifer Chazanow			1000.00
Campaign Contribution	Contributor address; 4334 Brookview Dr	City;	State; Zip Code TX 75220	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/15/2023	Full name of contributor Teresa Wash	out-of-state PAC	(ID#:)	Amount of contribution (\$) 100.00
Campaign Contribution	Contributor address; 420 Kearsarge St	City;	State; Zip Code , TX 75115	
Principal occu	oation / Job title (See Instructions)		Employer (See Instruc	tions)
Date 04/13/2023	Full name of contributor Vaughn Thompson	out-of-state PAC	: (ID#:)	Amount of contribution (\$) 1000.00
Campaign Contribution	Contributor address; P.O. Box 561527	City; Dallas,	State: Zip Code TX 75356	
Principal occu	oation / Job title (See Instructions)		Employer (See Instruc	tions)

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SCHEDULE A1

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

1116	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 8 of 12
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Mr Tennell Atki	ns			
4 Date	5 Full name of contributor	out-of-state PAC	; (ID#:)	7 Amount of contribution (\$)
04/11/2023	Walter A Walne			250.00
Campaign Contribution	6 Contributor address; 10020 Carribou Trail	City;	State; Zip Code TX 75238	
8 Principal occi	 upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	; (ID#:)	Amount of contribution (\$)
04/10/2023	Billy Barnett			1000.00
Campaign Contribution	Contributor address; 3748 Park Place	City;	State; Zip Code on, TX 75001	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	: (ID#:)	Amount of contribution (\$)
03/28/2023	Stacy Yarbrough			1000.00
Campaign Contribution	Contributor address; 4145 Beltline Rd	City;	State; Zip Code on, TX 75001	
			F 1 (0 1 1	tions)
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	uons)
Date	pation / Job title (See Instructions) Full name of contributor Jeff Courtwright	□ out-of-state PAC		Amount of contribution (\$) 1000.00
·	Full name of contributor			Amount of contribution (\$)

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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 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	is		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
04/10/2023	Jeannie Courtwright		1000.00
Campaign Contribution	6 Contributor address; City; State 6758 Avalon Ave Dallas, TX 75		
8 Principal occu	pation / Job title (See Instructions) 9 Er	mployer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/28/2023	Roger Albright		250.00
Campaign Contribution		e; Zip Code	
Principal occup	ation / Job title (See Instructions)	 mployer (See Instruct	tions)
Date	Full name of contributor		Amount of contribution (\$)
04/01/2023	J Christopher Luna		500.00
Campaign Contribution	Contributor address; City; State P.O. Box 131523 Dallas, TX 75	∋; Zip Code 5313	
Principal occup	eation / Job title (See Instructions)	mployer (See Instruct	tions)
Date 04/01/2023	Full name of contributor		Amount of contribution (\$) 200.00
Campaign Contribution	Contributor address; City; Stat 640 Kessler Springs Ave Dallas, TX 75	e: Zip Code 3208	
Principal occup	pation / Job title (See Instructions)	mployer (See Instruct	tions)

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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: 10 of 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkir	ns		
4 Date	5 Full name of contributor out-of-state_PAC	: (ID#:)	7 Amount of contribution (\$)
03/28/2023	Paige B Calabrese		250.00
Campaign Contribution	6 Contributor address; City; 7777 Glen America Dr Suite 366 Dallas,	State; Zip Code TX 75225	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
03/28/2023	Deetria Tricomi		250.00
Campaign Contribution	Contributor address; City;	State; Zip Code n, TX 76208	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
03/28/2023	Wyonna Wirters		500.00
Campaign Contribution	Contributor address; City; P.O. Box 768 Goldth	State; Zip Code waite, TX 76844	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 03/31/2023	Full name of contributor ☐ out-of-state PAC Jack H Parker	(ID#:)	Amount of contribution (\$) 250.00
Campaign Contribution	Contributor address; 12824 Midway Road Suite 1139 Dallas,	State: Zip Code TX 75244	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruct	ions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 11 of 12
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mr Tennell Atkin	ns		
4 Date	5 Full name of contributor out-of-state_PAC	(ID#:)	7 Amount of contribution (\$)
04/14/2023	Krist5ina S Barnhill		500.00
Campaign Contribution	6 Contributor address; City; 2313 Amhearst Ln Flower	State; Zip Code Mound, TX 75028	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
04/18/2023	Georgios P Touris		750.00
Campaign Contribution	Contributor address; City; 8301 Lakeview Pkwy Suite 111-2 Rowlet	State; Zip Code t, TX 75066	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
04/17/2023	Aedam Saldana		250.00
Campaign Contribution	Contributor address; City; 3707 Royal Lane Dallas,	State; Zip Code TX 75229	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date 04/10/2023	Full name of contributor out-of-state PAC The Real Estate Council Political Action Con		Amount of contribution (\$) 2500.00
Campaign Contribution	Contributor address; 3100 McKinnon St Suite 1150 City; Dallas,	State: Zip Code TX 75201	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

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SCHEDULE A1

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

The	Instruction Guide explains how to comple	ete this form.	1 Total pages Schedule A1: 12 of 12
2 FILER NAME Mr Tennell Atkir	ıs		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7 Amount of contribution (\$)
03/29/2023	TREPAC/Texas Association of Realto	ors Political Action Committee	2500.00
Campaign Contribution	6 Contributor address; City; P.O. Box 2246	State; Zip Code Austin, TX 78768	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Date		state PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	ctions)
Date	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instru	ctions)
Date	Full name of contributor	state PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	I ctions)
	ATTACH ADDITIONAL CO	PPIES OF THIS SCHEDULE AS	NEEDED

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/Opensitions/Opensitions/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Do

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
03/30/2023	Lisas Soul Food		
6 Amount (\$) 33.56 Campaign Funds for Campaign Expenditures	7 Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/20/2023	Lisas Soul Food		
Amount (\$) 43.83	Payee address; 2550 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/31/2023	Popeyes		
Amount (\$) 15.48	Payee address; 8181 S Lancaster Dallas, TX 75241	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	of of S Lancaster Danas, 1A 73241		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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/Opensitions/Opensitions/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Do

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (errier a satisge	.,
1 Total pages Schedule F1: 2 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/03/2023	Burger King			
6 Amount (\$) 24.41	7 Payee address; 2403 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/03/2023	Cheddars			
Amount (\$) 38.01	Payee address; 39640 LBJ Frwy Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	39640 LBJ Frwy Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
	,			
04/07/2023	The Island Spot			
Amount (\$) 85.84	Payee address; 309 W Jefferson Dallas, TX 75208	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 3 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/07/2023	Campisis			
6 Amount (\$) 84.71 Campaign Funds for Campaign Expenditures	7 Payee address; 1520 Elm St Suite 111 Dallas, TX 75201	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/10/2023	Golden Chick			
Amount (\$) 19.21	Payee address; 3789 W Camp Wisdom Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures		T 5		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
04/17/2023	McDonalds			
Amount (\$) 25.04	Payee address; 2570 W Redbird Lane Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	23/0 w Redolid Lane Danas, 1X /323/			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE	Food/Beverage Expense	food		
OF EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 4 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/20/2023	McDonalds		
6 Amount (\$) 5.35 Campaign Funds for Campaign Expenditures	7 Payee address; 2570 W Redbird Lane Dallas, TX 75237	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/17/2023	Lubys Cafeteria		
Amount (\$) 66.98	Payee address; 5600 S Hampton Rd Dallas, TX 75232	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food/Beverage Expense	food	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/03/2023	Sams Club		
Amount (\$) 29.45	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	2300 Williams Rd Ballas, TR 73237		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 5 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name			
04/03/2023	Sams Club			
6 Amount (\$) 56.12 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/07/2023	Sams Club			
Amount (\$) 49.92	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/07/2023	Sams Club			
Amount (\$) 41.53	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2500 W Wheatland Ru Danas, 1A /323/			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	outer (enter a satisge	, ,
1 Total pages Schedule F1: 6 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name		<u> </u>	
04/10/2023	Sams Club			
6 Amount (\$) 45.99 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/12/2023	Sams Club			
Amount (\$) 48.67	Payee address;	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2900 W Wheatland Rd Dallas, TX 75237			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	,	Office held
Date	Payee name			
04/17/2023	Sams Club			
Amount (\$) 53.85	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	2700 W Wilcatianu Ku Danas, 1X 13231			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 7 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	s Commission Filers)
4 Date	5 Payee name		1	
04/17/2023	Sams Club			
6 Amount (\$) 35.15 Campaign Funds for Campaign Expenditures	7 Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	ı expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/17/2023	Sams Club			
Amount (\$) 48.49	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/17/2023	Sams Club			
Amount (\$) 56.27	Payee address; 2900 W Wheatland Rd Dallas, TX 75237	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austii	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	curer (errier a satisgery necholog at	2010)
1 Total pages Schedule F1: 8 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commissio	n Filers)
4 Date	5 Payee name			
03/31/2023	The Order Desk			
6 Amount (\$) 2924.62 Campaign Funds for Campaign Expenditures	7 Payee address; 9840 Monroe Dr Suite 1⊕allas, TX 75220	City;	State; Zip Cod	le
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	postage		
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	l
Date	Payee name			
03/30/2023	Reilly Echols Printing			
Amount (\$) 2480.82 Campaign Funds for Campaign Expenditures	Payee address; 1710 S Harwood Dallas, TX 75215	City;	State; Zip Cod	de
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Printing Expense	printing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	
Date	Payee name			
04/20/2023	Jamess Virden			
Amount (\$) 228.00 Campaign Funds for Campaign Expenditures	Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Cod	le
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Transportation Equipment & Related Expense	gas		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held	d
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1: 9 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee name			
04/06/2023	James & Iashun Virden			
6 Amount (\$) 360.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3425 Haciende Dallas, TX 75233	City;	State;	Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	walkers		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
Date	Payee name			
04/08/2023	James & Iashun Virden			
Amount (\$) 300.00	Payee address; 3425 Haciende Dallas, TX 75233	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	walkers		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8		
Date	Payee name			
04/14/2023	James & Iashun Virden			
Amount (\$) 490.00	Payee address; 3425 Haciende Dallas, TX 75233	City;	State;	Zip Code
Campaign Funds for Campaign Expenditures	5425 Haciende Danas, 1A 75255			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Salaries/Wages/Contract Labor	walkers		
EXPENDITURE				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8		Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	DED	

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	care (errer a caregory normalizat above)
1 Total pages Schedule F1: 10 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2023	5 Payee name James & Iashun Virden		
6 Amount (\$) 400.00 Campaign Funds for Campaign Expenditures	7 Payee address; 3425 Haciende Dallas, TX 75233	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description walkers	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date 03/31/2023	Payee name Gail Turner		
Amount (\$) 150.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place Dallas, TX 75115	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/07/2023	Gail Turner		
Amount (\$) 125.00 Campaign Funds for Campaign Expenditures	Payee address; 524 Sumac Place Dallas, TX 75115	City;	State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 11 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/14/2023	Gail Turner		
6 Amount (\$) 150.00 Campaign Funds for	7 Payee address; 524 Sumac Place Dallas, TX 75115	City;	State; Zip Code
Campaign Expenditures		T	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/21/2023	Gail Turner		
Amount (\$)	Payee address;	City;	State; Zip Code
150.00 Campaign Funds for Campaign Expenditures	524 Sumac Place Dallas, TX 75115		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
03/31/2023	Judy Williams		
Amount (\$) 90.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	Funcativitie, 1A 75157		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 12 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/07/2023	Judy Williams		
6 Amount (\$) 90.00 Campaign Funds for Campaign Expenditures	7 Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/14/2023	Judy Williams		
Amount (\$) 120.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures		T =	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/21/2023	Judy Williams		
Amount (\$) 120.00	Payee address; 409 Lou Street Duncanville, TX 75137	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	409 Lou Sueet Duncanvine, 1A 75157		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	phone bank	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1: 13 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	l	
04/19/2023	Jeff Dalton Democracy Toolbox		
6 Amount (\$) 2000.00	7 Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	8552 Royal County Down Drive McKinney, TX 75070		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE	Consulting Expense	consultant	
OF EXPENDITURE			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/19/2023	I Promote U		
Amount (\$) 1333.34	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	P.O. Box 12219 Dallas, TX 75312		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	yard signs	
EXPENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/19/2023	I Promote U		
Amount (\$) 1721.18	Payee address; P.O. Box 12219 Dallas, TX 75312	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	1.O. BOX 12219 Danas, 1X 13312		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE	Advertising Expense	yard signs	
OF EXPENDITURE			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED

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/Opensitions/Opensitions/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Donations/Do

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 14 of 14	2 FILER NAME Mr Tennell Atkins		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
04/20/2023	John Wiley Price Campaign		
6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures	7 Payee address; P.O. Box 22472 Dallas, TX 75222	City;	State; Zip Code
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	donation	
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
Date	Payee name		
04/01/2023	AT&T		
Amount (\$) 440.00	Payee address; P.O. Box 5014 Carol Stream, IL 60197	City;	State; Zip Code
Campaign Funds for Campaign Expenditures			
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	phone	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OH	Tennell Atkins	Council District 8	
Date	Payee name		
04/01/2023	Jefferson Monument		
Amount (\$) 350.00	Payee address;	City;	State; Zip Code
Campaign Funds for Campaign Expenditures	351 Jefferson Blvd Dallas, IL 75208		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	rent	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Tennell Atkins	Office sought Council District 8	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED