

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| | | | | | | |
|--|--|--------------------------------|---|------------------------|--|------|
| 1 Filer ID (Ethics Commission Filers) | | 2 Total pages filed: 81 | | OFFICE USE ONLY | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI | | Date Received | | | |
| | Tennell | | | | | |
| | NICKNAME LAST SUFFIX | | | | | |
| | Atkins | | | | | |
| 4 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | | <input type="checkbox"/> Runoff | | <input type="checkbox"/> Other (specify) | |
| | <input type="checkbox"/> July 15 | | <input type="checkbox"/> Exceeded \$500 limit | | | |
| | <input checked="" type="checkbox"/> 30th day before election | | <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) | | | |
| | <input type="checkbox"/> 8th day before election | | <input type="checkbox"/> Final report | | | |
| | Date Hand-delivered or Date Postmarked | | | | | |
| 5 ORIGINAL PERIOD COVERED | Month | Day | Year | Month | Day | Year |
| | 01 | 01 | 2019 | THROUGH | 03 | 25 |
| Date Processed | | | | | | |
| Date Imaged | | | | | | |

6 EXPLANATION OF CORRECTION

Returned both 5/17/17 \$1,000 contributions (each...totaling \$2,000)to John Hamilon and Sarah Hamilton on 3/25/19

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ **Semiannual reports:** I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

*** Electronically Certified ***

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Tennell Atkins, this the 5th day of April, 2019, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

81

| | | | | | | |
|--|---|--------------|-----------------|---|----------------------------------|--|
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST | MI | OFFICE USE ONLY | | |
| | Tennell | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | NICKNAME | LAST | SUFFIX | Date Received | | |
| | Atkins | | | | | |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | ADDRESS / PO BOX; APT / SUITE #; | | CITY; | STATE; | ZIP CODE | |
| | 2717 Meadow stone lane | | Dallas TX 75237 | | | |
| 6 CAMPAIGN TREASURER NAME | AREA CODE | PHONE NUMBER | EXTENSION | Date Hand-delivered or Date Postmarked | | |
| | (469) | 417 8939 | | | | |
| 7 CAMPAIGN TREASURER ADDRESS | MS / MRS / MR | FIRST | MI | Receipt # | Amount \$ | |
| | Mrs Velma | | | Date Processed | | |
| 8 CAMPAIGN TREASURER PHONE | NICKNAME | LAST | SUFFIX | Date Imaged | | |
| | Milliner | | | | | |
| 9 REPORT TYPE | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | | | | |
| | 1407 Laura Lane Dallas TX 75241 | | | | | |
| 10 PERIOD COVERED | (Residence or Business) | | | | | |
| | | | | | | |
| 11 ELECTION | AREA CODE | PHONE NUMBER | EXTENSION | | | |
| | (214) | 371 7482 | | | | |
| 12 OFFICE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | |
| | | | | | | |
| 13 OFFICE SOUGHT (if known) | Month | Day | Year | Month | Day | Year |
| | 01 | 01 | 2019 | 03 | 25 | 2019 |
| 14 ELECTION DATE | ELECTION DATE | | | ELECTION TYPE | | |
| | Month | Day | Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other Description |
| 15 OFFICE HELD (if any) | 05 | 04 | 2019 | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special | |
| | | | | | | |

GO TO PAGE 2

FORM C/OH
COVER SHEET PG 2

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9/8/2015

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME

Tennell Atkins

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

| | | | |
|-----|-------------------------------------|--|--------------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 46,040.00 |
| 2. | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ 0.00 |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 60,909.04 |
| 6. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 7. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 8. | <input type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 9. | <input type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ 0.00 |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ 0.00 |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 0.00 |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/01/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Hiawatha Williams

6 Contributor address;

City; State; Zip Code

1141 Waaterview Lane

Desoto, TX 75115

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date

02/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Police Officer PAC

Contributor address;

City; State; Zip Code

1412 Griffin St East

Dallas, TX 75215

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alan & Joan Walne

Contributor address;

City; State; Zip Code

10020 Caribou Trail

Dallas, TX 75238

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald G Steinhart

Contributor address;

City; State; Zip Code

25 Robledo Dr

Dallas, TX 75230-3055

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/06/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gilbert Aranza

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

P.O. Box 601527

Dallas, TX 75360-1527

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dr Charles Ku

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

148 Red Oak Lane

Flower Mound, TX 75028

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/28/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Field Scovell

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

6322 De Loache

Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Afisu Ollabimtan

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

74 Buck Trail

Sadler, TX 76264-2789

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/27/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

DELVA KING

6 Contributor address;

City; State; Zip Code

P.O. Box 0

Dallas, TX 77777

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Sewell

Contributor address;

City; State; Zip Code

3860 W Northwest Hwy Suite 102 Dallas, TX 75220

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Rader

Contributor address;

City; State; Zip Code

6228 Colleyville Blvd

Colleyville, TX 76034

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sam Coats

Contributor address;

City; State; Zip Code

26 Ryddington Place

Dallas, TX 75230

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/08/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Apartment Association of Greater Dallas -PAC

7 Amount of contribution (\$)

2500.00

6 Contributor address;

City; State; Zip Code

5728 LBJ Frwy Suite 100

Dallas, TX 75240

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnnie M Green

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

P.O. Box 411458

Dallas, TX 75241-3582

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dalton L Lott

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 765209

Dallas, TX 75376-5209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Black Firefighter United PAC

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1830 Park Row Ave

Dallas, TX 75215-2751

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald G Parrish

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1256 Regents Park Ct

Desoto, TX 75115

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thomas M Dunning

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

2100 Ross Avenue Suite 1200

Dallas, TX 75207-2739

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/14/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Dennison

Amount of contribution (\$)

350.00

Contributor address;

City; State; Zip Code

1303 Woodlawn Ave

Dallas, TX 75208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Soo Chong

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

927 Condor Dr

Coppell, TX 75019

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patricia L Jackson

7 Amount of contribution (\$)

25.00

6 Contributor address;

City; State; Zip Code

2711 Meadow Dawn Ln

Dallas, TX 75237-3209

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Kemp

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1015 N Duncanville Rd

Duncanville, TX 75116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dorothy Berry Hughes

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

2608 Palo Alto Dr

Dallas, TX 75241-6431

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/10/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vaugh Thompson

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 561527

Dallas, TX 75356-1527

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/11/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Helen Giddings

7 Amount of contribution (\$)

350.00

6 Contributor address; City; State; Zip Code

400 S Zang Blvd Suite 1018 Dallas, TX 75208-6843

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Perfect Hospitality Solutions LLC

Amount of contribution (\$)

600.00

Contributor address; City; State; Zip Code

4300 Mansfield Hwy Forest Hill, TX 76119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

R Gerald Turner

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

4001 University Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor ☐ out-of-state PAC (ID#: _____)

A. A. Long

Amount of contribution (\$)

20.00

Contributor address; City; State; Zip Code

1517 Gailbrook Lane Dallas, TX 75228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Mary C Choutka

7 Amount of contribution (\$)

10.00

6 Contributor address;

City; State; Zip Code

1331 Aldenwood Drive

Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Y Thompson

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

6132 Balcony Lane

Dallas, TX 75241

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bruce A Stern

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

37 Commonwealth Dr

Lakewood, NJ 87010-4168

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jackie Bewley

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

2200 S Riverside Drive

Fort Worth, TX 76104

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

03/21/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

John Wiley Price Campaign

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

510 E 8th St

Dallas, TX 75203

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Mihalopoulos

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

4645 N Central Expressway Suite 200 Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/17/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jacob Johnson

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1237 Frenchmans Dr

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeffrey M Tillotson P.C

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1807 Ross Avenue

Dallas, TX 75201-TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/06/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald J McNamara

6 Contributor address;

City; State; Zip Code

3899 Maple Ave

Dallas, TX 75219

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jewel K Parrish

Contributor address;

City; State; Zip Code

1256 Regents Park Ct

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Kim

Contributor address;

City; State; Zip Code

2013 Cottonwood Valley Cir S

Irving, TX 75038

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/13/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eddie Reeves

Contributor address;

City; State; Zip Code

1142 N Clinton Ave

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/12/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Trelaine M Mapp

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

12612 Beech Tree Ln

Euless, TX 76040-3428

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/12/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Ming Tzong

Amount of contribution (\$)

800.00

Contributor address;

City; State; Zip Code

6922 Aspen Creek Ln

Dallas, TX 75252-2702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Garcia

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

165 Cameron Dr

Weston, FL 33326

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnny Aguinaga

Amount of contribution (\$)

250.00

Contributor address;

City; State; Zip Code

3608 Granada Ave

Dallas, TX 75205-204

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/05/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ibrahim Haddad

6 Contributor address;

City; State; Zip Code

4712 Holy Tree Dr

Dallas, TX 75287-7219

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/07/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Evelyn Conner Hicks

Contributor address;

City; State; Zip Code

6840 Talbot Pkwy

Dallas, TX 75232

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald W Hicks Sr

Contributor address;

City; State; Zip Code

5620 Live Oak St Suite A

Dallas, TX 75206-8057

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Ragsdale

Contributor address;

City; State; Zip Code

3611 Dunbar Street

Dallas, TX 75216

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/04/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Pettis Norman

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

1430 Bar Habor Circle

Dallas, TX 75232

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dough Hunt

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3404 N Interstate 35-E

Lancaster, TX 75134

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Demetris Sampson

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

P.O. Box 2252

Dallas, TX 75223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Black Firefighter Retiree-PAC

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

P.O. Box 226983

Dallas, TX 75222-6983

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/01/2019

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Brenda Walker

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

310 Calvary Dr

Euless, TX 76040

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/01/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

M Rideau

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

10000 SMU Bx 75-3183

Dallas, TX 75275

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/06/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dora L Cole

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

3883 Happy Canyon Dr

Dallas, TX 75241

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert E Hasty

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

13804 Wooded Creek Drive

Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

01/28/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Laurie L Hasty

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

4210 Beaver Book Place

Dallas, TX 75229

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)Date

02/16/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence E Siegel

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

5604 Palomar Lane

Dallas, TX 75229-6418

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Schwartz

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

6606 Briar Cove

Dallas, TX 75240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

General Drivers Warehousemen and Helpers

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1007 Jonelle

Dallas, TX 75217

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Coats Rose P.C.

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

9 Greenway Plaza Suite 1100

Houston, TX 77046

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/04/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ruth Dade

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

1553 Duet Dr

Dallas, TX 75241-3726

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Hauang

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

422 Ridgewood

Richardson, TX 75080

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerald Alley

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

606 Loch Chalet Ct

Arlington, TX 75012-3469

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
01/29/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucious L Williams

6 Contributor address;

City; State; Zip Code

1421 Covinnington Dr

Desoto, TX 75115

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/23/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael B Russell

Contributor address;

City; State; Zip Code

1065 Peachtree St NE Suite 3104 Atlanta, GA 30309-3980

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/11/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brown Revocable Trust

Contributor address;

City; State; Zip Code

P.O. Box 29615

Dallas, TX 75229

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/31/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucy C Billingsley

Contributor address;

City; State; Zip Code

1722 Routh St Suite 770

Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
01/17/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Maria E Garcia

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

68 W Jefferson Blvd

Dallas, TX 75206-4724

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/02/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Larry L Offutt

Amount of contribution (\$)

200.00

Contributor address;

City; State; Zip Code

6038 Bryan Pkwy

Dallas, TX 75206-8002

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnny King

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1243 Pleasant Run Road

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/05/2019

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Delva King

Amount of contribution (\$)

1000.00

Contributor address;

City; State; Zip Code

1243 Pleasant Run Road

Desoto, TX 75115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date
02/11/2019

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim S Lake Jr

7 Amount of contribution (\$)

1000.00

6 Contributor address;

City; State; Zip Code

1704 W Colorado Blvd

Dallas, TX 75208

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 1 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/22/2019 | 5 Payee name Ruth Dade | |
| 6 Amount (\$) 150.00 | 7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/09/2019 | Payee name Ronald Wright | |
| Amount (\$) 100.00 | Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/15/2019 | Payee name Ronald Wright | |
| Amount (\$) 100.00 | Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 2 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name Ronald Wright | |
| 6 Amount (\$) 100.00 | 7 Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name | | |
| Office sought | | |
| Office held | | |
| Date 03/04/2019 | Payee name Ronald Wright | |
| Amount (\$) 100.00 | Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name | | |
| Office sought | | |
| Office held | | |
| Date 03/01/2019 | Payee name Odell Lee | |
| Amount (\$) 192.00 | Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name | | |
| Office sought | | |
| Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1: 3 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/29/2019 | | 5 Payee name CCP Printing | | | |
| 6 Amount (\$) 2221.71 | | 7 Payee address; City; State; Zip Code 5534 S Hampton Road Dallas, TX 75232 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/15/2019 | | Payee name Toni Scroggins | | | |
| Amount (\$) 750.00 | | Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/22/2019 | | Payee name Eula Grant | | | |
| Amount (\$) 45.00 | | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 4 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/08/2019 | 5 Payee name Juanita Ayala | |
| 6 Amount (\$) 60.00 | 7 Payee address; City; State; Zip Code 3037 O Bannon Dr Dallas, TX 75224 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/15/2019 | Payee name Gail Terrell | |
| Amount (\$) 500.00 | Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Manager |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/11/2019 | Payee name Gail Terrell | |
| Amount (\$) 600.00 | Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Manager |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Gail Terrell | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 6 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name Black Premier Ent. Network | |
| 6 Amount (\$) 150.00 | 7 Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/01/2019 | Payee name Black Premier Ent. Network | |
| Amount (\$) 150.00 | Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/20/2019 | Payee name The Order Desk | |
| Amount (\$) 2264.80 | Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 7 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/09/2019 | 5 Payee name Paul Wiley | |
| 6 Amount (\$) 50.00 | 7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/15/2019 | Payee name Paul Wiley | |
| Amount (\$) 50.00 | Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/01/2019 | Payee name Paul Wiley | |
| Amount (\$) 50.00 | Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 8 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/04/2019 | 5 Payee name Paul Wiley | |
| 6 Amount (\$) 50.00 | 7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/01/2019 | Payee name Margot Williams | |
| Amount (\$) 50.00 | Payee address; City; State; Zip Code 17517 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/09/2019 | Payee name Jackie Wheeler | |
| Amount (\$) 50.00 | Payee address; City; State; Zip Code 7516 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 9 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/09/2019 | | 5 Payee name Kimberly Green | | | |
| 6 Amount (\$) 120.00 | | 7 Payee address; City; State; Zip Code 2052 Royal Lane Suite 120 Dallas, TX 75229 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/09/2019 | | Payee name Andre Luster | | | |
| Amount (\$) 120.00 | | Payee address; City; State; Zip Code 2052 Royal Lane Suite 120 Dallas, TX 75229 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/09/2019 | | Payee name Tahvio Luster | | | |
| Amount (\$) 80.00 | | Payee address; City; State; Zip Code 2052 Royal Lane Suite 120 Dallas, TX 75229 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 10 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/05/2019 | | 5 Payee name Cedric Thompson | | | |
| 6 Amount (\$) 750.00 | | 7 Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/08/2019 | | Payee name Ruth Dade | | | |
| Amount (\$) 162.50 | | Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/22/2019 | | Payee name Ruth Dade | | | |
| Amount (\$) 197.50 | | Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 11 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name Ruth Dade | |
| 6 Amount (\$) 240.00 | 7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/22/2019 | Payee name Connie Buford | |
| Amount (\$) 90.00 | Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Connie Buford | |
| Amount (\$) 187.50 | Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 12 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/06/2019 | 5 Payee name Connie Buford | |
| 6 Amount (\$) 200.00 | 7 Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/08/2019 | Payee name Eula Grant | |
| Amount (\$) 92.50 | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Eula Grant | |
| Amount (\$) 175.00 | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 13 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/08/2019 | 5 Payee name Detra Reeves | |
| 6 Amount (\$) 110.00 | 7 Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/25/2019 | Payee name Detra Reeves | |
| Amount (\$) 37.50 | Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Detra Reeves | |
| Amount (\$) 55.00 | Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 14 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/22/2019 | 5 Payee name Robernett Jones | |
| 6 Amount (\$) 80.00 | 7 Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/08/2019 | Payee name Robernett Jones | |
| Amount (\$) 30.00 | Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Robernett Jones | |
| Amount (\$) 160.00 | Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 16 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/08/2019 | 5 Payee name Lakisha Grandy | |
| 6 Amount (\$) 195.00 | 7 Payee address; City; State; Zip Code 1414 Bellevue St Suite 100 Dallas, TX 75215 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense work |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/22/2019 | Payee name Brenda Lee Barnes | |
| Amount (\$) 30.00 | Payee address; City; State; Zip Code 400 E Wintergreen Rd Suite 343 Dallas, TX 75115 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 01/16/2019 | Payee name Fast Signs | |
| Amount (\$) 268.90 | Payee address; City; State; Zip Code 6940 Marvin D Love Fwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: 17 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/16/2019 | | 5 Payee name Fast Signs | | | |
| 6 Amount (\$) 526.23 | | 7 Payee address; City; State; Zip Code 6940 Marvin D Love Frwy Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/24/2019 | | Payee name Office Depot | | | |
| Amount (\$) 148.79 | | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237-3526 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/04/2019 | | Payee name Metro PCS | | | |
| Amount (\$) 200.00 | | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 18 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/17/2019 | 5 Payee name Metro PCS | |
| 6 Amount (\$) 238.08 | 7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 03/04/2019 | Payee name Tennell Atkins Metro PCS | |
| Amount (\$) 200.00 | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| | Candidate / Officeholder name Office sought Office held | |
| Date 02/17/2019 | Payee name Tennell Atkins Metro PCS | |
| Amount (\$) 207.77 | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| | Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 19 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/09/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 9.61 | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/21/2019 | Payee name Office Depot | |
| Amount (\$) 13.64 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/16/2019 | Payee name Office Depot | |
| Amount (\$) 15.47 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 20 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/13/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 27.00 | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/10/2019 | Payee name Office Depot | |
| Amount (\$) 102.81 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/16/2019 | Payee name Office Depot | |
| Amount (\$) 118.77 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 21 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/02/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 122.28 | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/17/2019 | Payee name Office Depot | |
| Amount (\$) 130.65 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 01/24/2019 | Payee name Office Depot | |
| Amount (\$) 148.79 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 22 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/14/2019 | | 5 Payee name Office Depot | | | |
| 6 Amount (\$) 157.56 | | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/24/2019 | | Payee name Office Depot | | | |
| Amount (\$) 269.96 | | Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/18/2019 | | Payee name Dollar Tree Store 2076 | | | |
| Amount (\$) 20.32 | | Payee address; City; State; Zip Code 4241 W Camp Wisdom Rd Suite 100 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: 23 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/22/2019 | 5 Payee name Every Season | |
| 6 Amount (\$) 6.20 | 7 Payee address; City; State; Zip Code 544 Wheatland Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/28/2019 | Payee name Target | |
| Amount (\$) 26.30 | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 03/04/2019 | Payee name Dollar Deals | |
| Amount (\$) 9.70 | Payee address; City; State; Zip Code 3207 E Kirmwood Suite Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 24 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/04/2019 | 5 Payee name Dollar Tree Store 5915 | |
| 6 Amount (\$) 27.06 | 7 Payee address; City; State; Zip Code 1005 S Cockrell Hill Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/04/2019 | Payee name Party City | |
| Amount (\$) 22.68 | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 4 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/04/2019 | Payee name Wal Mart | |
| Amount (\$) 28.83 | Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 25 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/05/2019 | 5 Payee name Wal Mart | |
| 6 Amount (\$) 58.50 | 7 Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/17/2019 | Payee name Wal Mart | |
| Amount (\$) 291.57 | Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/20/2019 | Payee name Sams Wholesale Club | |
| Amount (\$) 255.48 | Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 26 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/27/2019 | 5 Payee name Walgreens Store 05920 | |
| 6 Amount (\$) 9.98 | 7 Payee address; City; State; Zip Code 1060 W Camp Wisdom Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/17/2019 | Candidate / Officeholder name Tennell Atkins Wireless Stop | |
| Amount (\$) 448.00 | Office sought Office held | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/17/2019 | Candidate / Officeholder name SAMS | |
| Amount (\$) 400.60 | Office sought Office held | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 27 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/21/2019 | | 5 Payee name Charco Broiler Steak House | | | |
| 6 Amount (\$) 22.92 | | 7 Payee address; City; State; Zip Code 413 W Jefferson Blvd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/23/2019 | | Payee name Rice Garden | | | |
| Amount (\$) 33.00 | | Payee address; City; State; Zip Code 4016 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/22/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 55.47 | | Payee address; City; State; Zip Code 2550 W Redbird Lane Suite 104 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 28 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/08/2019 | 5 Payee name Delta Charlies Bar & Grill | |
| 6 Amount (\$) 28.12 | 7 Payee address; City; State; Zip Code 5303 Challenger Suite 60 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/11/2019 | Candidate / Officeholder name Payee name Outback Steakhouse Store 4475 | |
| Amount (\$) 31.06 | Payee address; City; State; Zip Code 7707 N Interstate 35-E Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/05/2019 | Candidate / Officeholder name Payee name Dunkin Donuts | |
| Amount (\$) 4.12 | Payee address; City; State; Zip Code 650 Uptown Blvd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 29 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/15/2019 | | 5 Payee name Colters TX BBQ | | | |
| 6 Amount (\$) 31.28 | | 7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rd, Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/27/2019 | | Payee name Tennell Atkins Pizza Hut | | | |
| Amount (\$) 14.36 | | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/26/2019 | | Payee name Saltgrass | | | |
| Amount (\$) 49.42 | | Payee address; City; State; Zip Code 747 North Highway 67 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 30 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/27/2019 | 5 Payee name McDonalds | |
| 6 Amount (\$) 2.91 | 7 Payee address; City; State; Zip Code 125 W Camp Wisdom Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/22/2019 | Candidate / Officeholder name JJ Fish and Chicken | |
| Amount (\$) 20.00 | Office sought Office held | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/18/2019 | Candidate / Officeholder name JJ Fish and Chicken | |
| Amount (\$) 21.10 | Office sought Office held | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 31 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/11/2019 | 5 Payee name El Fenix | |
| 6 Amount (\$) 28.61 | 7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/15/2019 | Payee name El Fenix | |
| Amount (\$) 32.39 | Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/11/2019 | Payee name El Fenix | |
| Amount (\$) 303.10 | Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 32 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/11/2019 | 5 Payee name El Fenix | |
| 6 Amount (\$) 1551.92 | 7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/06/2019 | Candidate / Officeholder name Lubys | |
| Amount (\$) 32.97 | Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/02/2019 | Candidate / Officeholder name Lubys | |
| Amount (\$) 38.92 | Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 33 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/20/2019 | 5 Payee name Chilis | |
| 6 Amount (\$) 17.36 | 7 Payee address; City; State; Zip Code 2503 W Wheatland Suite 405, Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 01/20/2019 | Payee name Chilis | |
| Amount (\$) 5.41 | Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| | Candidate / Officeholder name Office sought Office held | |
| Date 01/17/2019 | Payee name Chilis | |
| Amount (\$) 9.72 | Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| | Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 34 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/20/2019 | | 5 Payee name Chilis | | | |
| 6 Amount (\$) 18.79 | | 7 Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/10/2019 | | Payee name Chilis | | | |
| Amount (\$) 28.77 | | Payee address; City; State; Zip Code 2503 W Wheatland Suite 400 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/10/2019 | | Payee name KFC | | | |
| Amount (\$) 8.96 | | Payee address; City; State; Zip Code 3415 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: 36 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/14/2019 | 5 Payee name Shell | |
| 6 Amount (\$) 42.74 | 7 Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | |
| Date 01/05/2019 | Payee name Shell | |
| Amount (\$) 42.83 | Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | |
| Date 01/07/2019 | Payee name Shell | |
| Amount (\$) 51.98 | Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 37 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/30/2019 | 5 Payee name Murphy USA | |
| 6 Amount (\$) 1.78 | 7 Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/30/2019 | Payee name Murphy USA | |
| Amount (\$) 33.45 | Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/31/2019 | Payee name Murphy USA | |
| Amount (\$) 45.38 | Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 38 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/25/2019 | 5 Payee name Joe Pool Station | |
| 6 Amount (\$) 250.00 | 7 Payee address; City; State; Zip Code 5521 S Hampton Road Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 01/03/2019 | Payee name Highland Hills Station | |
| Amount (\$) 250.00 | Payee address; City; State; Zip Code 3655 Simpson Stuart Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/23/2019 | Payee name Edward Gray | |
| Amount (\$) 175.00 | Payee address; City; State; Zip Code 2225 East Randol Mill Suite 142 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: 39 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/15/2019 | | 5 Payee name Edward Gray | | | |
| 6 Amount (\$) 175.00 | | 7 Payee address; City; State; Zip Code 2225 East Randol Mill St Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/15/2019 | | Payee name Ernest Slaughter | | | |
| Amount (\$) 1500.00 | | Payee address; City; State; Zip Code 2759 Meadow Dawn Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/04/2019 | | Payee name A Squared Advertising | | | |
| Amount (\$) 600.00 | | Payee address; City; State; Zip Code 539 W Commercece Suite Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 40 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/04/2019 | | 5 Payee name A Squared Advertising | | | |
| 6 Amount (\$) 600.00 | | 7 Payee address; City; State; Zip Code 539 W Commerce Suite 400 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/23/2019 | | Payee name A Squared Advertising | | | |
| Amount (\$) 500.00 | | Payee address; City; State; Zip Code 539 W Commerce Suite 400 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/22/2019 | | Payee name Ed Valentine Booker Industries | | | |
| Amount (\$) 1896.89 | | Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 41 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/28/2019 | | 5 Payee name Ed Valentine Booker Indusgtries | | | |
| 6 Amount (\$) 430.63 | | 7 Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description | |
| | | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/24/2019 | | Payee name Reilly Echols Printing | | | |
| Amount (\$) 1293.00 | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description | |
| | | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/24/2019 | | Payee name Reilly Echols Printing | | | |
| Amount (\$) 7361.00 | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description | |
| | | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|--|
| 1 Total pages Schedule F1: 42 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/16/2019 | | 5 Payee name Master Mark Advertising Agency | | | |
| 6 Amount (\$) 500.00 | | 7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/16/2019 | | Payee name Master Mark Advertising Agency | | | |
| Amount (\$) 3000.00 | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/01/2019 | | Payee name CWRD Properties LLC | | | |
| Amount (\$) 1150.00 | | Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite 200 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 43 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name CWRD Properties LLC | |
| 6 Amount (\$) 1150.00 | 7 Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite 200 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/03/2019 | Payee name Ms CAS | |
| Amount (\$) 487.13 | Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 03/15/2019 | Payee name Ms CAS | |
| Amount (\$) 1351.13 | Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 44 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/06/2019 | 5 Payee name Ms. CAS | |
| 6 Amount (\$) 2269.38 | 7 Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/23/2019 | Candidate / Officeholder name Payee name Ms. CAS | |
| Amount (\$) 4752.18 | Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/15/2019 | Candidate / Officeholder name Payee name ATT | |
| Amount (\$) 620.00 | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-5014 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 45 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/15/2019 | 5 Payee name ATT | |
| 6 Amount (\$) 675.00 | 7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/15/2019 | Payee name ATT | |
| Amount (\$) 682.00 | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/02/2019 | Payee name Jefferson Monuent LLC | |
| Amount (\$) 350.00 | Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 46 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/03/2019 | | 5 Payee name Jefferson Monument LLC | | | |
| 6 Amount (\$) 350.00 | | 7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/02/2019 | | Payee name Jefferson Monument LLC | | | |
| Amount (\$) 350.00 | | Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/16/2019 | | Payee name Chubbys | | | |
| Amount (\$) 23.62 | | Payee address; City; State; Zip Code 7474 S Cockrell Hill Dallas, TX 75236 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 48 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/25/2019 | | 5 Payee name Olive Garden | | | |
| 6 Amount (\$) 27.14 | | 7 Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75116 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/12/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 32.48 | | Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/04/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 21.11 | | Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 50 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/24/2019 | 5 Payee name Ojeda Family Restaurant | |
| 6 Amount (\$) 41.41 | 7 Payee address; City; State; Zip Code 2109 N Hampton Rd Desoto, TX 75115 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | | |
| Date 03/22/2019 | Payee name Cracker Barrel | |
| Amount (\$) 18.60 | Payee address; City; State; Zip Code 1421 N Beckley Ave Desoto, TX 75115 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | | |
| Date 02/20/2019 | Payee name Starbucks | |
| Amount (\$) 22.46 | Payee address; City; State; Zip Code 3420 W Camp Wisdom Rd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 52 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/07/2019 | 5 Payee name Murphy USA | |
| 6 Amount (\$) 33.92 | 7 Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |
| Date 03/03/2019 | Payee name Murphy USA | |
| Amount (\$) 34.31 | Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |
| Date 03/10/2019 | Payee name Murphy USA | |
| Amount (\$) 48.91 | Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 55 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/10/2019 | | 5 Payee name Home Depot | | | |
| 6 Amount (\$) 11.89 | | 7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/22/2019 | | Payee name Home Depot | | | |
| Amount (\$) 47.31 | | Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/21/2019 | | Payee name Home Depot | | | |
| Amount (\$) 67.06 | | Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 56 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/17/2019 | 5 Payee name Home Depot | |
| 6 Amount (\$) 42.94 | 7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |
| Date 02/22/2019 | Payee name Target | |
| Amount (\$) 20.75 | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |
| Date 02/25/2019 | Payee name Target | |
| Amount (\$) 53.02 | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: Tennell Atkins Office sought: _____ Office held: Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 57 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/22/2019 | | 5 Payee name Target | | | |
| 6 Amount (\$) 51.32 | | 7 Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/23/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 50.37 | | Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/13/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 35.71 | | Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 59 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/25/2019 | 5 Payee name John Hamilton | |
| 6 Amount (\$) 1000.00 | 7 Payee address; City; State; Zip Code 325 N. St Paul Suite 335 Dallas, TX 75201 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned \$1,000 contribution |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/25/2019 | Candidate / Officeholder name Sarah Hamilton | |
| Amount (\$) 1000.00 | Payee address; City; State; Zip Code 325 N. St. Paul Suite 335 Dallas, TX 75201 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Other | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned \$1,000 contribution |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Supplemental Report Officeholder

FORM Cover Sheet SR

| | | | | | |
|---|---|--|--------|--|-------------------------------------|
| 1. CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Tennell | MI | | 2. Total Pages Filed: 79 |
| | NICKNAME | LAST Atkins | SUFFIX | | 3. Office Held District 8 |
| 4. SUPPLEMENTAL REPORT TYPE | <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> January 15 <input type="checkbox"/> July 15 </div> <div> <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election </div> <div> <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit </div> <div> <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> Final Report </div> </div> | | | | |
| 5. PERIOD / COVERED | 1/1/2019 THROUGH 3/25/2019 | | | | |
| 6. ELECTION | <div style="display: flex; justify-content: space-between;"> <div>Month Day Year 5/4/2019</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <input type="checkbox"/> N/A </div> </div> | | | | |
| 7. OFFICE-HOLDER | CONTRIBUTION TOTALS | 1. TOTAL OFFICEHOLDER CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | | \$ 0.00 |
| | | 2. TOTAL OFFICEHOLDER CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | | \$ 0.00 |
| | EXPENDITURE TOTALS | 3. TOTAL OFFICEHOLDER EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | | | \$ 0.00 |
| | | 4. TOTAL OFFICEHOLDER EXPENDITURES | | | \$ 0.00 |
| 8. POLITICAL (Campaign) | CONTRIBUTION TOTALS | 5. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | | | \$ 0.00 |
| | | 6. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | | \$ 46,040.00 |
| | EXPENDITURE TOTALS | 7. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS UNLESS ITEMIZED | | | \$ 0.00 |
| | | 8. TOTAL POLITICAL EXPENDITURES | | | \$ 60,909.04 |
| 9. OFFICEHOLDER FUNDS USED FOR CAMPAIGN PURPOSES | | 9. TOTAL DOLLAR AMOUNT OF OFFICEHOLDER CONTRIBUTIONS USED FOR CAMPAIGN EXPENDITURES DURING THE REPORTING PERIOD | | | \$ 0.00 |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p>10. AFFIDAVIT</p> <p style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</p> </div> <div style="width: 55%; text-align: center;"> <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election code.</p> <p>***ELECTRONICALLY CERTIFIED***</p> <p>_____ Signature of Candidate or Officeholder</p> </div> </div> | | | | | |
| <p>Sworn to and subscribed before me, by the said <u>Tennell Atkins</u>, this the <u>5th</u> day of <u>April</u>, 20 <u>19</u>, to certify which, witness my hand and seal of office.</p> | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div>Signature of officer administering oath</div> <div>Printed name of officer administering oath</div> <div>Title of officer administering oath</div> </div> | | | | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/01/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Hiawatha Williams

6 Contributor address;

City; State; Zip Code

1141 Waaterview Lane

Desoto, TX 75115

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/08/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Police Officer PAC

Contributor address;

City; State; Zip Code

1412 Griffin St East

Dallas, TX 75215

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Alan & Joan Walne

Contributor address;

City; State; Zip Code

10020 Caribou Trail

Dallas, TX 75238

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ronald G Steinhart

Contributor address;

City; State; Zip Code

25 Robledo Dr

Dallas, TX 75230-3055

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/06/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Gilbert Aranza

6 Contributor address;

City; State; Zip Code

P.O. Box 601527

Dallas, TX 75360-1527

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dr Charles Ku

Contributor address;

City; State; Zip Code

148 Red Oak Lane

Flower Mound, TX 75028

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/28/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Field Scovell

Contributor address;

City; State; Zip Code

6322 De Loache

Dallas, TX 75225

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/16/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Afisu Ollabimtan

Contributor address;

City; State; Zip Code

74 Buck Trail

Sadler, TX 76264-2789

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/27/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

DELVA KING

6 Contributor address;

City; State; Zip Code

P.O. Box 0

Dallas, TX 77777

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/04/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Carl Sewell

Contributor address;

City; State; Zip Code

3860 W Northwest Hwy Suite 102 Dallas, TX 75220

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael Rader

Contributor address;

City; State; Zip Code

6228 Colleyville Blvd

Colleyville, TX 76034

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sam Coats

Contributor address;

City; State; Zip Code

26 Ryddington Place

Dallas, TX 75230

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/08/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Apartment Association of Greater Dallas -PAC

6 Contributor address;

City; State; Zip Code

5728 LBJ Frwy Suite 100

Dallas, TX 75240

7 Amount of contribution (\$)

2500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/25/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnnie M Green

Contributor address;

City; State; Zip Code

P.O. Box 411458

Dallas, TX 75241-3582

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/29/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dalton L Lott

Contributor address;

City; State; Zip Code

P.O. Box 765209

Dallas, TX 75376-5209

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/23/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Black Firefighter United PAC

Contributor address;

City; State; Zip Code

1830 Park Row Ave

Dallas, TX 75215-2751

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Ronald G Parrish

6 Contributor address;

City; State; Zip Code

1256 Regents Park Ct

Desoto, TX 75115

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/31/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Thomas M Dunning

Contributor address;

City; State; Zip Code

2100 Ross Avenue Suite 1200

Dallas, TX 75207-2739

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/14/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Dennison

Contributor address;

City; State; Zip Code

1303 Woodlawn Ave

Dallas, TX 75208

Amount of contribution (\$)

350.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/02/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Soo Chong

Contributor address;

City; State; Zip Code

927 Condor Dr

Coppell, TX 75019

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

02/11/2019

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Patricia L Jackson

6 Contributor address;

City; State; Zip Code

2711 Meadow Dawn Ln

Dallas, TX 75237-3209

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joseph Kemp

Contributor address;

City; State; Zip Code

1015 N Duncanville Rd

Duncanville, TX 75116

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dorothy Berry Hughes

Contributor address;

City; State; Zip Code

2608 Palo Alto Dr

Dallas, TX 75241-6431

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/10/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Vaugh Thompson

Contributor address;

City; State; Zip Code

P.O. Box 561527

Dallas, TX 75356-1527

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Helen Giddings

6 Contributor address;

City; State; Zip Code

400 S Zang Blvd Suite 1018

Dallas, TX 75208-6843

7 Amount of contribution (\$)

350.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Perfect Hospitality Solutions LLC

Contributor address;

City; State; Zip Code

4300 Mansfield Hwy

Forest Hill, TX 76119

Amount of contribution (\$)

600.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

R Gerald Turner

Contributor address;

City; State; Zip Code

4001 University

Dallas, TX 75205

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

A. A. Long

Contributor address;

City; State; Zip Code

1517 Gailbrook Lane

Dallas, TX 75228

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Mary C Choutka

6 Contributor address;

City; State; Zip Code

1331 Aldenwood Drive

Dallas, TX 75232

7 Amount of contribution (\$)

10.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/08/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Y Thompson

Contributor address;

City; State; Zip Code

6132 Balcony Lane

Dallas, TX 75241

Amount of contribution (\$)

10.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bruce A Stern

Contributor address;

City; State; Zip Code

37 Commonwealth Dr

Lakewood, NJ 87010-4168

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/02/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jackie Bewley

Contributor address;

City; State; Zip Code

2200 S Riverside Drive

Fort Worth, TX 76104

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

03/21/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

John Wiley Price Campaign

6 Contributor address;

City; State; Zip Code

510 E 8th St

Dallas, TX 75203

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/13/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Frank Mihalopoulos

Contributor address;

City; State; Zip Code

4645 N Central Expressway Suite 200 Dallas, TX 75206

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/17/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jacob Johnson

Contributor address;

City; State; Zip Code

1237 Frenchmans Dr

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jeffrey M Tillotson P.C

Contributor address;

City; State; Zip Code

1807 Ross Avenue

Dallas, TX 75201-TX

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/06/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Donald J McNamara

6 Contributor address;

City; State; Zip Code

3899 Maple Ave

Dallas, TX 75219

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/06/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jewel K Parrish

Contributor address;

City; State; Zip Code

1256 Regents Park Ct

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/06/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ann Kim

Contributor address;

City; State; Zip Code

2013 Cottonwood Valley Cir S

Irving, TX 75038

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/13/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Eddie Reeves

Contributor address;

City; State; Zip Code

1142 N Clinton Ave

Dallas, TX 75208

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/12/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Trelaine M Mapp

6 Contributor address;

City; State; Zip Code

12612 Beech Tree Ln

Euless, TX 76040-3428

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/12/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Ming Tzong

Contributor address;

City; State; Zip Code

6922 Aspen Creek Ln

Dallas, TX 75252-2702

Amount of contribution (\$)

800.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ryan Garcia

Contributor address;

City; State; Zip Code

165 Cameron Dr

Weston, FL 33326

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Johnny Aguinaga

Contributor address;

City; State; Zip Code

3608 Granada Ave

Dallas, TX 75205-204

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
12 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/05/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Ibrahim Haddad

6 Contributor address;

City; State; Zip Code

4712 Holy Tree Dr

Dallas, TX 75287-7219

7 Amount of contribution (\$)

250.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/07/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Evelyn Conner Hicks

Contributor address;

City; State; Zip Code

6840 Talbot Pkwy

Dallas, TX 75232

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Donald W Hicks Sr

Contributor address;

City; State; Zip Code

5620 Live Oak St Suite A

Dallas, TX 75206-8057

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Ragsdale

Contributor address;

City; State; Zip Code

3611 Dunbar Street

Dallas, TX 75216

Amount of contribution (\$)

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/04/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Pettis Norman

6 Contributor address;

City; State; Zip Code

1430 Bar Habor Circle

Dallas, TX 75232

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

01/31/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dough Hunt

Contributor address;

City; State; Zip Code

3404 N Interstate 35-E

Lancaster, TX 75134

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/01/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Demetris Sampson

Contributor address;

City; State; Zip Code

P.O. Box 2252

Dallas, TX 75223

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dallas Black Firefighter Retiree-PAC

Contributor address;

City; State; Zip Code

P.O. Box 226983

Dallas, TX 75222-6983

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/01/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Brenda Walker

6 Contributor address;

City; State; Zip Code

310 Calvary Dr

Euless, TX 76040

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/01/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

M Rideau

Contributor address;

City; State; Zip Code

10000 SMU Bx 75-3183

Dallas, TX 75275

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/06/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Dora L Cole

Contributor address;

City; State; Zip Code

3883 Happy Canyon Dr

Dallas, TX 75241

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Robert E Hasty

Contributor address;

City; State; Zip Code

13804 Wooded Creek Drive

Dallas, TX 75244

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

01/28/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Laurie L Hasty

6 Contributor address;

City; State; Zip Code

4210 Beaver Book Place

Dallas, TX 75229

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/16/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lawrence E Siegel

Contributor address;

City; State; Zip Code

5604 Palomar Lane

Dallas, TX 75229-6418

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brian Schwartz

Contributor address;

City; State; Zip Code

6606 Briar Cove

Dallas, TX 75240

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

General Drivers Warehousemen and Helpers

Contributor address;

City; State; Zip Code

1007 Jonelle

Dallas, TX 75217

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

02/11/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Coats Rose P.C.

6 Contributor address;

City; State; Zip Code

9 Greenway Plaza Suite 1100

Houston, TX 77046

7 Amount of contribution (\$)

500.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/04/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ruth Dade

Contributor address;

City; State; Zip Code

1553 Duet Dr

Dallas, TX 75241-3726

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Paul Hauang

Contributor address;

City; State; Zip Code

422 Ridgewood

Richardson, TX 75080

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/25/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerald Alley

Contributor address;

City; State; Zip Code

606 Loch Chalet Ct

Arlington, TX 75012-3469

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

01/29/2019

Campaign
Contribution**5** Full name of contributor☐ out-of-state PAC (ID#: _____)

Lucious L Williams

6 Contributor address;

City; State; Zip Code

1421 Covinnington Dr

Desoto, TX 75115

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

03/23/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Michael B Russell

Contributor address;

City; State; Zip Code

1065 Peachtree St NE Suite 3104 Atlanta, GA 30309-3980

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/11/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Brown Revocable Trust

Contributor address;

City; State; Zip Code

P.O. Box 29615

Dallas, TX 75229

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2019

Campaign
Contribution

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lucy C Billingsley

Contributor address;

City; State; Zip Code

1722 Routh St Suite 770

Dallas, TX 75201

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 19**2** FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)**4** Date

01/17/2019

Campaign
Contribution**5** Full name of contributor

Maria E Garcia

☐ out-of-state PAC (ID#: _____)**6** Contributor address;

68 W Jefferson Blvd

City; State; Zip Code

Dallas, TX 75206-4724

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

02/02/2019

Campaign
Contribution

Full name of contributor

Larry L Offutt

☐ out-of-state PAC (ID#: _____)

Contributor address;

6038 Bryan Pkwy

City; State; Zip Code

Dallas, TX 75206-8002

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Campaign
Contribution

Full name of contributor

Johnny King

☐ out-of-state PAC (ID#: _____)

Contributor address;

1243 Pleasant Run Road

City; State; Zip Code

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/05/2019

Campaign
Contribution

Full name of contributor

Delva King

☐ out-of-state PAC (ID#: _____)

Contributor address;

1243 Pleasant Run Road

City; State; Zip Code

Desoto, TX 75115

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 19

2 FILER NAME

Tennell Atkins

3 Filer ID (Ethics Commission Filers)

4 Date

02/11/2019

Campaign
Contribution

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim S Lake Jr

6 Contributor address;

City; State; Zip Code

1704 W Colorado Blvd

Dallas, TX 75208

7 Amount of contribution (\$)

1000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 2 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name Ronald Wright | |
| 6 Amount (\$) 100.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/04/2019 | Payee name Ronald Wright | |
| Amount (\$) 100.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 7513 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Odell Lee | |
| Amount (\$) 192.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: 3 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/29/2019 | 5 Payee name CCP Printing | |
| 6 Amount (\$) 2221.71 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 5534 S Hampton Road Dallas, TX 75232 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/15/2019 | Payee name Toni Scroggins | |
| Amount (\$) 750.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/22/2019 | Payee name Eula Grant | |
| Amount (\$) 45.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | |
|--|---|--|-------------------------------|---------------|
| 1 Total pages Schedule F1: 4 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) | | |
| 4 Date 03/08/2019 | 5 Payee name Juanita Ayala | | | |
| 6 Amount (\$) 60.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 3037 O Bannon Dr Dallas, TX 75224 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | | |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Candidate / Officeholder name</td> <td style="width: 25%; border: none;">Office sought</td> <td style="width: 25%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |
| Date 02/15/2019 | Payee name Gail Terrell | | | |
| Amount (\$) 500.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Manager | | |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Candidate / Officeholder name</td> <td style="width: 25%; border: none;">Office sought</td> <td style="width: 25%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |
| Date 03/11/2019 | Payee name Gail Terrell | | | |
| Amount (\$) 600.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code P.O. Box 41561 Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Manager | | |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Candidate / Officeholder name</td> <td style="width: 25%; border: none;">Office sought</td> <td style="width: 25%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 6 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/01/2019 | 5 Payee name Black Premier Ent. Network | |
| 6 Amount (\$) 150.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/01/2019 | Payee name Black Premier Ent. Network | |
| Amount (\$) 150.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 2601 Hyacinth Mesquite, TX 75181 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/20/2019 | Payee name The Order Desk | |
| Amount (\$) 2264.80 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9840 Monroe Dr Suite 100 Dallas, TX 75220 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 7 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/09/2019 | 5 Payee name Paul Wiley | |
| 6 Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/15/2019 | Payee name Paul Wiley | |
| Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 03/01/2019 | Payee name Paul Wiley | |
| Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 8 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/04/2019 | 5 Payee name Paul Wiley | |
| 6 Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 125 S Murdeaux Suite 133 Dallas, TX 75217 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 03/01/2019 | Payee name Margot Williams | |
| Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 17517 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/09/2019 | Payee name Jackie Wheeler | |
| Amount (\$) 50.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 7516 Olusta Drive Dallas, TX 75217 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 Total pages Schedule F1: 9 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/09/2019 | | 5 Payee name Kimberly Green | | | |
| 6 Amount (\$) 120.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/09/2019 | | Payee name Andre Luster | | | |
| Amount (\$) 120.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/09/2019 | | Payee name Tahvio Luster | | | |
| Amount (\$) 80.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2052 Royal Lane Suite 1205 Dallas, TX 75229 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 Total pages Schedule F1: 10 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/05/2019 | | 5 Payee name Cedric Thompson | | | |
| 6 Amount (\$) 750.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 9218 Linda Vista Rowlett, TX 75088 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/08/2019 | | Payee name Ruth Dade | | | |
| Amount (\$) 162.50 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/22/2019 | | Payee name Ruth Dade | | | |
| Amount (\$) 197.50 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 Total pages Schedule F1: 11 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/01/2019 | | 5 Payee name Ruth Dade | | | |
| 6 Amount (\$) 240.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1553 Duet Dr Dallas, TX 75241 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/22/2019 | | Payee name Connie Buford | | | |
| Amount (\$) 90.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/01/2019 | | Payee name Connie Buford | | | |
| Amount (\$) 187.50 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 12 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/06/2019 | 5 Payee name Connie Buford | |
| 6 Amount (\$) 200.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 1416 Hudspeth St Dallas, TX 75116 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/08/2019 | Payee name Eula Grant | |
| Amount (\$) 92.50 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Eula Grant | |
| Amount (\$) 175.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 9608 Valley Mills Ln Dallas, TX 75227 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|---|--|
| 1 Total pages Schedule F1: 13 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/08/2019 | | 5 Payee name Detra Reeves | | | |
| 6 Amount (\$) 110.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/25/2019 | | Payee name Detra Reeves | | | |
| Amount (\$) 37.50 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/01/2019 | | Payee name Detra Reeves | | | |
| Amount (\$) 55.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1000 S Muskogee Dr Dallas, TX 75217 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: 14 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/22/2019 | 5 Payee name Robernett Jones | |
| 6 Amount (\$) 80.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/08/2019 | Payee name Robernett Jones | |
| Amount (\$) 30.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 03/01/2019 | Payee name Robernett Jones | |
| Amount (\$) 160.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 4210 Elsie Faye HegginsDallas, TX 75210 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 15 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/08/2019 | | 5 Payee name Odell Lee | | | |
| 6 Amount (\$) 90.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1331 Mill Stream Dr Dallas, TX 75232 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/01/2019 | | Payee name Shenigua Jones | | | |
| Amount (\$) 117.50 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 4210 Hatcher st Dallas, TX 75210 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/08/2019 | | Payee name Shenigua Jones | | | |
| Amount (\$) 20.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 4210 Hatcher st Dallas, TX 75210 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: 16 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/08/2019 | 5 Payee name Lakisha Grandy | |
| 6 Amount (\$) 195.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 1414 Bellevview St Suite 139 Dallas, TX 75215 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense work |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/22/2019 | Payee name Brenda Lee Barnes | |
| Amount (\$) 30.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 400 E Wintergreen Rd Suite 343 Desoto, TX 75115 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense worker |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/16/2019 | Payee name Fast Signs | |
| Amount (\$) 268.90 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 6940 Marvin D Love Fwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 17 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/16/2019 | | 5 Payee name Fast Signs | | | |
| 6 Amount (\$) 526.23 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 6940 Marvin D Love Frwy Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/24/2019 | | Payee name Office Depot | | | |
| Amount (\$) 148.79 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237-3526 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/04/2019 | | Payee name Metro PCS | | | |
| Amount (\$) 200.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 18 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/17/2019 | | 5 Payee name Metro PCS | | | |
| 6 Amount (\$) 238.08 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 03/04/2019 | | Payee name Tennell Atkins Metro PCS | | | |
| Amount (\$) 200.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/17/2019 | | Payee name Tennell Atkins Metro PCS | | | |
| Amount (\$) 207.77 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd, Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 19 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/09/2019 | | 5 Payee name Office Depot | | | |
| 6 Amount (\$) 9.61 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/21/2019 | | Payee name Office Depot | | | |
| Amount (\$) 13.64 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/16/2019 | | Payee name Office Depot | | | |
| Amount (\$) 15.47 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: 20 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/13/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 27.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/10/2019 | Candidate / Officeholder name Office Depot | |
| Amount (\$) 102.81 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/16/2019 | Candidate / Officeholder name Office Depot | |
| Amount (\$) 118.77 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: 21 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/02/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 122.28 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/17/2019 | Payee name Office Depot | |
| Amount (\$) 130.65 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 01/24/2019 | Payee name Office Depot | |
| Amount (\$) 148.79 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 22 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/14/2019 | 5 Payee name Office Depot | |
| 6 Amount (\$) 157.56 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 01/24/2019 | Payee name Office Depot | |
| Amount (\$) 269.96 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 02/18/2019 | Payee name Dollar Tree Store 2076 | |
| Amount (\$) 20.32 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 4241 W Camp Wisdom Rd Suite A Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 23 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/22/2019 | | 5 Payee name Every Season | | | |
| 6 Amount (\$) 6.20 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 544 Wheatland Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/28/2019 | | Payee name Target | | | |
| Amount (\$) 26.30 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/04/2019 | | Payee name Dollar Deals | | | |
| Amount (\$) 9.70 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3207 E Kirmwood Suite Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 24 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/04/2019 | | 5 Payee name Dollar Tree Store 5915 | | | |
| 6 Amount (\$) 27.06 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1005 S Cockrell Hill Rd Suite 201 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/04/2019 | | Payee name Party City | | | |
| Amount (\$) 22.68 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Suite 410 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/04/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 28.83 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 25 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/05/2019 | | 5 Payee name Wal Mart | | | |
| 6 Amount (\$) 58.50 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/17/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 291.57 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3155 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/20/2019 | | Payee name Sams Wholesale Club | | | |
| Amount (\$) 255.48 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2900 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 26 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/27/2019 | 5 Payee name Walgreens Store 05920 | |
| 6 Amount (\$) 9.98 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 1060 W Camp Wisdom Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/17/2019 | Payee name Tennell Atkins Wireless Stop | |
| Amount (\$) 448.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/17/2019 | Payee name SAMS | |
| Amount (\$) 400.60 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 2900 W WHEATLAND Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 27 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/21/2019 | | 5 Payee name Chaarco Broiler Steak House | | | |
| 6 Amount (\$) 22.92 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 413 W Jefferson Blvd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/23/2019 | | Payee name Rice Garden | | | |
| Amount (\$) 33.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 4016 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/22/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 55.47 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2550 W Redbird Lane Suite 404 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 28 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/08/2019 | | 5 Payee name Delta Charlies Bar & Grill | | | |
| 6 Amount (\$) 28.12 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 5303 Challenger Suite 60 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/11/2019 | | Payee name Outback Steakhouse Store 4475 | | | |
| Amount (\$) 31.06 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 7707 N Interstate 35-E Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/05/2019 | | Payee name Dunkin Donuts | | | |
| Amount (\$) 4.12 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 650 Uptown Blvd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 29 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/15/2019 | 5 Payee name Colters TX BBQ | |
| 6 Amount (\$) 31.28 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 3904 W Camp Wisdom Rd, Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/27/2019 | Payee name Tennell Atkins Pizza Hut | |
| Amount (\$) 14.36 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 3333 W Camp Wisdom Rd Suite 116 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/26/2019 | Payee name Saltgrass | |
| Amount (\$) 49.42 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 747 North Highway 67 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 30 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/27/2019 | | 5 Payee name McDonalds | | | |
| 6 Amount (\$) 2.91 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 125 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 02/22/2019 | | Payee name JJ Fish and Chicken | | | |
| Amount (\$) 20.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3302 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/18/2019 | | Payee name JJ Fish and Chicken | | | |
| Amount (\$) 21.10 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3302 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 31 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/11/2019 | | 5 Payee name El Fenix | | | |
| 6 Amount (\$) 28.61 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/15/2019 | | Payee name El Fenix | | | |
| Amount (\$) 32.39 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/11/2019 | | Payee name El Fenix | | | |
| Amount (\$) 303.10 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 32 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 02/11/2019 | 5 Payee name El Fenix | |
| 6 Amount (\$) 1551.92 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 1601 McKinney Ave Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/06/2019 | Payee name Lubys | |
| Amount (\$) 32.97 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/02/2019 | Payee name Lubys | |
| Amount (\$) 38.92 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 5600 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 33 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/20/2019 | | 5 Payee name Chilis | | | |
| 6 Amount (\$) 17.36 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2503 W Wheatland Suite 1405 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/20/2019 | | Payee name Chilis | | | |
| Amount (\$) 5.41 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |
| Date 01/17/2019 | | Payee name Chilis | | | |
| Amount (\$) 9.72 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 34 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/20/2019 | | 5 Payee name Chilis | | | |
| 6 Amount (\$) 18.79 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2503 W Wheatland Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/10/2019 | | Payee name Chilis | | | |
| Amount (\$) 28.77 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2503 W Wheatland Suite 1405 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/10/2019 | | Payee name KFC | | | |
| Amount (\$) 8.96 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3415 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 35 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/20/2019 | 5 Payee name KFC | |
| 6 Amount (\$) 32.32 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 3415 W Camp Wisdom Rd Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/19/2019 | Candidate / Officeholder name The Island Spot | |
| Amount (\$) 72.20 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 309 W Jefferson Blvd Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/08/2019 | Candidate / Officeholder name Shell | |
| Amount (\$) 37.27 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: 36 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/14/2019 | 5 Payee name Shell | |
| 6 Amount (\$) 42.74 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| | <div style="display: flex; justify-content: space-between;"> <div>9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div> | |
| Date 01/05/2019 | Payee name Shell | |
| Amount (\$) 42.83 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas |
| | <div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div> | |
| Date 01/07/2019 | Payee name Shell | |
| Amount (\$) 51.98 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 8207 S Hampton Road Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas |
| | <div style="display: flex; justify-content: space-between;"> <div>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</div> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 Total pages Schedule F1: 37 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/30/2019 | | 5 Payee name Murphy USA | | | |
| 6 Amount (\$) 1.78 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/30/2019 | | Payee name Murphy USA | | | |
| Amount (\$) 33.45 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/31/2019 | | Payee name Murphy USA | | | |
| Amount (\$) 45.38 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3102 W Wheatland Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 38 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/25/2019 | | 5 Payee name Joe Pool Station | | | |
| 6 Amount (\$) 250.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 5521 S Hampton Road Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/03/2019 | | Payee name Highland Hills Station | | | |
| Amount (\$) 250.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3655 Simpson Stuart Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/23/2019 | | Payee name Edward Gray | | | |
| Amount (\$) 175.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2225 East Randol Mill Suite 427 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|---|--|--|--|
| 1 Total pages Schedule F1: 39 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/15/2019 | | 5 Payee name Edward Gray | | | |
| 6 Amount (\$) 175.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2225 East Randol Mill Suite 427 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/15/2019 | | Payee name Ernest Slaughter | | | |
| Amount (\$) 1500.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2759 Meadow Dawn Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 02/04/2019 | | Payee name A Squared Advertising | | | |
| Amount (\$) 600.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 539 W Commerecee Suite 440 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: 40 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/04/2019 | 5 Payee name A Squared Advertising | |
| 6 Amount (\$) 600.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 539 W Commerce Suite 400 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 01/23/2019 | Payee name A Squared Advertising | |
| Amount (\$) 500.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 539 W Commerce Suite 400 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date 02/22/2019 | Payee name Ed Valentine Booker Industries | |
| Amount (\$) 1896.89 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 41 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/28/2019 | | 5 Payee name Ed Valentine Booker Industries | | | |
| 6 Amount (\$) 430.63 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2344 Farrington Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/24/2019 | | Payee name Reilly Echols Printing | | | |
| Amount (\$) 1293.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/24/2019 | | Payee name Reilly Echols Printing | | | |
| Amount (\$) 7361.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-2358 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Printing Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: 42 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 01/16/2019 | 5 Payee name Master Mark Advertising Agency | |
| 6 Amount (\$) 500.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 01/16/2019 | Payee name Master Mark Advertising Agency | |
| Amount (\$) 3000.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| Date 02/01/2019 | Payee name CWRD Properties LLC | |
| Amount (\$) 1150.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 2000 E Lamar Blvd Suite 710 Dallas, TX 75237 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate / Officeholder name Office sought Office held | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 44 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/06/2019 | | 5 Payee name Ms. CAS | | | |
| 6 Amount (\$) 2269.38 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/23/2019 | | Payee name Ms. CAS | | | |
| Amount (\$) 4752.18 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 217 N Interstate 35-E Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard sign/advertising | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/15/2019 | | Payee name ATT | | | |
| Amount (\$) 620.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237-5014 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 45 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/15/2019 | | 5 Payee name ATT | | | |
| 6 Amount (\$) 675.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/15/2019 | | Payee name ATT | | | |
| Amount (\$) 682.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code P.O. Box 3333 Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 01/02/2019 | | Payee name Jefferson Monuent LLC | | | |
| Amount (\$) 350.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|--|--|--|--|--|--|
| 1 Total pages Schedule F1: 46 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/03/2019 | | 5 Payee name Jefferson Monument LLC | | | |
| 6 Amount (\$) 350.00 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/02/2019 | | Payee name Jefferson Monument LLC | | | |
| Amount (\$) 350.00 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1350 Manufacturing St Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 03/16/2019 | | Payee name Chubbys | | | |
| Amount (\$) 23.62 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 7474 S Cockrell Hill Dallas, TX 75236 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 48 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/25/2019 | | 5 Payee name Olive Garden | | | |
| 6 Amount (\$) 27.14 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 639 N Cockrell Hill Duncanville, TX 75116 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/12/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 32.48 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/04/2019 | | Payee name Lisa Soul Food Cafe | | | |
| Amount (\$) 21.11 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2550 W Red Bird Ln Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 50 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/24/2019 | | 5 Payee name Ojeda Family Restaurant | | | |
| 6 Amount (\$) 41.41 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2109 N Hampton Rd Desoto, TX 75115 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/22/2019 | | Payee name Cracker Barrel | | | |
| Amount (\$) 18.60 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1421 N Beckley Ave Desoto, TX 75115 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/20/2019 | | Payee name Starbucks | | | |
| Amount (\$) 22.46 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3420 W Camp Wisdom Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: 51 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/23/2019 | | 5 Payee name Outback Steakhouse | | | |
| 6 Amount (\$) 24.35 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 1101 N I-35 Interstate Desoto, TX 75115 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/07/2019 | | Payee name Outback Steakhouse | | | |
| Amount (\$) 77.10 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 1101 N I-35 Interstate Desoto, TX 75115 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/22/2019 | | Payee name Saltgrass Steakhouse | | | |
| Amount (\$) 90.88 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 747 N Hwy 67 Cedar Hill, TX 75104 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1: 52 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/07/2019 | | 5 Payee name Murphy USA | | | |
| 6 Amount (\$) 33.92 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/03/2019 | | Payee name Murphy USA | | | |
| Amount (\$) 34.31 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/10/2019 | | Payee name Murphy USA | | | |
| Amount (\$) 48.91 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3102 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 54 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 01/19/2019 | | 5 Payee name Office Depot | | | |
| 6 Amount (\$) 32.45 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/23/2019 | | Payee name Office Depot | | | |
| Amount (\$) 185.09 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/23/2019 | | Payee name Office Depot | | | |
| Amount (\$) 469.52 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39759 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 55 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 02/10/2019 | | 5 Payee name Home Depot | | | |
| 6 Amount (\$) 11.89 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/22/2019 | | Payee name Home Depot | | | |
| Amount (\$) 47.31 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/21/2019 | | Payee name Home Depot | | | |
| Amount (\$) 67.06 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 56 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/17/2019 | | 5 Payee name Home Depot | | | |
| 6 Amount (\$) 42.94 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 2901 W Wheatland Rd Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/22/2019 | | Payee name Target | | | |
| Amount (\$) 20.75 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/25/2019 | | Payee name Target | | | |
| Amount (\$) 53.02 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|--|--|
| 1 Total pages Schedule F1: 57 of 59 | | 2 FILER NAME Tennell Atkins | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 03/22/2019 | | 5 Payee name Target | | | |
| 6 Amount (\$) 51.32 Campaign Funds for Campaign Expenditures | | 7 Payee address; City; State; Zip Code 39739 LBJ Frwy Dallas, TX 75237 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 02/23/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 50.37 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |
| Date 03/13/2019 | | Payee name Wal Mart | | | |
| Amount (\$) 35.71 Campaign Funds for Campaign Expenditures | | Payee address; City; State; Zip Code 3155 W Wheatland Rd Dallas, TX 75237 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supply | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name Tennell Atkins | | Office sought Office held Council District 8 | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

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

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

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

| | | |
|---|---------------------------------------|--|
| 1 Total pages Schedule F1: 59 of 59 | 2 FILER NAME Tennell Atkins | 3 Filer ID (Ethics Commission Filers) |
|---|---------------------------------------|--|

| | |
|---------------|---------------------|
| 4 Date | 5 Payee name |
| 03/25/2019 | John Hamilton |

| | |
|--|---|
| 6 Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | 7 Payee address; City; State; Zip Code 325 N. St Paul Suite 3350 Dallas, TX 75201 |
|--|---|

| | | |
|--|---|--|
| <p>8</p> <p>PURPOSE OF EXPENDITURE</p> | <p>(a) Category (See Categories listed at the top of this schedule)</p> <p>Other</p> | <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p> <p><input type="checkbox"/> Check if Austin, TX, officeholder living expense</p> <p>Returned \$1,000 contribution</p> |
|--|---|--|

| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|
|--|-------------------------------|---------------|-------------|

| | |
|------------|----------------|
| Date | Payee name |
| 03/25/2019 | Sarah Hamilton |

| | |
|---|--|
| Amount (\$) 1000.00 Campaign Funds for Campaign Expenditures | Payee address; City; State; Zip Code 325 N. St. Paul Suite 3350 Dallas, TX 75201 |
|---|--|

| | | |
|---------------------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
| | Other | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Returned \$1,000 contribution |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|
|--|-------------------------------|---------------|-------------|

| Date | Payee name |
|------|------------|
|------|------------|

| | |
|-------------|--------------------------------------|
| Amount (\$) | Payee address; City; State; Zip Code |
|-------------|--------------------------------------|

| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|---------------------------------------|---|--|
| | | |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|
|--|-------------------------------|---------------|-------------|

Forms provided by Texas Ethics Commission